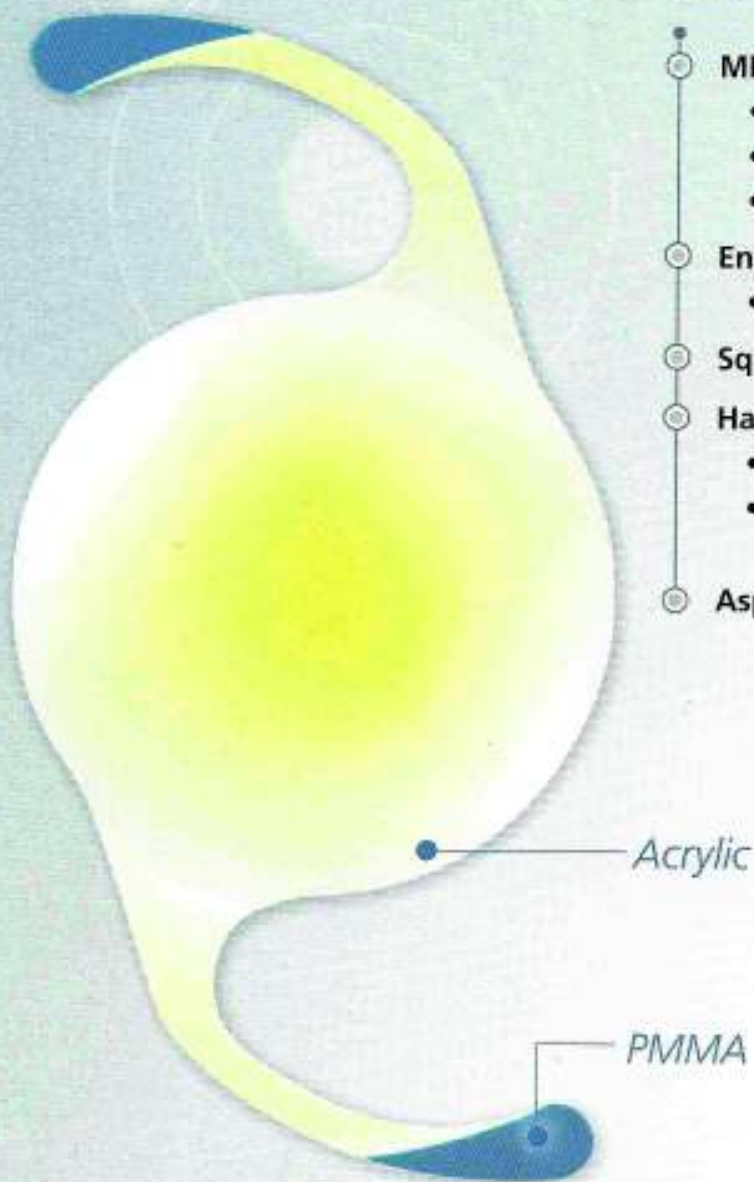


## AF-1 iMics1

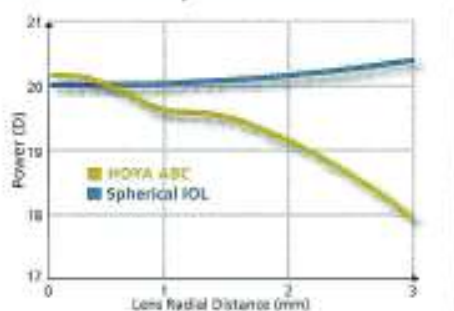
- **MICS compatible**
  - 1.8mm sclerocorneal incision
  - 2.0mm corneal incision
  - Without wound-assisted technique
- **Enabling one-step implantation**
  - Auto-tucking mechanism in both haptics
- **Square-edged design**
- **Haptics made of PMMA and soft acrylic**
  - Enhanced visibility of haptic tip
  - Prevent undesirable adherence of haptic to optic
- **Aspheric IOL (HOYA's unique ABC Design)**



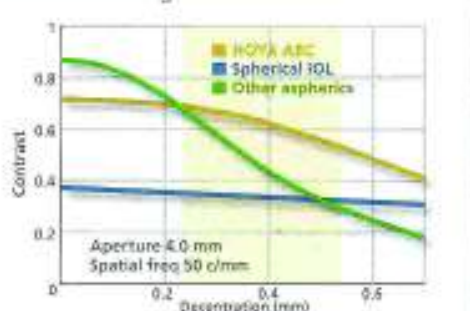
### ▶ ABC optic (HOYA Aspheric Balanced Curve design)

- Progressive combination of optical balance from spherical and aspherical design.
- Excellent centration minimises influence of an offset pupil or capsular bag.
- Better image quality and contrast sensitivity

Combination of Optical Balance



Contrast Settings



- Mean value of decentration: 0.24-0.53 M. Rynders, W. Chisohn, L. N. Thibos, *J. Opt. Soc. Am., A*, 12, 2348-2357 (1995)
- M. Baumeister, B. Niekham, J. Strobel, T. Kohren, "Tilt and decentration of three-piece foldable high-refractive silicone and hydrophobic acrylic intraocular lenses with 6 mm optics in an individual comparison," *Am. J. Ophthalmol.*, 140 (6), 1053-1058, 2005
- K. Hayashi, M. Harada, H. Hayashi, F. Nakao, and H. Hayashi, "Decentration and Tilt of Polymethyl Methacrylate, Silicone, and Acrylic Soft Intraocular Lenses," *Ophthalmology* 104(5):793-798 (1997)
- P. Rozakis and S. Marco, "Phakometry and lens tilt and decentration using a custom-developed Purkinje imaging apparatus: validation and measurements," *J. Opt. Soc. Am., Opt. Image Sci. Vis.*, 23 (3), 509-520, 2006.

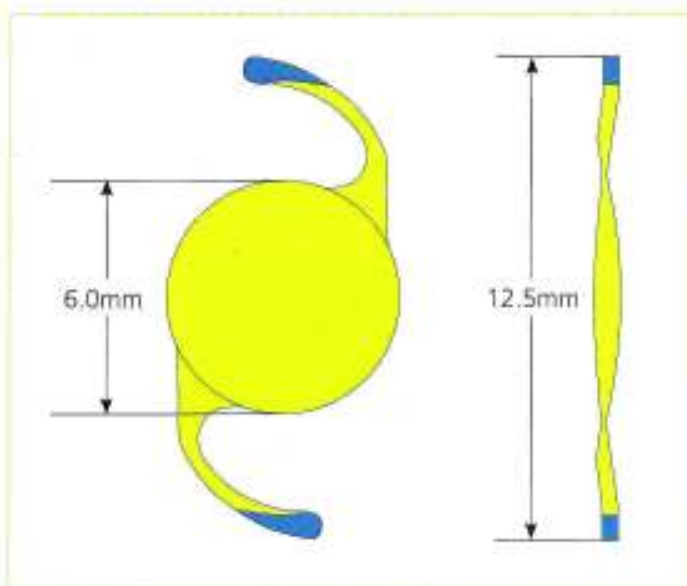
### ▶ Enhanced Sharp-edged Design



### ▶ Recommended Incision Size

Type-N18 Cartridge		
Incision Size	Sclerocorneal	1.8mm
	Corneal	2.0mm

### ▶ Design Characteristics



Model name	NY-60
Specification	Aspheric blue-filtering*
Optic material	Hydrophobic acrylic
Haptic material	Hydrophobic acrylic and PMMA
Optics diameter	6.0mm
Overall length	12.5mm
Power range	+6.00D ~ +30.00D (in 0.5D increments)
Estimated A-constant	118.4**

\* The AF-1 iMics I NY-60 achieves a transmittance factor, which is close to that of the human lens. It blocks not only UV-light but also reduces short-wave light (blue light).

\*\* The numbers of A-constant mentioned as above is presented as guidelines only for lens power calculations. It is recommendable that A-constant measurements be based on the surgeon's experience and measuring equipment.

## ► Lens Loading

1



As illustrated in the picture, hold the cartridge and fill the loading chamber (as shaded) with adequate viscoelastic.

2



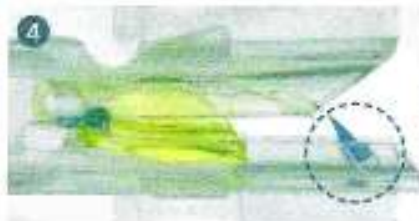
Fold the IOL by pushing the moving panel of the lens case inward and then remove the folded IOL with forceps.

3



With the cartridge still in its holder and the leading haptic extending forward, load the IOL into the cartridge.

4



Gently push the IOL into the cartridge until the leading haptic becomes tucked, as shown in the picture. Ensure that the trailing haptic is not sticking out of the cartridge.

5



Remove the loaded cartridge from the holder.

6



Hold the 2 wings of the cartridge and place the loaded cartridge onto the injector.

## ► Handling Method and One-step Implantation

1



### Tucking of trailing haptic

Slowly advance the metal plunger to tuck the trailing haptic inward which will subsequently push the rim of the optic towards the tip of the cartridge.

2



### Both haptics tucked

Make sure that both leading and trailing haptics are auto-tucked correctly, as shown in the picture.

3



### Bevel down insertion

With the bevel facing down, insert the cartridge into the eye through the incision.

4



### Rotation of the screw

Hold the body of the injector with one hand and rotate the screw clockwise with the other hand to release the IOL.

5



### Smooth lens delivery

Release the IOL from the cartridge into the capsular bag through the incision whilst both haptics remain in "tucked" state.

6



### Finish

One-step implantation is completed.



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