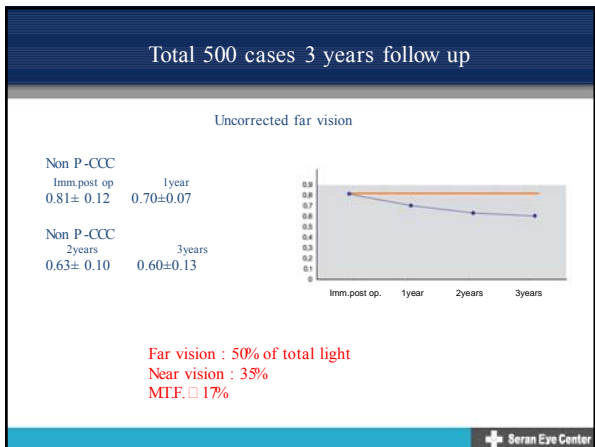
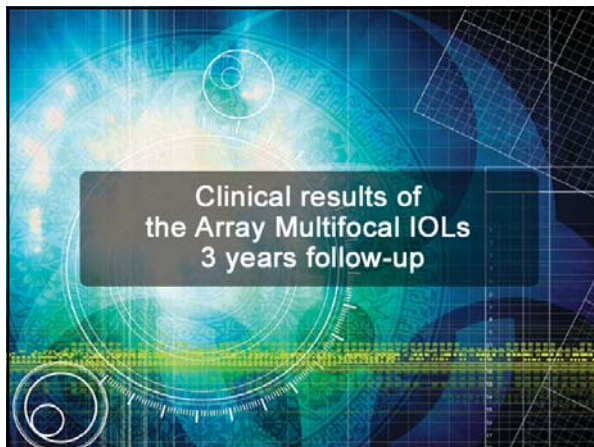
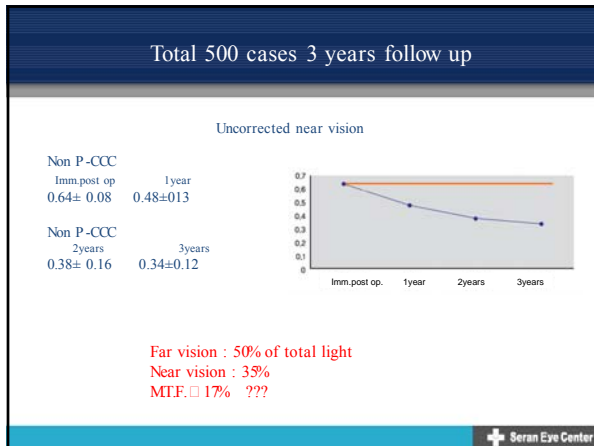


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- ### Critical Elements for Success
- Patient Selection
  - Accurate Biometry  
( + astigmatism control )
  - Surgical Technique
  - Ideal Multifocal IOLs

*Posterior capsule opacification  
is critical obstacles for near vision  
in multifocal IOLs.*





### Method

One surgeon : same operation

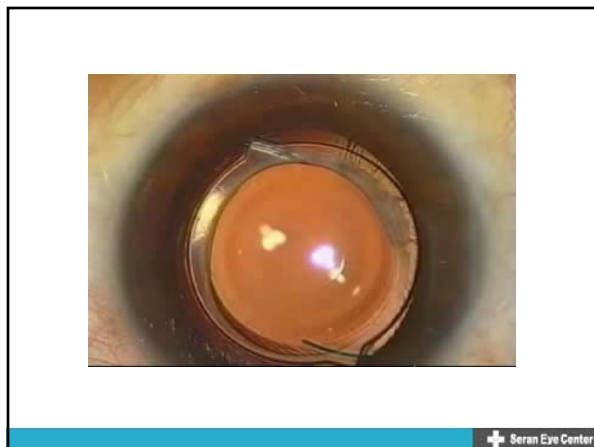
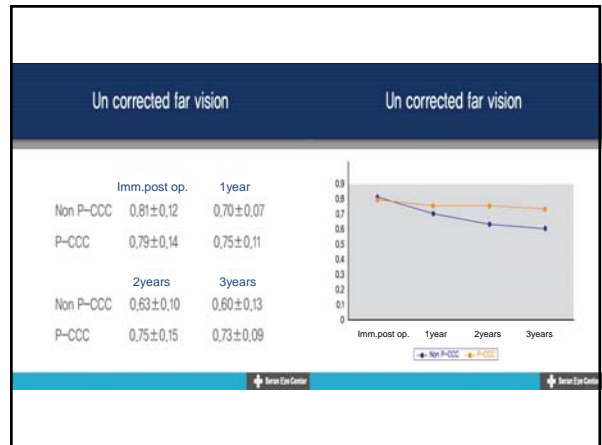
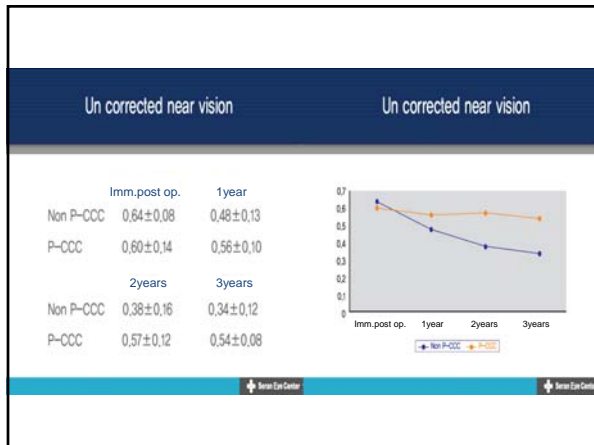
- Group I ( Non P-CCC ) : multifocal lens 100eyes
- Group II ( P-CCC ) : multifocal lens + P-CCC : 100eyes

#### Examination

- V/A at near & far
- C.S.T.
- Yagging rate

Clinical results of the Array multifocal IOLs with posterior capsulorhexis : 3 years follow-up

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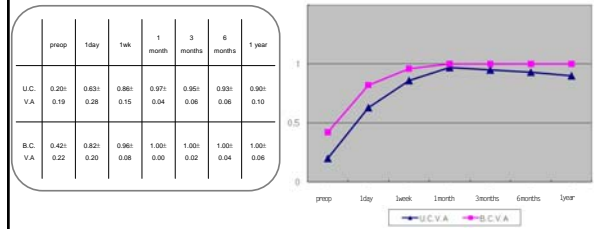
### Clinical results of the AcrySof Restor IOLs 1 year follow-up

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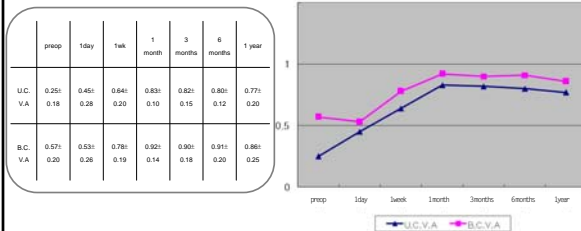
## Differences between Array lens study & Restor lens study

- **Patient Selection**  
(Patient's cost ; 4 times higher)
- **Accurate Biometry( + Astigmatism control )**  
both conventional A scan & IOL master
- **Perfect C.C.C.**  
(unique sticky nature of hydrophobic acrylate?)

## Distance Visual Acuity (N=100)

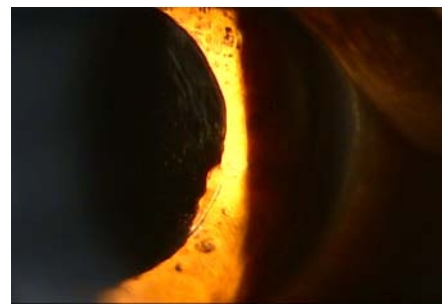


## Near Visual Acuity (N=100) at 33cm



## Complications of Multifocal IOLs

- **Why are you afraid of multifocal IOL implantation?**
  - Unsatisfactory visual acuity (Near & Far)
  - Unwanted visual disturbances (Glare & Halo...)
- caused by
  - **Inaccurate Biometry, Astigmatism**
  - **Improper IOL positioning (tilting & decentration...)**
  - **P.C.O.**



**Thank you**