



BY LINDSEY GETZ

Better Vision, Far and Near

The segmented design of Lenstec's ClearView 3 multifocal IOL minimizes visual disturbances, such as halos or glare.

To achieve an optimal visual outcome after cataract surgery, it is necessary to match the best IOL for each patient. Fortunately, surgeons today have a variety of lens options to help make that optimal fit more attainable. For presbyopic patients who could benefit from a multifocal lens, a new option recently approved by the U.S. Food and Drug Administration (FDA) appears to be a patient-pleasing choice: Lenstec's ClearView 3 IOL.

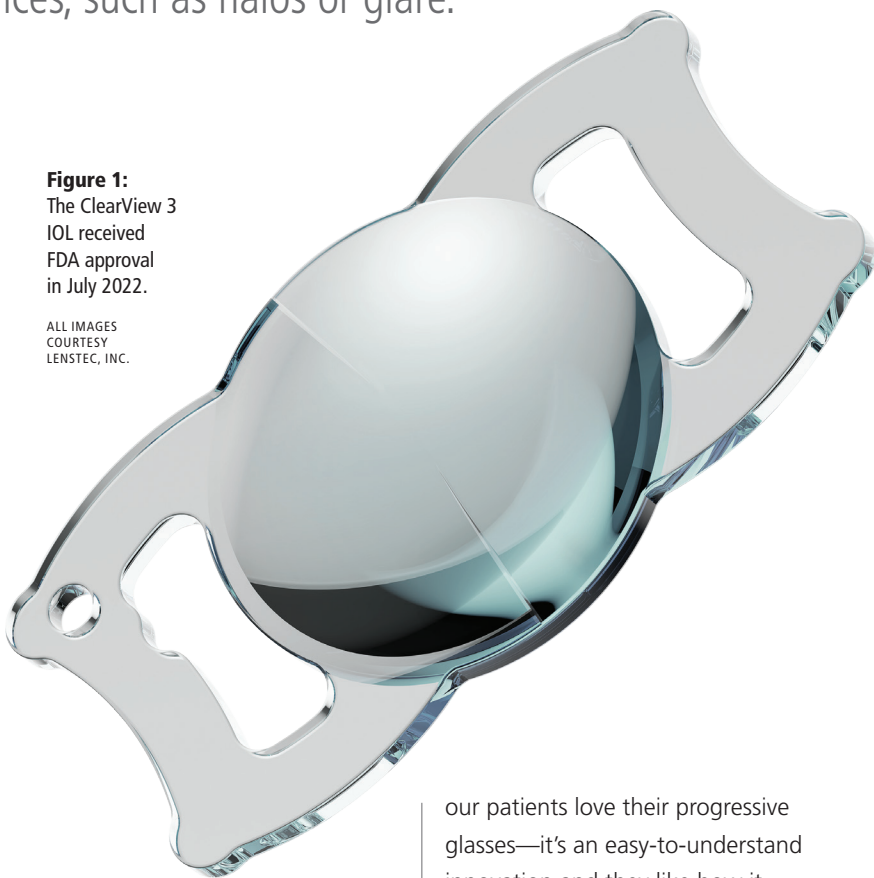
ClearView 3—previously known as the SBL-3—is an asymmetric multifocal refractive IOL that provides patients with near, intermediate, and distance vision. Unlike the traditional concentric ring design of other multifocal IOLs, ClearView 3 has a split-level segmented optic design to minimize glare and halos and improve the quality of vision.

James Loden, MD, founder of Loden Vision Centers in Nashville, Tennessee, and a principal investigator in the Lenstec FDA trial, says that although it is still early, post-operative patient satisfaction with the ClearView 3 lens has been high so far. He says that with this lens, patients will experience great visual acuity at all distances with fewer visual disturbances than traditional intraocular lenses.

"We aren't hearing complaints of glare and halos as we would with a typical diffractive multifocal IOL,"

Figure 1:
The ClearView 3 IOL received FDA approval in July 2022.

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Dr. Loden says. "We have also had no issues with waxy vision and have found that the lens remains perfectly centered."

T. Hunter Newsom, MD, founder of Newsom Eye and Laser Center in Tampa, Florida, explains to patients that the implant is similar to wearing progressive lenses in that the top portion of the lens enhances distance vision while the lower portion focuses on near vision.

"That is something that many patients already understand," says Dr. Newsom, who also was a lead investigator in the FDA trial for the ClearView 3 IOL. "Many of

our patients love their progressive glasses—it's an easy-to-understand innovation and they like how it works. And without the rings and halos, patients appreciate that they can tolerate nighttime driving better."

He calls the ClearView 3 a "much more forgiving lens than other multifocal technologies."

VISUAL CLARITY WITHOUT DISTURBANCES

Doctors report that with patient expectations higher than ever, a lens that can produce visual clarity without disturbances is increasingly desired. Y. Ralph Chu, MD, another lead investigator for Lenstec's ClearView 3 FDA study, says that the results so far have indicated very little

dysphotopsia in patients. “But what is most interesting to me is that any dysphotopsia that is experienced can be addressed by rotating the lens,” says Dr. Chu, founder and director of Chu Vision Institute in Bloomington, Minnesota. “The ease of repositioning the lens is something we could not do with a traditional ring-based multifocal, so I think this does potentially create a new opportunity for patient satisfaction in the marketplace.”

ClearView’s segmented design includes a patented four-point fixation to minimize the risk of lens tilt and allow for easy placement. Dr. Chu attests to the ease of implantation based on his experiences in the clinical trial. The lens is available in 0.25 diopter power increments, which permits greater precision than the industry standard of 0.4 D or 0.5 D increments found in most IOLs.

Based on his experience, Dr. Newsom has been pleased with how quickly patients see with their near vision after surgery. In his opinion, this has definitely contributed to high patient satisfaction.

“Just an hour after surgery, when checking on patients, we have had them express how quickly they can see their watch—even though they’re still dilated,” he shares. “It’s very quick, like bifocal readers would be, and that is a pleasant surprise for patients. There is not as much neuro-adaptation to what these lenses are doing.”

FITTING THE OPTIMAL PATIENT

Many patients seeking spectacle independence following cataract surgery will be good fits for this new lens, the surgeons agree.

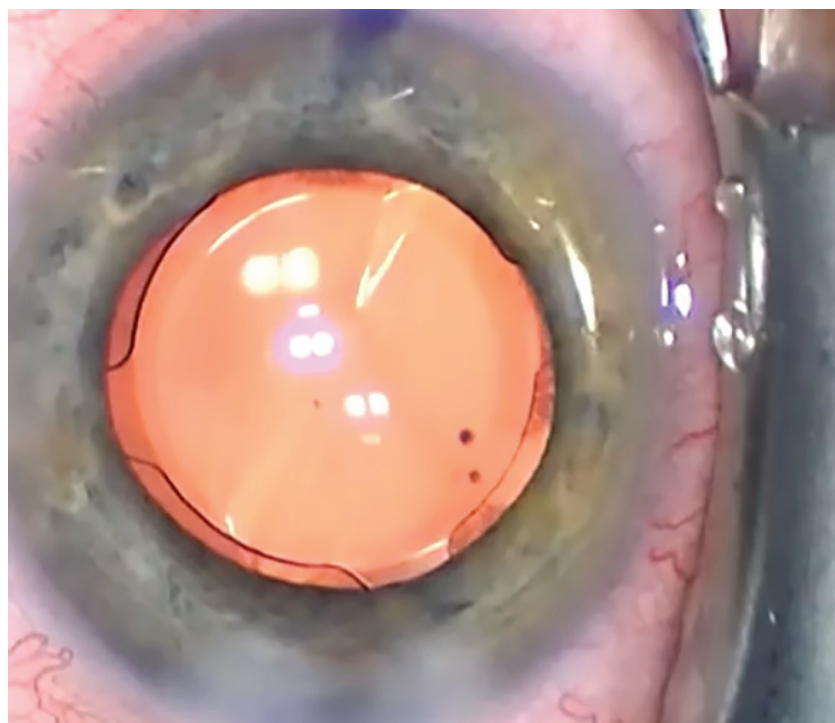


Figure 2: The ClearView 3 IOL is appropriate for presbyopic adults with less than 1 D of astigmatism.

Dr. Newsom says that patients with low astigmatism who already tolerate progressive lenses at nighttime would make good candidates.

Dr. Chu adds that an ideal patient to consider for this technology would be someone who wants an expanded range of focus with less risk of dysphotopsia because of work needs, driving at night, or hobbies.

Of course, there are always exceptions. Dr. Loden says that this lens would not be the right fit on a patient with very small pupils, because getting the optimal split will be a significant challenge.

“For example, if you have 70 percent of the pupil covered with the distance segment, then that patient will have great distance vision but complain they aren’t getting enough near vision,” he explains. “But perhaps worse is if you have the lens set for 70 percent near and 30 percent

distance. Optimally, you want to achieve a 50/50 split and that will be quite hard to do with someone who has pinpoint pupils. I would say that patients with pupil size over 3 mm to 4 mm are going to fall in the sweet spot.”

In general, matching the right patient to the right lens is always a critical step in patient satisfaction. The introduction of the ClearView 3 IOL adds another tool to cataract surgeons’ growing toolbox.

“Finding the right lens for each patient is a case-by-case experience that should be tailored to the patient’s history,” Dr. Loden says. “I interview every patient and ask what they do at work and what they like to do recreationally so that I can better understand their daily visual needs. Those lifestyle pearls are how I determine the best lens technology for each patient.” ■