

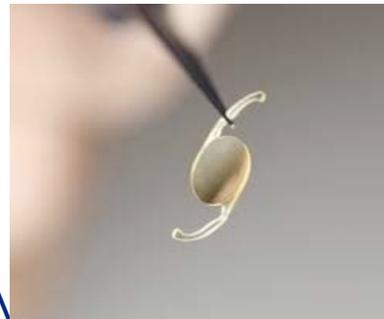


Intraocular Implants(IOLs)

Intraocular implants are used during cataract surgery to replace the lens that was removed during cataract extraction. Cataract surgery, simply stated, is just removing the human lens, which has become cloudy, and replacing it with a man-made lens (implant or IOL) which is clear.



Eye with normal and cloudy lens



Implant

The surgeon will pick a lens implant with a power that suits the individual much like a Rx for glasses. For those that have always been near or far sighted, cataract surgery not only clears vision but it can reduce one's dependence on glasses. Cataract surgery is probably one of the only surgeries done today where you may be better than you were at age 30!!

Medicare and most insurance policies pay for implants(monofocal) along with the cataract surgery. There are some options however that the patient will need to consider as he begins to contemplate surgery. With the traditional implant paid for by insurance, the patient will usually have pretty good vision at distance after surgery unless they had pre-existing astigmatism. **Toric implants** are used to correct astigmatism and are quite successful in improving uncorrected distance vision. These lenses however are not covered by insurance and are what is generally referred to as **premium lenses**. These lenses will require the patient to pay out of pocket expenses as they are not routinely covered by insurance. If one is highly motivated to have good distance vision without glasses however it may be worth the \$500 -\$2000 per eye.

If you do not have significant amounts of pre-existing astigmatism then conventional lenses will provide good vision at distance without correction. However glasses of some sort will be required to see for reading. Often simple and inexpensive reading glasses will suffice.

There are also **premium lenses** available that correct for reading and distance vision both. These come in two types:

Diffraction



The ReSTOR® lens (L) and magnified (R)



These lenses give simultaneous images to the eye for distance and near and the brain chooses the appropriate image. They can be quite effective but do cause halos with night-time vision and loss of contrast sensitivity. There are now lenses that also correct astigmatism but also allow for near and distance vision.

Accommodative

These lenses are designed to change position in your eye as you focus at near and then at distance eliminating the problem with simultaneous images, glare and halos. They are slightly unpredictable in how much correction they give for near work and readers may still be required.

