

MEETING NEWS COVERAGE



Low-power accommodating toric IOL shows high rotational stability

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NEW ORLEANS — A low-power accommodative toric IOL improved uncorrected distance and intermediate visual acuity, reduced refractive cylinder and showed high rotational stability in long eyes, according to a study presented here.

“The low diopter accommodative toric IOL displayed a very stable rotational component, even in high axial myopes,” **Cynthia Matossian, MD, FACS**, said at the [American Society of Cataract and Refractive Surgery meeting](#).

The Trulign Toric Posterior Chamber Accommodating IOL (Bausch + Lomb) was launched in 2013 with a 17 D to 25 D range. A 10 D to 16.5 D iteration of the Trulign was released later.

The retrospective study included 21 eyes implanted with the 10 D to 16.5 D version of the Trulign IOL.

“I wanted to know if this implant was rotationally stable in low power in my high axial myopes,” she said. “My concern was the rotational stability.”



**Cynthia A.
Matossian**

Preoperative uncorrected distance visual acuity (UDVA) ranged from 20/50 to counting fingers. Preoperative corrected distance visual acuity (CDVA) ranged from 20/15 to counting fingers. Mean axial length was 26 mm.

Implanted IOL power ranged from 10 D to 16 D.

Results showed that CDVA was 20/30 or better in 100% of patients, UDVA was 20/30 or better in 95% of patients, corrected intermediate visual acuity (UIVA) was 20/30 or better in 95% of patients and uncorrected near visual acuity was 20/30 or better in 76%.

Mean UDVA was 20/27, mean uncorrected intermediate visual acuity was 20/21 and mean uncorrected near visual acuity was J3.

Postoperative astigmatism was 0.50 D or less in 100% of eyes. No eyes had residual refractive cylinder that required touch-up, Matossian said.

Mean residual manifest refraction spherical equivalent was -0.46 D.

Near vision was J3 or better in 12 eyes (57%).

No clinically significant rotational issues were reported.

Refractive outcomes were within 0.75 D of the target in 95% of eyes and within 0.50 D in 76% of eyes, Matossian said. – *by Matt Hasson and Patricia Nale, ELS*

Reference:

Matossian C. Clinical outcomes for low-diopter accommodating IOL. Presented at: American Society of Cataract and Refractive Surgery meeting; May 6-10, 2016. New Orleans.

Disclosure: Matossian reports she is a consultant for Bausch + Lomb.