Clareon® Vivity®

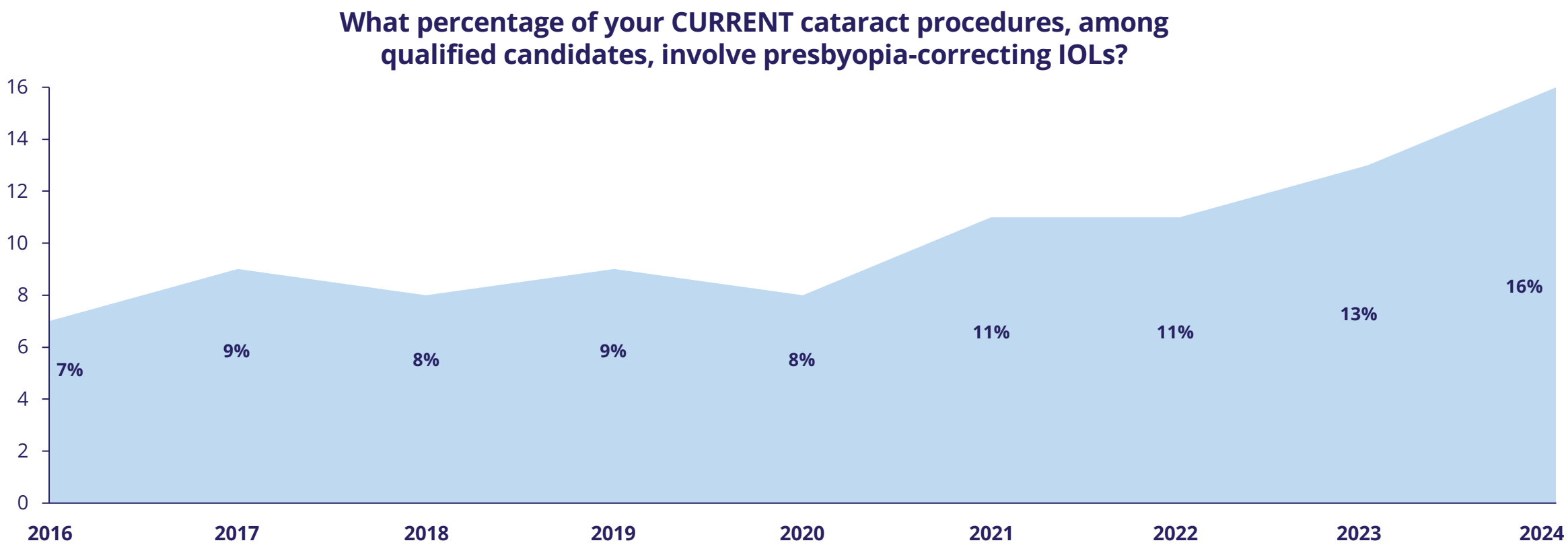
Extended Vision IOL &
Toric Extended Vision IOL

Date: 03/2026

Location: Winter ESCRS

Percentage of Cataract Procedures Involving Presbyopia-correcting IOLs is Rising

ESCRS CLINICAL SURVEY

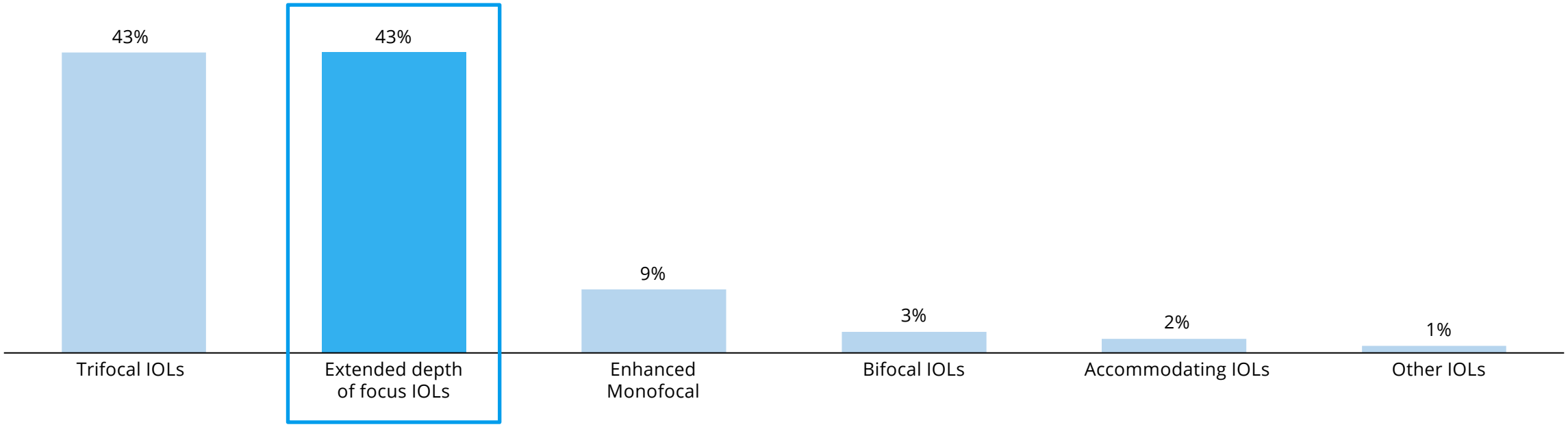


ESCRS, European Society Of Cataract & Refractive Surgeons; IOL, intraocular lens.
ESCRS Clinical Trends Survey 2024 Results, EuroTimes, Sept/Oct 2025(supp).

Trifocal and EDoF IOLs are the Most Common IOL Technology Used for Presbyopia correction

ESCRS CLINICAL SURVEY

What type of presbyopia-correcting IOL technology is used in the majority of your presbyopia-correction patients?

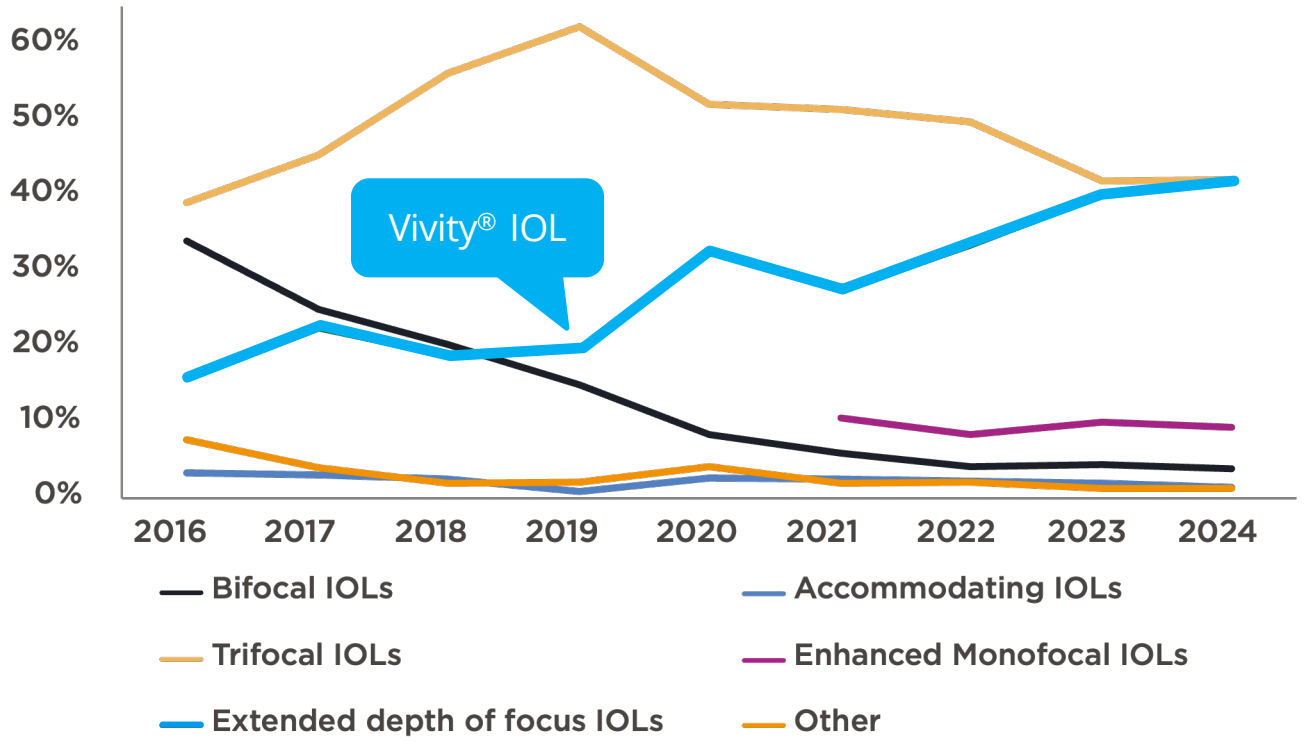


ESCRS, European Society Of Cataract & Refractive Surgeons; IOL, intraocular lens.
ESCRS Clinical Trends Survey 2024 Results, EuroTimes, Sept/Oct 2025(supp).

EDoF IOLs Have Been Gaining Popularity for Presbyopia Correction

ESCRS CLINICAL SURVEY

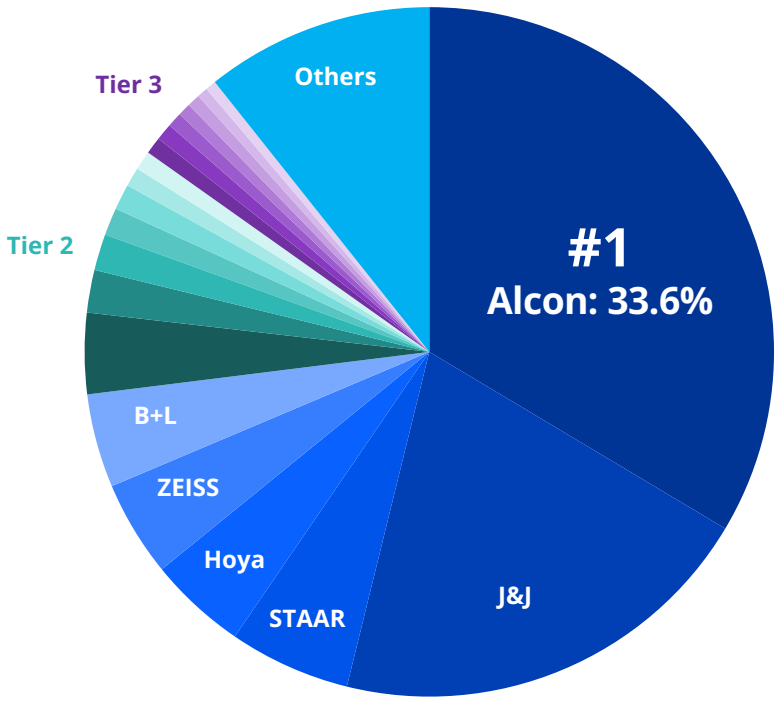
What type of presbyopia-correcting IOL technology is used in the majority of your presbyopia-correction patients?



ESCRS, European Society Of Cataract & Refractive Surgeons; IOL, intraocular lens.
ESCRS Clinical Trends Survey 2024 Results, EuroTimes, Sept/Oct 2025(supp).

Alcon Remains the Leader in the IOL Market

Alcon % market share of all IOLs[1]



Tier 1

Alcon: $1,950M
J&J Vision†: $1,181M
STAAR†: $329M
Hoya†: $268M
Carl Zeiss Meditec†: $264M
B+L†: $256M

Tier 2

BVI Medical: $219M
Rayner: $117M
RxSight: $100M
Ophtec: $74M
Teleon: $68M
Care Group: $52M
Haohai: $51M

Tier 3

VSY Biotechnology†: $47M
Eyebright†: $44M
Medicontur†: $41M
SIFI SpA†: $35M
Nidek†: $33M
Kowa†: $31M
Lenstec†: $29M

All Other: $621M (10.7%)

PanOptix®:

#1 Trifocal

in the world[2,3]*

4+ Million

implants worldwide[4]*

Vivity®:

#1 EDoF

in the world[2,3]*

2+ Million

implants worldwide[4]*

*Based on worldwide IOL unit sales of AcrySof® IQ Vivity®, Clareon® Vivity®, AcrySof® PanOptix® and Clareon® PanOptix® IOLs, as of Q4, 2024.
†Trademarks are the property of their respective owners.
EDoF, extended depth-of-focus; IOL, intraocular lens.
1. 2025 IOL Market Report: Global Analysis for 2024 to 2030. Market Scope. **2.** 2024 Premium Cataract Surgery Market Report: Analyziz of the Top 13 Markets for 2023 to 2029. Market Scope. **3.** Alcon data on file, 2024. REF-26299. **4.** Alcon data on file, 2025. REF-28266.

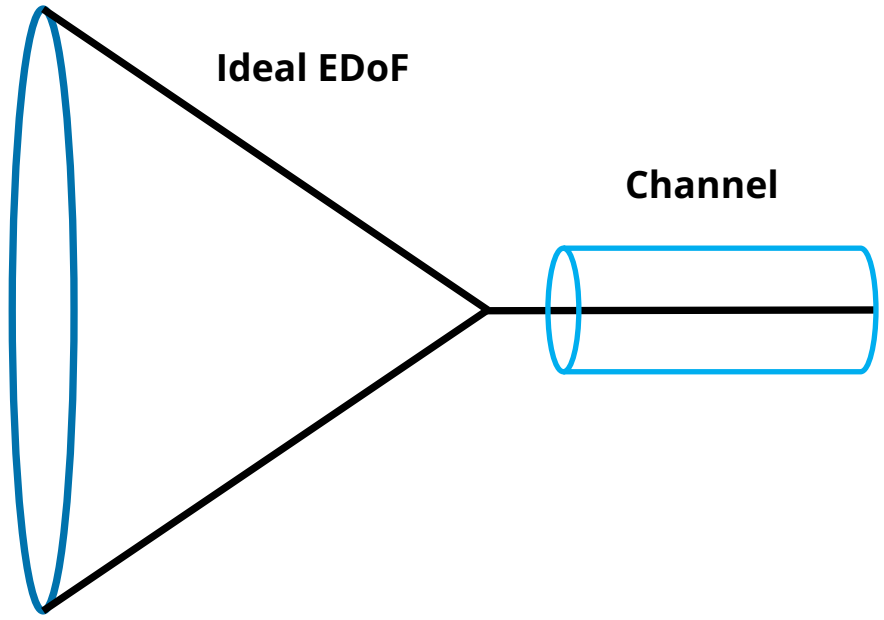
OPTICAL PRINCIPALS AND X-WAVE™ TECHNOLOGY

Requirements for the Ideal Extended Depth of Focus IOL to Produce the Extended Range of Vision

- In an EDoF lens, **concentrating the light** into a **narrow channel** results in good vision over an extended range of distances

- Light **within the channel is in focus** when it strikes the retina
- Light that is **outside the channel** is spread out when it strikes the retina and may be **perceived as halos or blur**

- The **width of the channel** dictates **how sharp the images are**
- The **length of the channel** determines the **range of distances** the EDoF would function



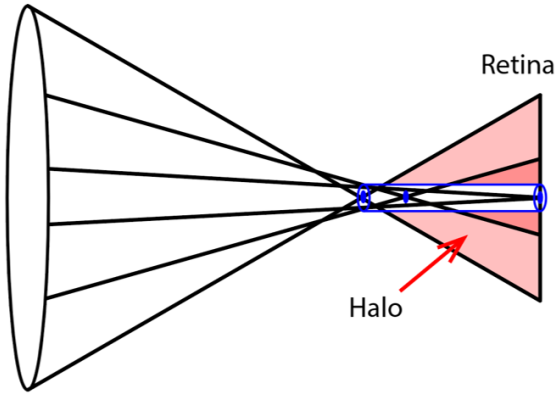
EDoF, extended depth of focus; IOL, intraocular lens.

Kohnen T, Berdahl JP, Hong X, Bala C. The novel optical design and clinical classification of a wavefront-shaping presbyopia-correcting intraocular lens. *Clin Ophthalmol*. 2023;17:2449-2457.

Refractive and Diffractive Technologies Create Multiple Foci and Halo Profiles

Refractive: Bending light

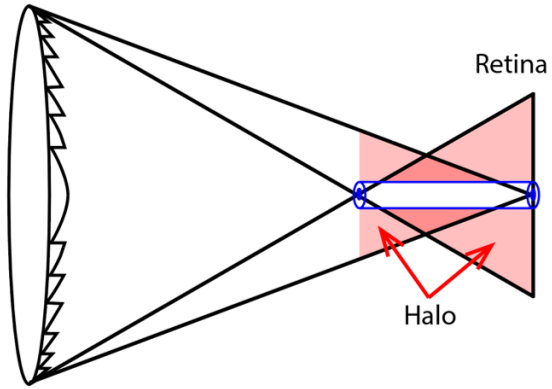
Spherical aberration: The power of the lens changes from its center to edge



- Rays passing through the edge of the lens are myopic relative to rays passing through the center of the lens (positive spherical aberration)
- While the rays come into focus within the EDoF channel, the rays that lay outside of the channel lead to halos
  *i.e., SIFI MINI WELL**

Diffractive: Splitting light

Diffractive lenses split the light into two or more foci



- Here, a bifocal diffractive lens creates two distinct foci within the channel
- Again, while these rays come into focus within the EDoF channel, the rays that lay outside of the channel lead to halos
  *i.e., TECNIS Symfony**

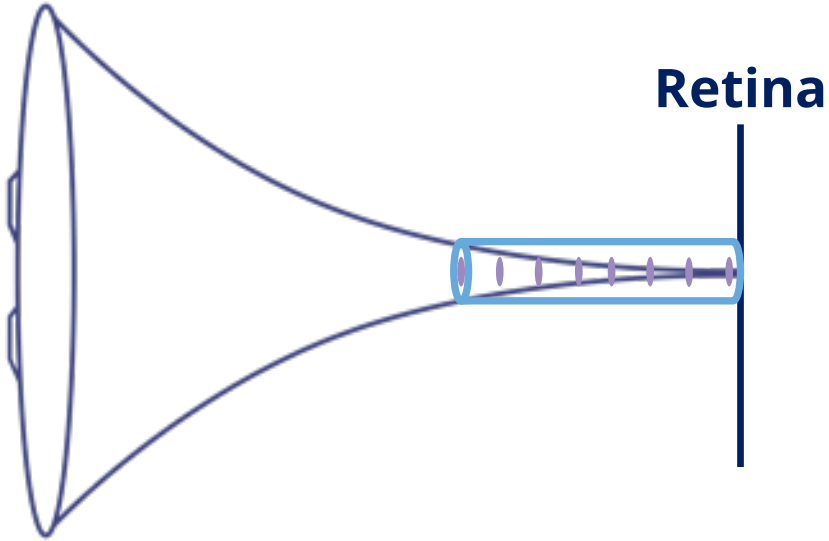
*Trademarks are the property of their respective owners.
EDoF, extended depth of focus.
Kohnen T, Berdahl JP, Hong X, Bala C. The novel optical design and clinical classification of a wavefront-shaping presbyopia-correcting intraocular lens. *Clin Ophthalmol*. 2023;17:2449-2457.

Wavefront-Shaping X-WAVE™ Technology: Stretching/Shifting Light to Create a Continuous Extended Focal Range[1–3]

Wavefront-shaping is a unique method for **providing DoF** and is being applied for the first time in IOL technology

The light is confined to a region within the EDoF channel (as shown in the illustration)

This technology **utilizes all the light**, like a monofocal IOL



Wavefront-shaping X-WAVE™ technology in the Clareon® Vivity® IOL **confines light in the EDoF channel,** leading to a **monofocal lens halo profile**[1,2]

DoF, depth of focus; EDoF, extended depth of focus.

1. Bala C, Poyales F, Guarro M, et al. Multicountry clinical outcomes of a new nondiffractive presbyopia-correcting IOL. *J Cataract Refract Surg*. 2022;48(2):136-143. **2.** McCabe C, et al. U.S. study of a nondiffractive EDoF IOL. *JCRS*. 2022;48(11):1297–1304. doi:10.1097/j.jcrs.0000000000000978 3.Kohnen T, Berdahl JP, Hong X, Bala C. The novel optical design and clinical classification of a wavefront-shaping presbyopia-correcting intraocular lens. *Clin Ophthalmol*. 2023;17:2449-2457 https://doi.org/10.2147/OPTH.S400083

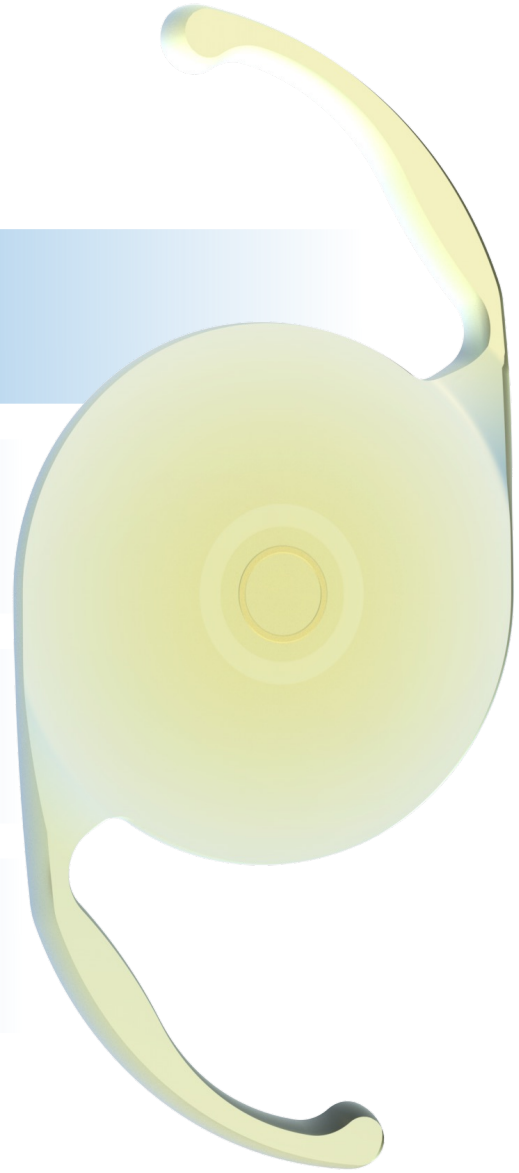
Clareon® Vivity®

First and only presbyopia-correcting IOL with wavefront-shaping technology[1]

Instead of bending or splitting the light, it stretches the light for maximum light utilization[2]

Delivers 20/20 VA at distance, greater than 20/25 at intermediate and 20/32 at near[3*]

Monofocal visual disturbance profile[3,4]



*Data obtained from a prospective/retrospective, multicenter, non-randomized, parallel-group, controlled, assessor-masked interventional study. Vivity® group: Clareon® Vivity®/Vivity® Toric Extended Vision IOLs (CNWET0, CNWET3-T6, CCWET0, CCWET3-T6) (Vivity®, Vivity® Toric, Vivity® Non-Toric) Monofocal group: Clareon®/Clareon® Toric Aspheric IOL(s) (SY60WF, CNW0T3-T6, CC60WF, CCW0T3-T6) and Clareon® with AutonoMe® (CCA0T0, CNA0T0) (Monofocal, Monofocal Toric).

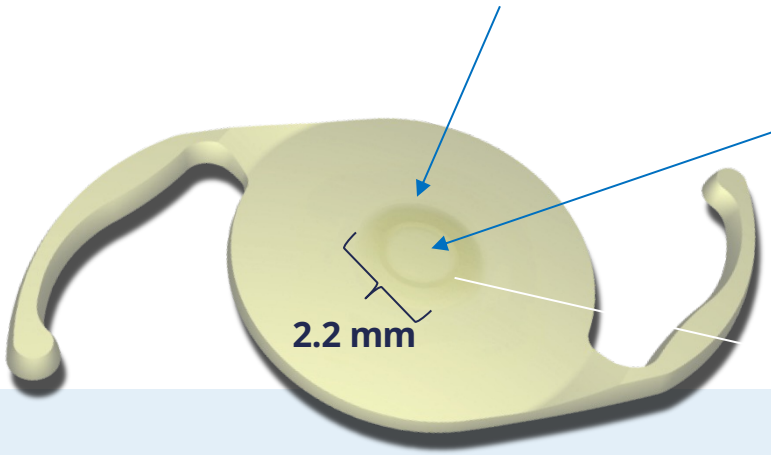
1. McCabe C, Berdahl J, Reiser H, et al. Clinical outcomes in a U.S. registration study of a new EDoF intraocular lens with a non-diffractive design. *J Cataract Refract Surg.* 2022;48(11):1297-1304. **2.** Kohnen T, Berdahl JP, Hong X, Bala C. The Novel Optical Design and Clinical Classification of a Wavefront-Shaping Presbyopia-Correcting Intraocular Lens. *Clin Ophthalmol*. 2023;17:2449-2457. **3.** Berdahl JP, Grosinger L, Reed O. Visual Performance of a Novel Wavefront Shaping Extended Depth-of-Focus Intraocular Lens on a New Hydrophobic Acrylic Platform. *J Cataract Refract Surg*. Published online July 21, 2025. **4.** Clareon® Vivity® Extended Vision Hydrophobic IOL Directions for Use.

What is Wavefront Shaping (X-WAVE™) Technology?

Surface transition elements simultaneously alter the emergent wavefront providing excellent distance, intermediate, and functional near vision.[1-3]

Surface Transition #1:
Slightly Elevated Smooth Plateau (~1 µm high) **stretches** the wavefront, creating a continuous extended focal range[2]

Surface Transition #2:
Small Curvature Change (across the ~2.2 mm region) shifts the wavefront, providing the functional range of vision patients expect without inducing positive SA[2]



Computer Assisted Drawing (CAD), Height of the central element
exaggerated by 7X

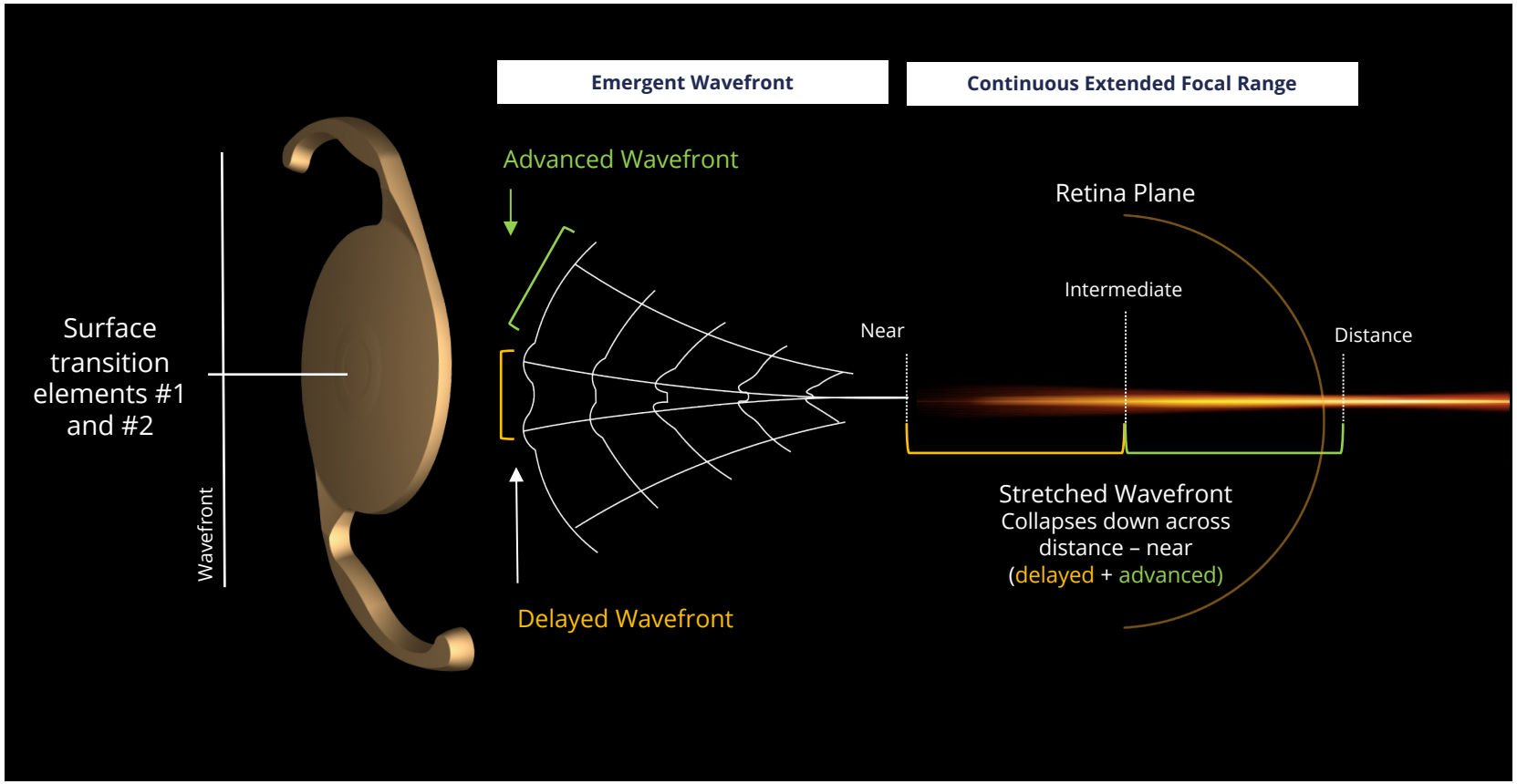
Surface transition element #1 is around
1 micron high

*Data obtained from a prospective/retrospective, multicenter, non-randomized, parallel-group, controlled, assessor-masked interventional study. Vivity® group: Clareon® Vivity®/Vivity® Toric Extended Vision IOLs (CNWET0, CNWET3-T6, CCWET0, CCWET3-T6) (Vivity®, Vivity® Toric, Vivity® Non-Toric) Monofocal group: Clareon®/Clareon® Toric Aspheric IOL(s) (SY60WF, CNW0T3-T6, CC60WF, CCW0T3-T6) and Clareon® with AutonoMe® (CCA0T0, CNA0T0) (Monofocal, Monofocal Toric).

1. Clareon® Vivity® Extended Vision Hydrophobic IOL Directions for Use. **2.** Kohnen T, Berdahl JP, Hong X, Bala C. The Novel Optical Design and Clinical Classification of a Wavefront-Shaping Presbyopia-Correcting Intraocular Lens. *Clin Ophthalmol*. 2023;17:2449-2457. **3.** Berdahl JP, Grosinger L, Reed O. Visual Performance of a Novel Wavefront Shaping Extended Depth-of-Focus Intraocular Lens on a New Hydrophobic Acrylic Platform. *J Cataract Refract Surg*. Published online July 21, 2025.

Wavefront Shaping (X-WAVE™) Technology

Smooth surface transition elements: simultaneously stretch and shift the wavefront without splitting it.[1,2]



1. Clareon® Vivity® Extended Vision Hydrophobic IOL Directions for Use. **2.** Kohnen T, Berdahl JP, Hong X, Bala C. The Novel Optical Design and Clinical Classification of a Wavefront-Shaping Presbyopia-Correcting Intraocular Lens. *Clin Ophthalmol*. 2023:17 2449–2457.

EDOF CLASSIFICATION

Clareon® Vivity® Meets all 4 monocular ANSI standard criteria for an EDoF IOL and is designed to provide a monofocal visual disturbance profile[1-4]

ANSI Z80.35-2018

ANSI
American National Standards Institute

AcrySof® IQ Vivity® IOL meets the ANSI criteria based in 2 large pivotal trials[4-6]

AcrySof® IQ Vivity®

FAR*	INTERMEDIATE (66 cm)*	NEAR (40 cm)*
Monocular CDVA[6†] Clareon® Vivity®: 0.016 ± 0.009 Clareon® Monofocal: -0.036 ± 0.009 ✓	**Median Monocular DCIVA[6]** Clareon® Vivity®: 0.12 ✓	
	Monocular DCIVA[6]** Clareon® Vivity®: 0.148 ± 0.012 Clareon® Monofocal: 0.312 ± 0.012 ✓	
	Monocular depth of focus at 0.2 logMAR[6] Clareon® Vivity®: 1.53 D Clareon® Monofocal: 0.99 D ✓	

*LogMAR measures under photopic conditions. †One-sided 95% Upper Confidence Limit <0.1 logMAR. **p<0.001
ANSI, American National Standards Institute; CDVA, corrected distance visual acuity; DCIVA, distance corrected intermediate visual acuity; EDoF, extended depth of focus; logMAR, logarithm of the minimum angle of resolution.

1. Berdahl JP, Grosinger L, Reed O. Visual Performance of a Novel Wavefront Shaping Extended Depth-of-Focus Intraocular Lens on a New Hydrophobic Acrylic Platform. *J Cataract Refract Surg*. Published online July 21, 2025. **2.** Alcon data on file, 2022. REF-15172. **3.** Clareon® Vivity® Extended Vision Hydrophobic IOL Directions for Use . **4.** American National Standards Institute Z80.35-2018. American National Standard for Ophthalmics – Extended Depth of Focus Intraocular Lenses. 2019. **5.** Bala C, Poyales F, Guarro M, *et al*. Multicountry clinical outcomes of a new nondiffractive presbyopia-correcting IOL. *J Cataract Refract Surg*. 2022;48(2):136-143. **6.** McCabe C, Berdahl J, Reiser H, *et al.* Clinical outcomes in a U.S. registration study of a new EDoF intraocular lens with a non-diffractive design. *J Cataract Refract Surg*. 2022;48(11):1297-1304.

Defining IOLs as per the International Organization for Standardization

BS EN ISO 11979-7:2024

There are four main categories of intraocular lenses that are determined by optical design and/or clinical characteristics or performance

- **Monofocal IOL**
- **Toric (TIOL)**
- **Simultaneous Vision Lens (SVIOL)**
- **Accommodating IOL (AIOL)**
  - **Multifocal (MIOL)**
  - **Extended Depth of Focus (EDoF IOL)**
  - **Full Visual Range (FVR IOL)**

ISO, International Organization for Standardization.
International Organization for Standardization.BS EN ISO 11979-7:2024. Ophthalmic implants. Intraocular lenses- Clinical investigations of intraocular lenses for the correction of aphakia. 2024

Clareon® Vivity® IOL Meets ISO Standards for EDoF IOLs

BS EN ISO 11979-7:2024

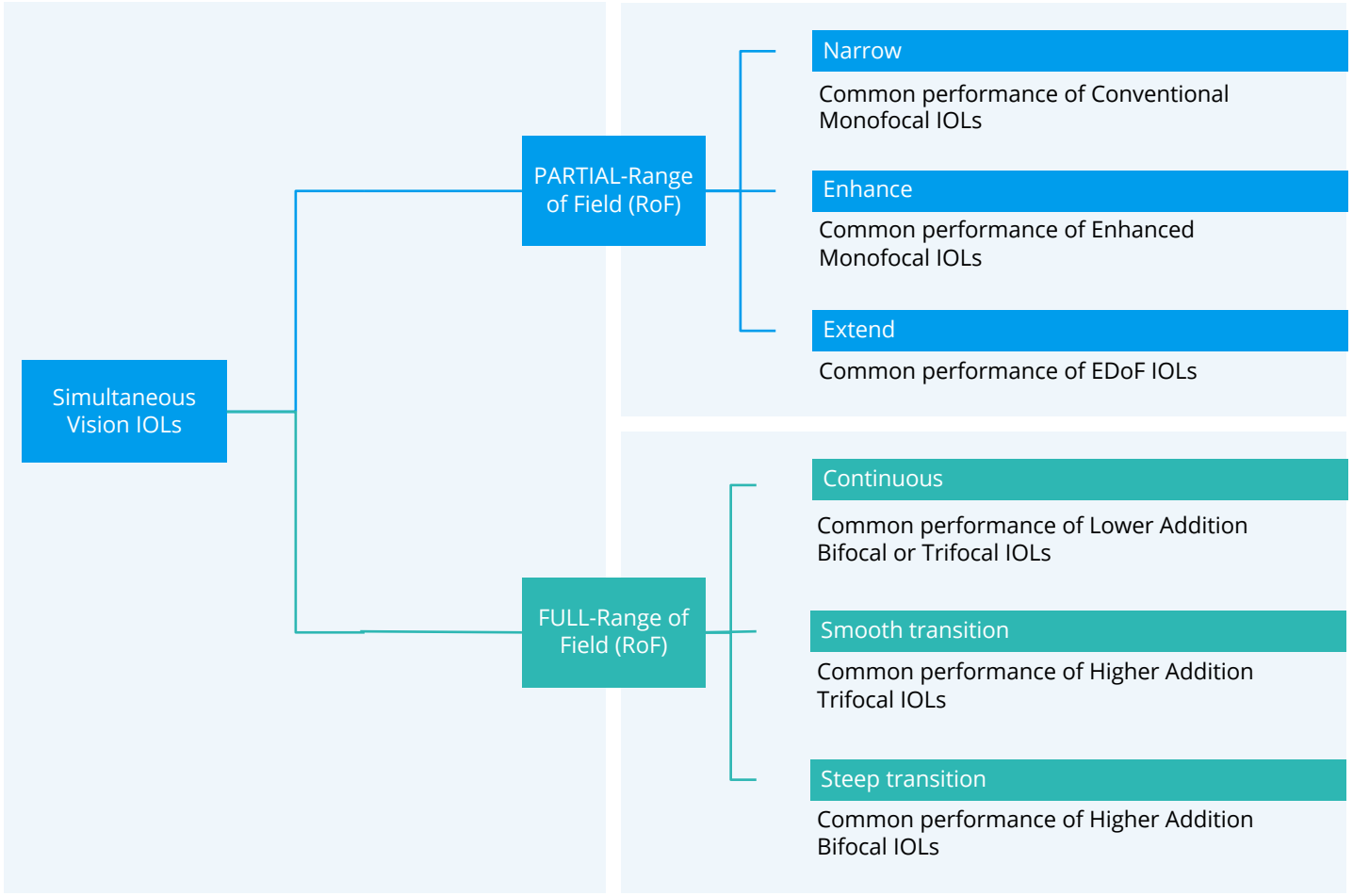
Clareon® Vivity® IOL meets the ISO for EDoF IOL based in 2 large pivotal trials[1-3]

FAR*	INTERMEDIATE (66 cm)*	NEAR (40 cm)*
Δ (mesopic CS)[2] ≤0.21 log units at each of the spatial frequencies tested ✓		
	Monocular DCIVA[2] Clareon® Vivity®: 0.148 ± 0.012 ✓	
Monocular CDVA[2†] Clareon® Vivity®: 0.016 ± 0.009 Clareon® Monofocal: -0.036 ± 0.009 ✓	**Monocular DCIVA[2]*** Clareon® Vivity®: 0.148 ± 0.012 ✓ Clareon® Monofocal: 0.312 ± 0.012	
	Monocular depth of focus at 0.2 logMAR[2] Clareon® Vivity®: 1.53 D Clareon® Monofocal: 0.99 D ✓	
	Monocular DCVA at 1 m[3]** Clareon® Vivity®: 0.130 ± 0.099 ✓	

†One-sided 95% Upper Confidence Limit <0.1 logMAR. *p<0.001. ** values extracted from the monocular defocus curve at -1D of defocus
CDVA, corrected distance visual acuity; DCIVA, distance corrected intermediate visual acuity; EDoF, extended depth of focus; ISO, International Organization for Standardization; logMAR, logarithm of the minimum angle of resolution.
1. Bala C, Poyales F, Guarro M, *et al*. Multicountry clinical outcomes of a new nondiffractive presbyopia-correcting IOL. *J Cataract Refract Surg*. 2022;48(2):136-143. **2.** McCabe C, Berdahl J, Reiser H, *et al*. Clinical outcomes in a U.S. registration study of a new EDoF intraocular lens with a non-diffractive design. *J Cataract Refract Surg*. 2022;48(11):1297-1304. **3.** Alcon Vision LLC. Clinical Investigational Report for ILI875-C002. 2019. **4.** International Organization for Standardization.BS EN ISO 11979-7:2024. Ophthalmic implants. Intraocular lenses- Clinical investigations of intraocular lenses for the correction of aphakia. 2024.

Evidence-Based Functional Classification of Simultaneous Vision Intraocular Lenses (SVIOLs)

ESCRS Functional Vision Working Group



The analysis found that **2 metrics** were enough **to classify IOLs**:

a) The increase in visual acuity from intermediate to near

b) RoF of monocular best-corrected defocus from 0.0D to the crossing point of 0.2 or 0.3 logMAR values

RoF = range of the depth of field from CDVA with visual acuity ≥0.2 or 0.3 logMAR at some defocus data point; ΔVA = Visual Acuity improvement from intermediate to near.
CDVA, corrected distance visual acuity; logMAR, logarithm of the minimum angle of resolution; RoF, range of field.
Ribeiro F, Dick HB, Kohnen T, et al. Evidence-based functional classification of simultaneous vision intraocular lenses: seeking a global consensus by the ESCRS Functional Vision Working Group. *J Cataract Refract Surg*. 2024;50(8):794-798.

Classifying SVIOLs by RoF and Change in VA

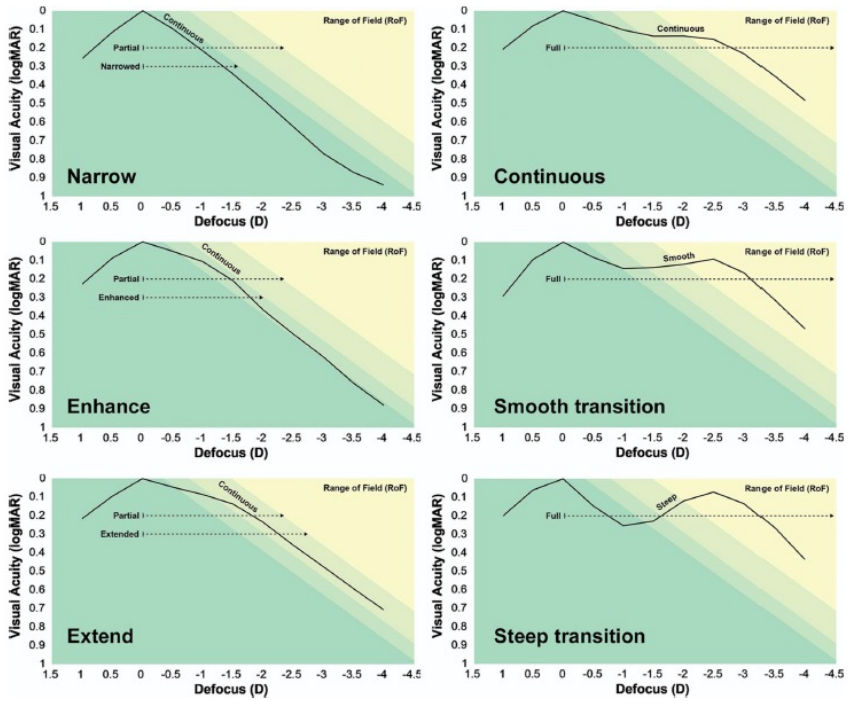
Simultaneous Vision IOLs

PARTIAL-Range of Field (RoF)

- **Narrow**
  Common performance of Conventional Monofocal IOLs
- **Enhance**
  Common performance of Enhanced Monofocal IOLs
- **Extend**
  Common performance of EDoF IOLs

FULL-Range of Field (RoF)

- **Continuous**
  Common performance of Lower Addition Bifocal or Trifocal IOLs
- **Smooth transition**
  Common performance of Higher Addition Trifocal IOLs
- **Steep transition**
  Common performance of Higher Addition Bifocal IOLs



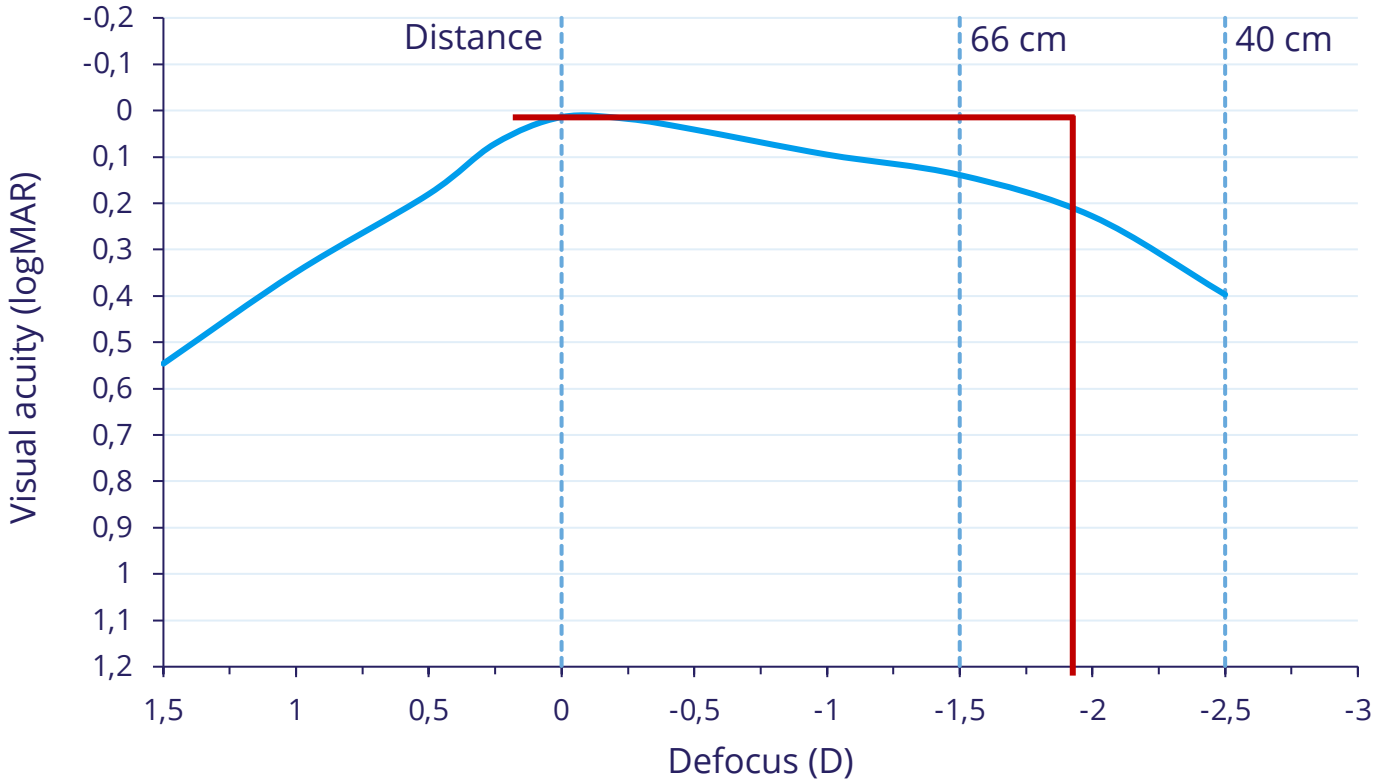
RoF: range of the depth of field from CDVA with visual acuity ≥0.2 or 0.3 logMAR at some defocus data point; ΔVA = Visual Acuity improvement from intermediate to neer

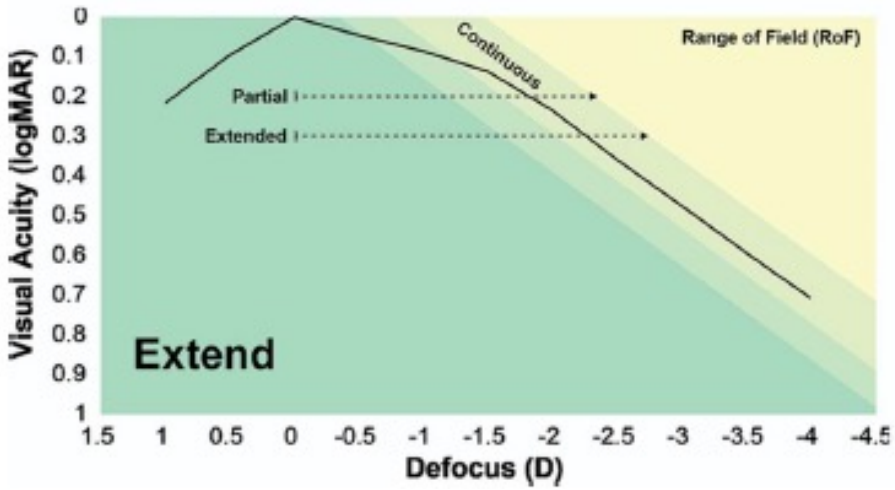
RoF, range of field; SVIOLs, simultaneous vision intraocular lenses.

Ribeiro F, Dick HB, Kohnen T, *et al*. Evidence-based functional classification of simultaneous vision intraocular lenses: seeking a global consensus by the ESCRS Functional Vision Working Group. *J Cataract Refract Surg*. 2024;50(8):794-798.

Clareon® Vivity® Meets the Definition of a Partial RoF, Extend

Mean Monocular Photopic Distance Corrected Defocus Curve for Clareon® Vivity® 3-6mo Post-Op N=73





logMAR, logarithm of the minimum angle of resolution; RoF, range of field.

Berdahl JP, Grosinger L, Reed O. Visual Performance of a Novel Wavefront Shaping Extended Depth-of-Focus Intraocular Lens on a New Hydrophobic Acrylic Platform. *J Cataract Refract Surg*. Published online July 21, 2025.

CONCLUSIONS

Clareon® Vivity® Classification by Various Organizations' Standards

Clareon® Vivity® IOL meets the ANSI criteria to be categorized as **EDoF IOL**

In 2024 **ISO updated** the standards for SVIOL incorporating new criteria for **EDoF IOL**

Clareon® Vivity® IOL meets the ISO criteria to be categorized as **EDoF IOL**

Lately a **functional IOL classification** has been developed by ESCRS working group

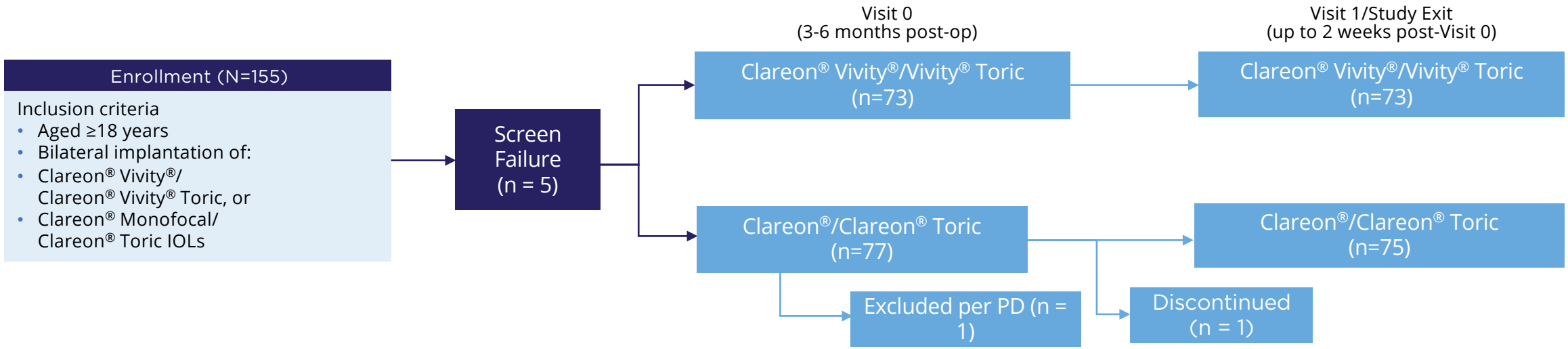
Alcon data suggests:
Clareon® Vivity® IOL meets the criteria as **Extended IOL**

ANSI, American National Standards Institute; EDoF: extended depth of focus; FRV, full range of vision; IOL, Intraocular Lens; ISO, International Organization for Standardization.
Alcon medical device(s) comply with the current legislation for the medical devices. Please refer to relevant products instructions for use for complete list of indications, contraindications and warnings.

CLINICAL DATA

The Safety and Effectiveness of Clareon® Vivity® has Been Assessed

Prospective/retrospective, multicenter, non-randomized, parallel group, controlled, assessor masked interventional study



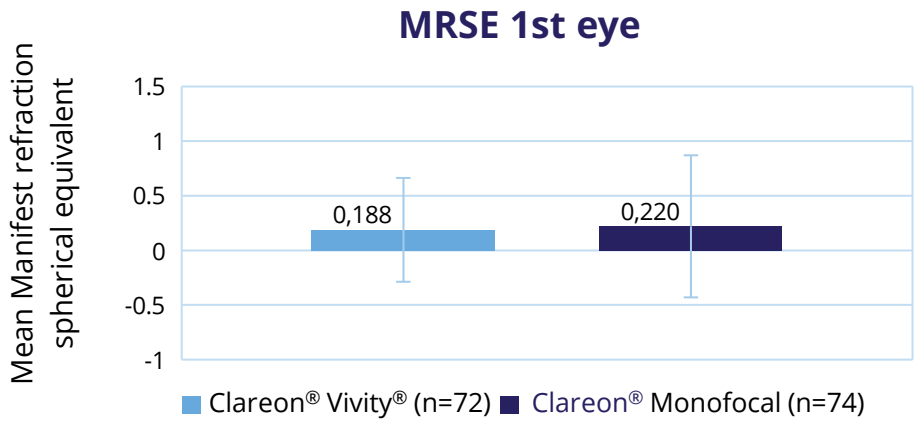
Objective: To demonstrate the visual performance of the Clareon® Vivity® Extended Depth of Focus design on the Clareon® Hydrophobic Acrylic platform compared to an aspheric Monofocal control in a sample of patients implanted with these lenses in a real-world setting.

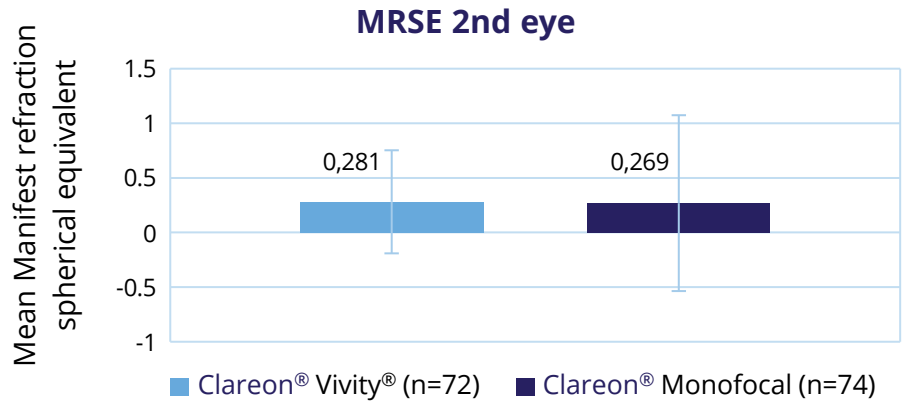
IOL, intraocular lens; PD, protocol deviation.

Berdahl JP, Grosinger L, Reed O. Visual Performance of a Novel Wavefront Shaping Extended Depth-of-Focus Intraocular Lens on a New Hydrophobic Acrylic Platform. *J Cataract Refract Surg*. Published online July 21, 2025.

VISUAL AND REFRACTIVE OUTCOMES

Post-Op Refractive Accuracy with Clareon® Vivity®





Absolute MRSE:

- For 1st eyes, 1.00 D or less: Clareon® Vivity®, 94.4% vs. Clareon® Monofocal, 91.9%
- For 2nd eyes, 1.00 D or less: Clareon® Vivity®, 94.4% vs. Clareon® Monofocal, 86.5%

Mean absolute manifest refraction cylinder for 1st and 2nd eyes:

- **Clareon® Vivity® group**, 0.375 D and 0.368 D, respectively
- **Clareon® Monofocal group**: 0.581 D and 0.618 D, respectively

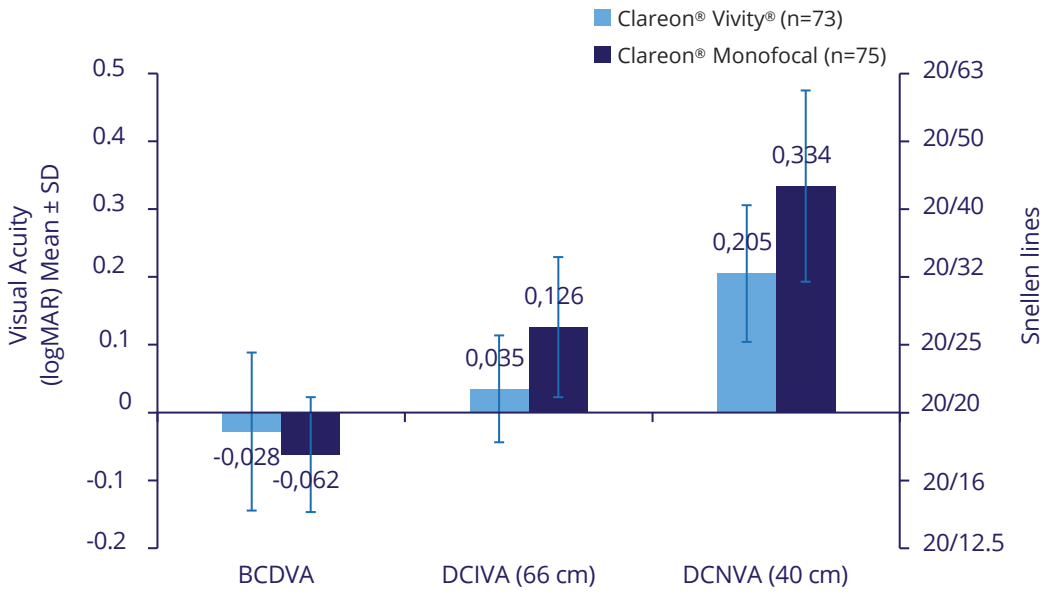
MRSE, manifest refractive spherical equivalent.

1. Berdahl JP, Grosinger L, Reed O. Visual Performance of a Novel Wavefront Shaping Extended Depth-of-Focus Intraocular Lens on a New Hydrophobic Acrylic Platform. *J Cataract Refract Surg*. Published online July 21, 2025.

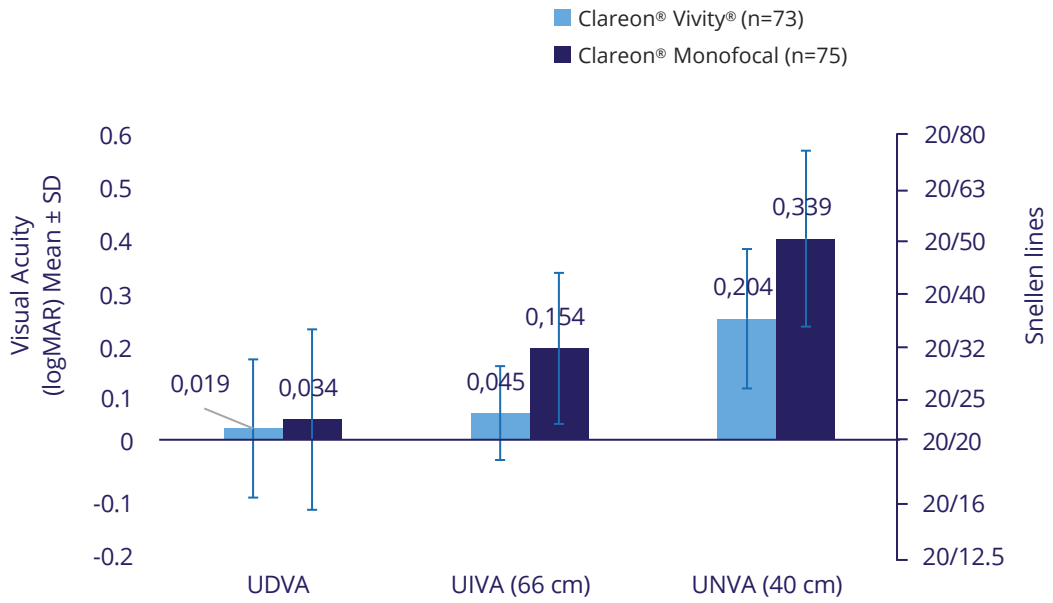
Clareon® Vivity® Delivers Superior Intermediate and Near while Maintaining Distance Vision Comparable to Clareon® Monofocal IOL[1]

Binocular Photopic VAs at 3-6 months[4]

Distance corrected VAs



Uncorrected VAs



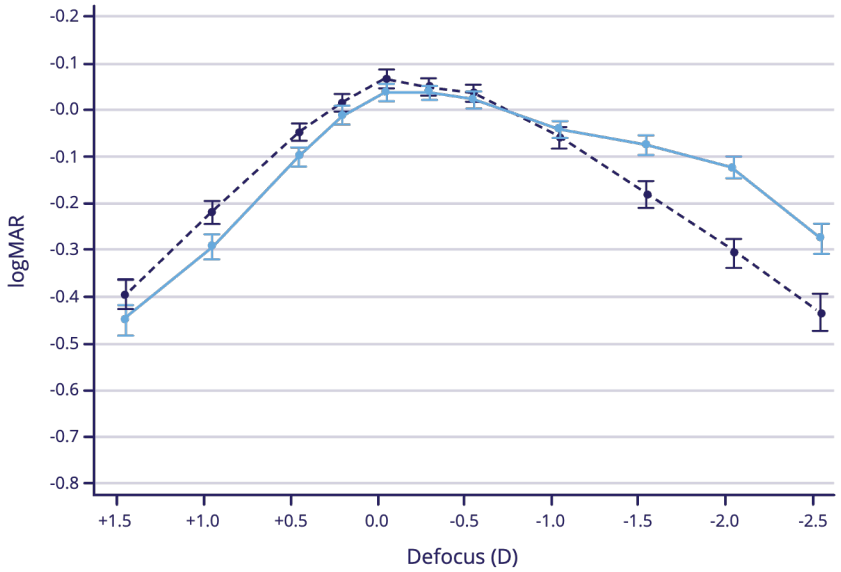
- ✓ Clareon® Vivity® was **non-inferior** to Clareon® Monofocal for mean binocular photopic BCDVA ($p<0.05$)[4]
- ✓ Clareon® Vivity® was **superior** to Clareon® Monofocal for mean binocular photopic DCIVA ($p<0.05$)[4]
- ✓ Clareon® Vivity® was **superior** to Clareon® Monofocal for mean binocular photopic DCNVA ($p<0.05$)[4]

BCDVA, best distance corrected visual acuity; DCIVA, distance corrected intermediate visual acuity; DCNVA, distance corrected near visual acuity; logMAR, logarithm of the minimum angle of resolution ; UDVA, uncorrected distance visual acuity; UIVA, uncorrected intermediate visual acuity; UNVA, uncorrected near visual acuity.

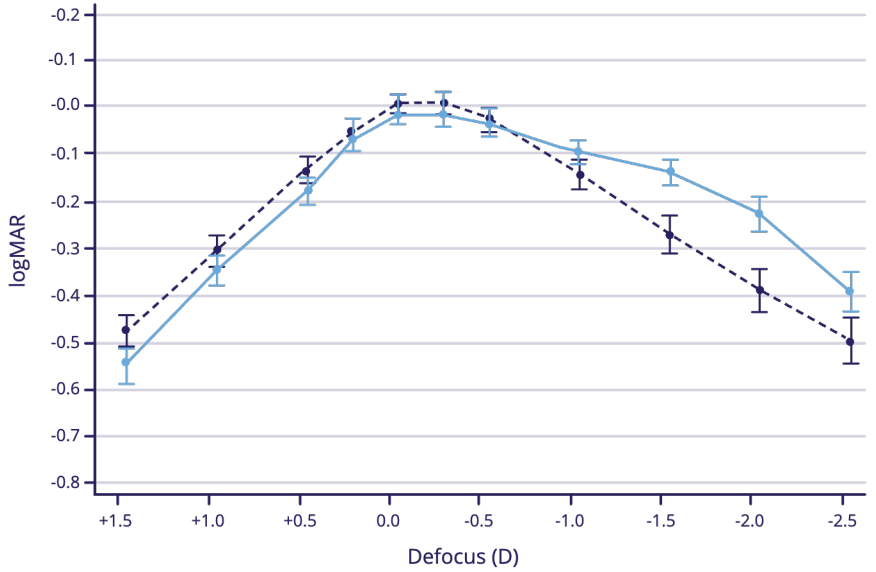
1.Berdahl JP, Grosinger L, Reed O. Visual Performance of a Novel Wavefront Shaping Extended Depth-of-Focus Intraocular Lens on a New Hydrophobic Acrylic Platform. *J Cataract Refract Surg*. Published online July 21, 2025.

Clareon® Vivity® Delivers a Continuous Extended Range of Vision from Distance to Functional Near[1]

Mean Binocular Defocus Curves (logMAR) with 95% Confidence Intervals at Visit 1[1]



Mean Monocular* Defocus Curves (logMAR) with 95% Confidence Intervals at Visit 1[1]



Clareon® Vivity® (73)

Clareon® Monofocal (76)

*First eye implanted.

VA for Clareon® Vivity® was better than Clareon® Monofocal in the -1.50 to -2.50 D range in both binocular and monocular viewing conditions[4]

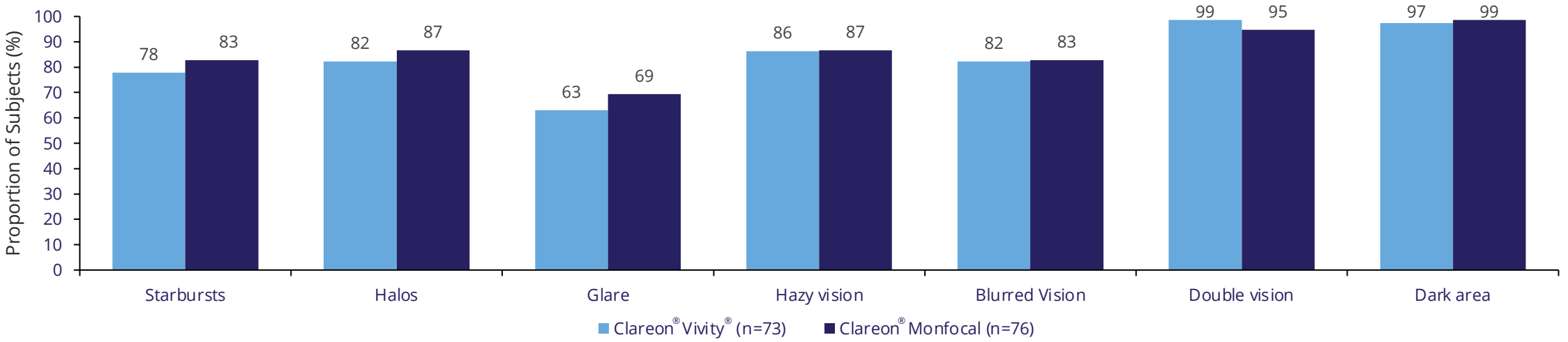
*Data for first eye implanted.
D, diopter; logMAR, logarithm of the minimum angle of resolution; VA, visual acuity.

1. Berdahl JP, Grosinger L, Reed O. Visual Performance of a Novel Wavefront Shaping Extended Depth-of-Focus Intraocular Lens on a New Hydrophobic Acrylic Platform. *J Cataract Refract Surg*. Published online July 21, 2025

VISUAL PHENOMENA AND QUALITY OF VISION

Clareon® Vivity® IOL delivers a consistent Monofocal Visual Disturbance Profile[1]

"In the Past 7 Days, How Much Were You **Not at all Bothered** With?"[1]



Subjects, n	56 62	60 65	46 52	63 65	60 62	71 71	71 74

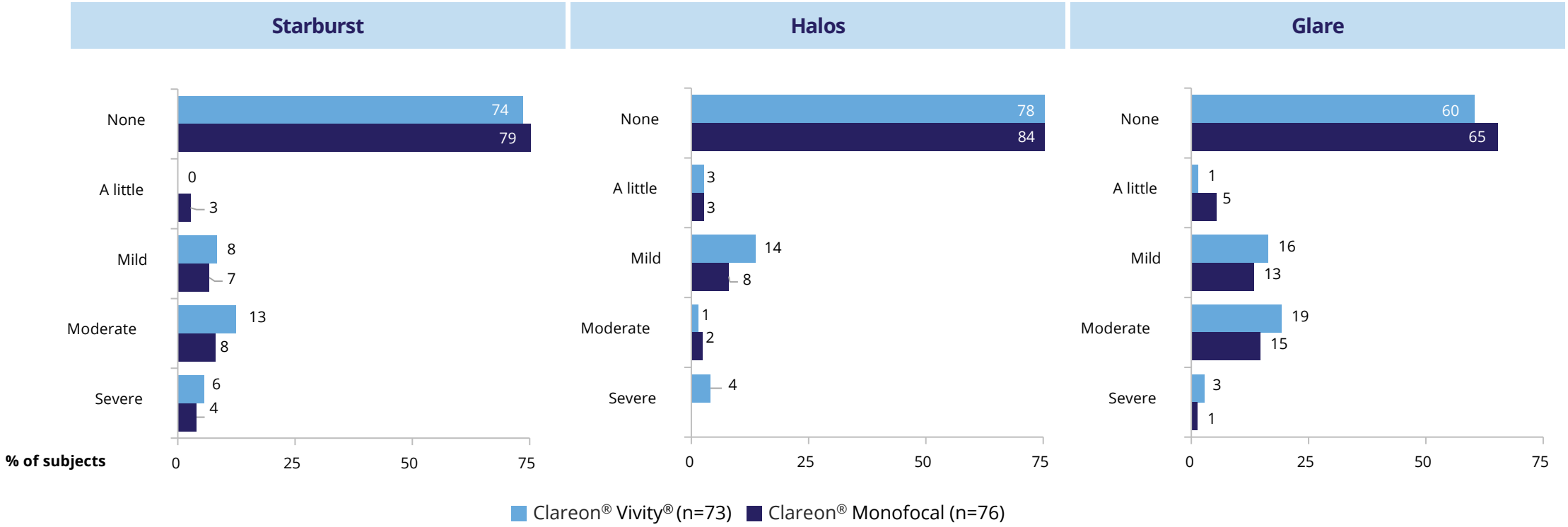
Majority of Clareon® Vivity® and Clareon® Monofocal subjects were "not at all bothered" by each visual disturbance in the past 7 days[1]

QUVID, Questionnaire for Visual Disturbances.

1. Berdahl JP, Grosinger L, Reed O. Visual Performance of a Novel Wavefront Shaping Extended Depth-of-Focus Intraocular Lens on a New Hydrophobic Acrylic Platform. *J Cataract Refract Surg*. Published online July 21, 2025

Low Levels of Patient-reported Visual Disturbances with Clareon® Vivity®[1]

Severity of Visual Disturbances at **3-6 months**[1]

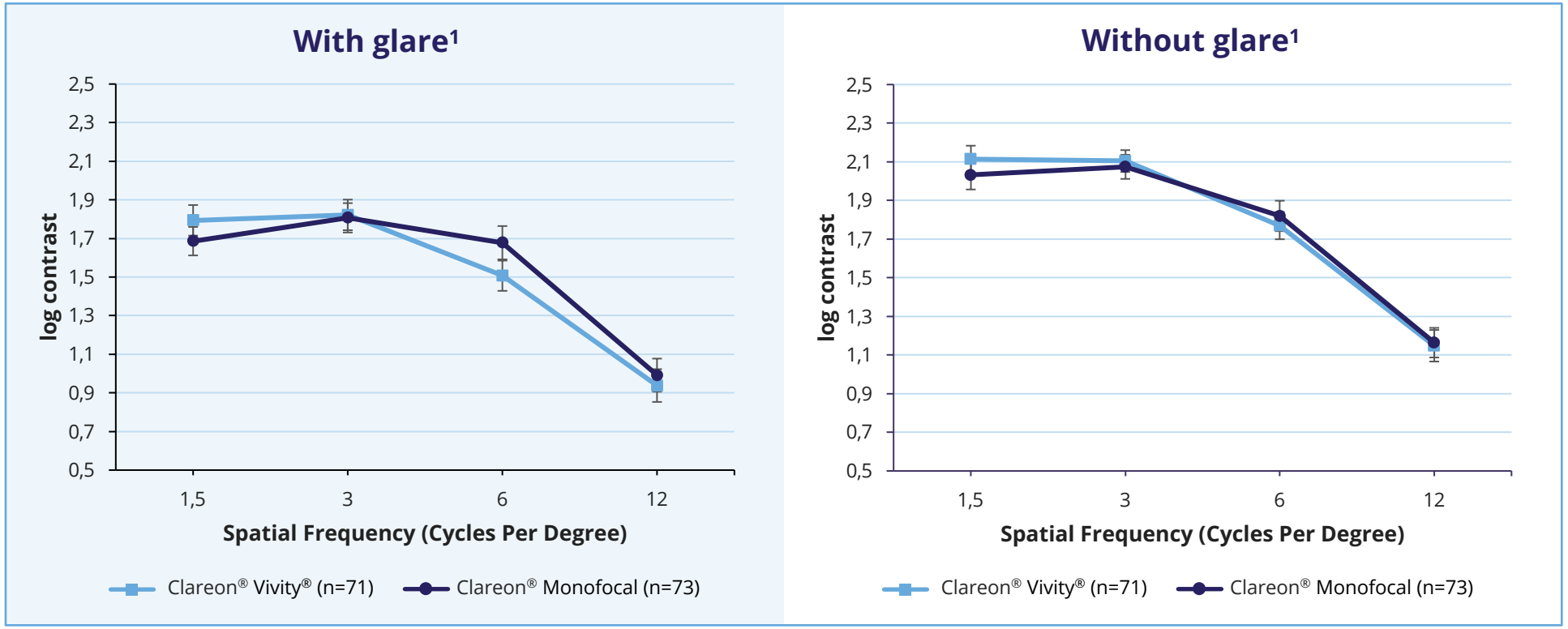


At Visit 1, ≤5.6% of Clareon® Vivity® and ≤4.0% of Clareon® Monofocal subjects experienced severe visual disturbances[1]

QUVID, Questionnaire for Visual Disturbances.

1. Berdahl JP, Grosinger L, Reed O. Visual Performance of a Novel Wavefront Shaping Extended Depth-of-Focus Intraocular Lens on a New Hydrophobic Acrylic Platform. *J Cataract Refract Surg*. Published online July 21, 2025.

Clareon® Vivity® Provides Monofocal-like Contrast Sensitivity Binocularly[1,2]



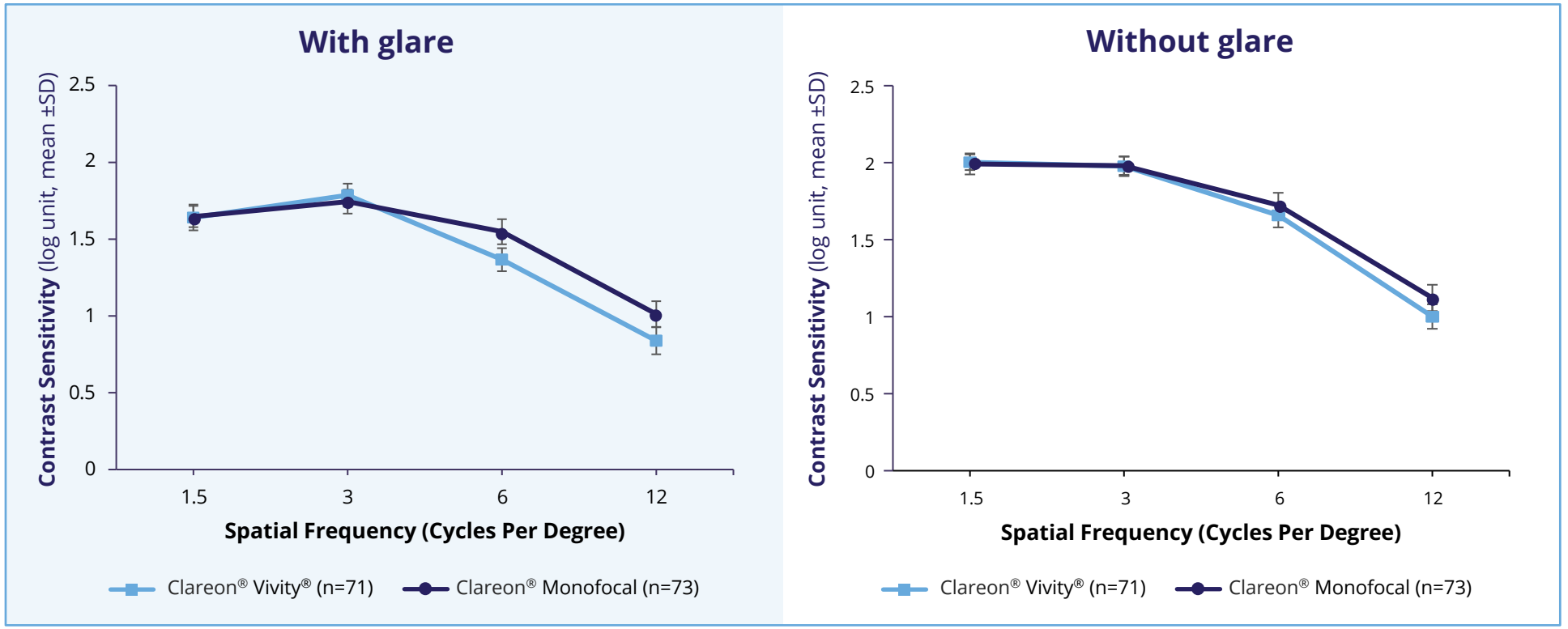
- Binocular mesopic contrast sensitivity with glare and without glare was similar between the Clareon® Vivity® and Clareon® Monofocal groups at 3-6 months[1]
- The maximum difference observed with glare was ≤0.171 log units and without glare was ≤0.082 log units[1]

Error bars represent 2-sided 95% CIs.
n, Number of eyes with contrast sensitivity test.

1. Berdahl JP, *et al*. Visual Performance of a Novel Wavefront Shaping EDoF IOL. *J Cataract Refract Surg*. 2025. doi:10.1097/j.jcrs.0000000000001742. **2.** Clareon® Vivity® Extended Vision Hydrophobic IOL Directions for Use.

Clareon® Vivity® Provides Monofocal-like Contrast Sensitivity Monocularly[1,2]

Data for first eye implanted[1]



- Monocular mesopic contrast sensitivity with glare and without glare was similar between the Clareon® Vivity® and Clareon® Monofocal groups at 3-6 months[1]
- Maximum difference observed[1,2]: With glare (at 6CPD): 0.182 log units; Without glare (at 12CPD): 0.121 log units

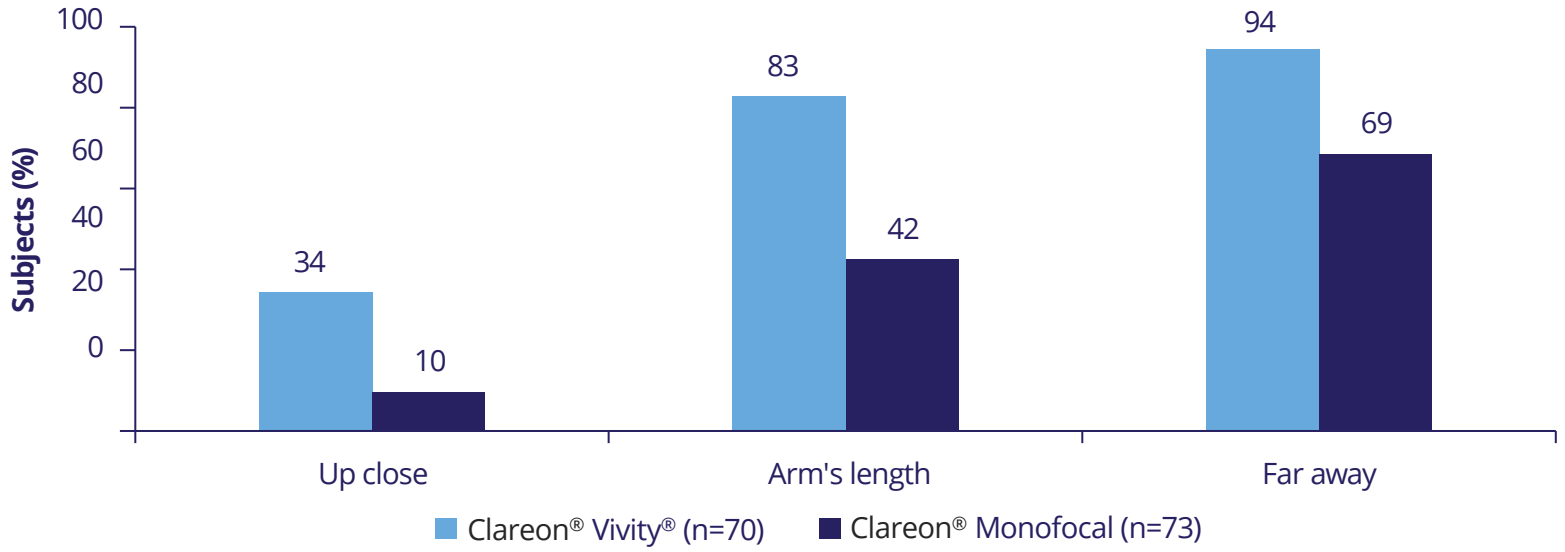
1. Alcon Data on File. Ref 25409 **2.** Berdahl JP, Grosinger L, Reed O. Visual Performance of a Novel Wavefront Shaping Extended Depth-of-Focus Intraocular Lens on a New Hydrophobic Acrylic Platform. *J Cataract Refract Surg*. Published online July 21, 2025.

SPECTACLE INDEPENDENCE AND SATISFACTION

Majority of the Clareon® Vivity® Subjects Reported 'Never/Rarely' Using Eyeglasses at Intermediate and Far Distances[1]

"In the Past 7 Days, How Often Did You Need to Wear Eyeglasses to See?"

Proportion of subjects who responded **Never/Rarely**



Majority of the Clareon® Vivity® subjects reported 'Never' or 'Rarely' using eyeglasses at arm's length (83%) and far away (94%)

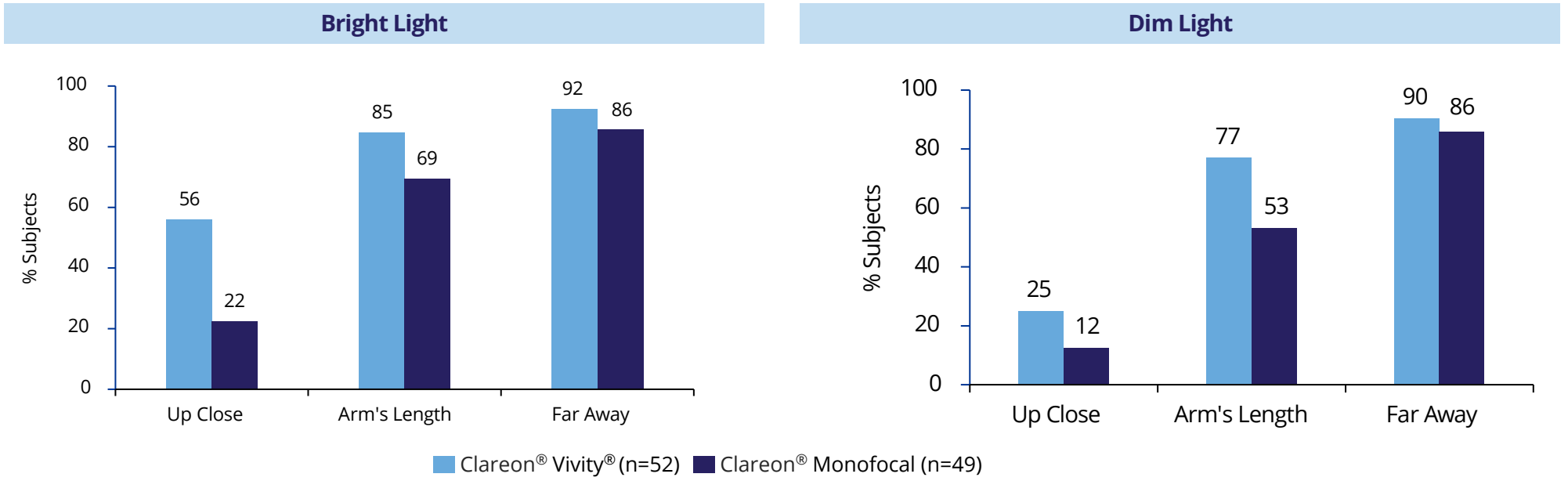
IOLSAT, intraocular lens satisfaction

1. Berdahl JP, Grosinger L, Reed O. Visual Performance of a Novel Wavefront Shaping Extended Depth-of-Focus Intraocular Lens on a New Hydrophobic Acrylic Platform. *J Cataract Refract Surg*. Published online July 21, 2025.

Clareon® Vivity® was Effective, Irrespective of Lighting Levels[1]

"In the Past 7 Days, How Well Did You See Without Eyeglasses?"

Proportion of subjects who responded **Good or Very Good**



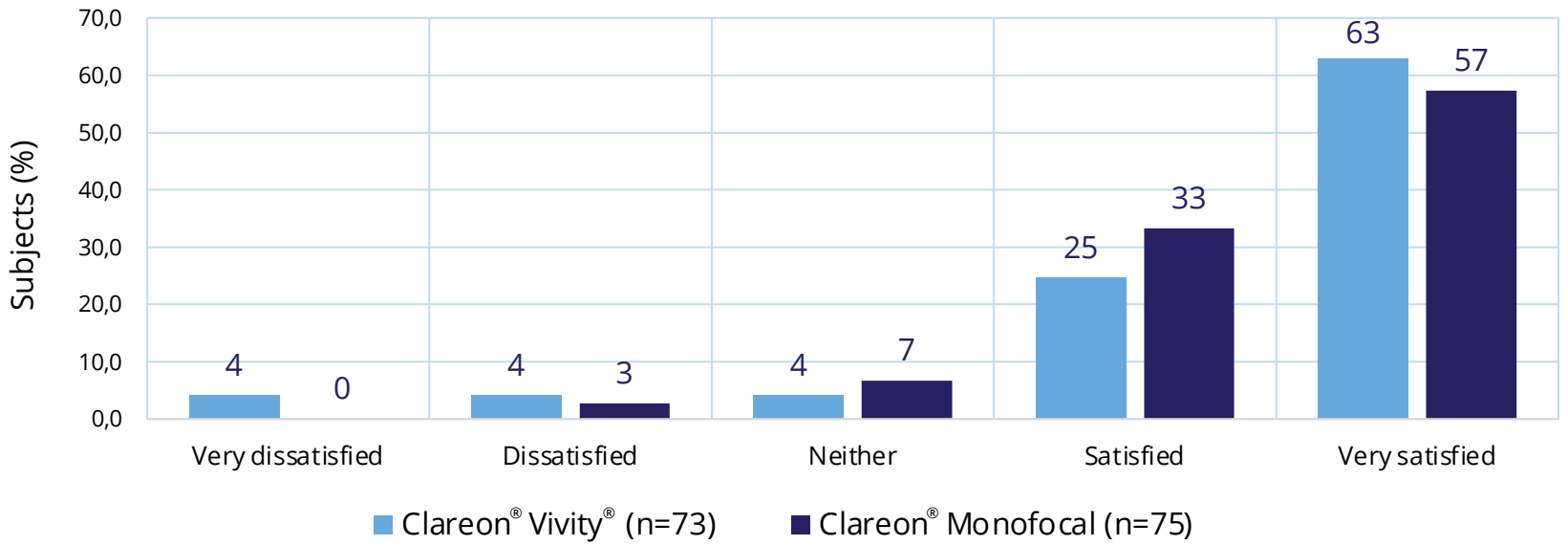
Majority of subjects with Clareon® Vivity® reported 'Good' or 'Very Good' quality of vision under both bright and dim light, when not using glasses at arm's length and far away

IOLSAT, intraocular lens satisfaction. Question: In the Past 7 Days, How Well Did You See Without Wearing Eyeglasses

1. Berdahl JP, Grosinger L, Reed O. Visual Performance of a Novel Wavefront Shaping Extended Depth-of-Focus Intraocular Lens on a New Hydrophobic Acrylic Platform. *J Cataract Refract Surg*. Published online July 21, 2025.

~90% of Patients were Satisfied with Clareon® Vivity®[1,2*]

"In the past 7 days, how satisfied were you with your vision?"[2]



91.4%

of patients reported to be satisfied† with their sight at present[2]

Majority subjects responded satisfied/very satisfied:

Clareon® Vivity® (88%, n=64) vs **Clareon® Monofocal** (91%, n=68)

- **Majority subjects responded YES to "Given your vision today, if you had to do it all over, would you have the same lenses implanted again":** Clareon® Vivity® (89%, n=65) vs Clareon® Monofocal (88%, n=66)
- **Majority subjects responded YES to "Given your vision today, would you recommend the lenses you had implanted to your family or friends?":** Clareon® Vivity® (93%, n=67) vs Clareon® Monofocal (93%, n=70)

*Patients were evaluated 90 to 180 days following the second IOL implantation. †Reported as "very" or "fairly" satisfied at 3-6 months; n=879 (overall cohort, patients bilaterally implanted with AcrySof® IQ Vivity® and/or Vivity® Toric IOLs).

1. Berdahl JP, Grosinger L, Reed O. Visual Performance of a Novel Wavefront Shaping Extended Depth-of-Focus Intraocular Lens on a New Hydrophobic Acrylic Platform. *J Cataract Refract Surg*. Published online July 21, 2025. **2.** Alcon Data on File. REF-25409 .

CONCLUSIONS

Clareon® Vivity® - Presbyopia correction with a consistent monofocal visual disturbance profile[1-6‡§].

- **Clareon® Vivity® was superior** to Clareon® Monofocal for mean binocular photopic DCIVA and DCNVA.[3]
- **Clareon® Vivity® was non-inferior** to Clareon® Monofocal for mean binocular photopic BCDVA.[3]

- Clareon® Vivity® demonstrated a **visual disturbance profile similar** to that of Clareon® Monofocal and mesopic contrast **sensitivity not clinically different** from Clareon® Monofocal.[3]

- Clareon® Vivity® IOLs showed **reduced spectacle dependence** compared to Clareon® Monofocal subjects.[3]

BCDVA, binocular distance-corrected visual acuity; DCIVA, distance corrected intermediate visual acuity; DCNVA, distance corrected near visual acuity; IOL, intraocular lens.

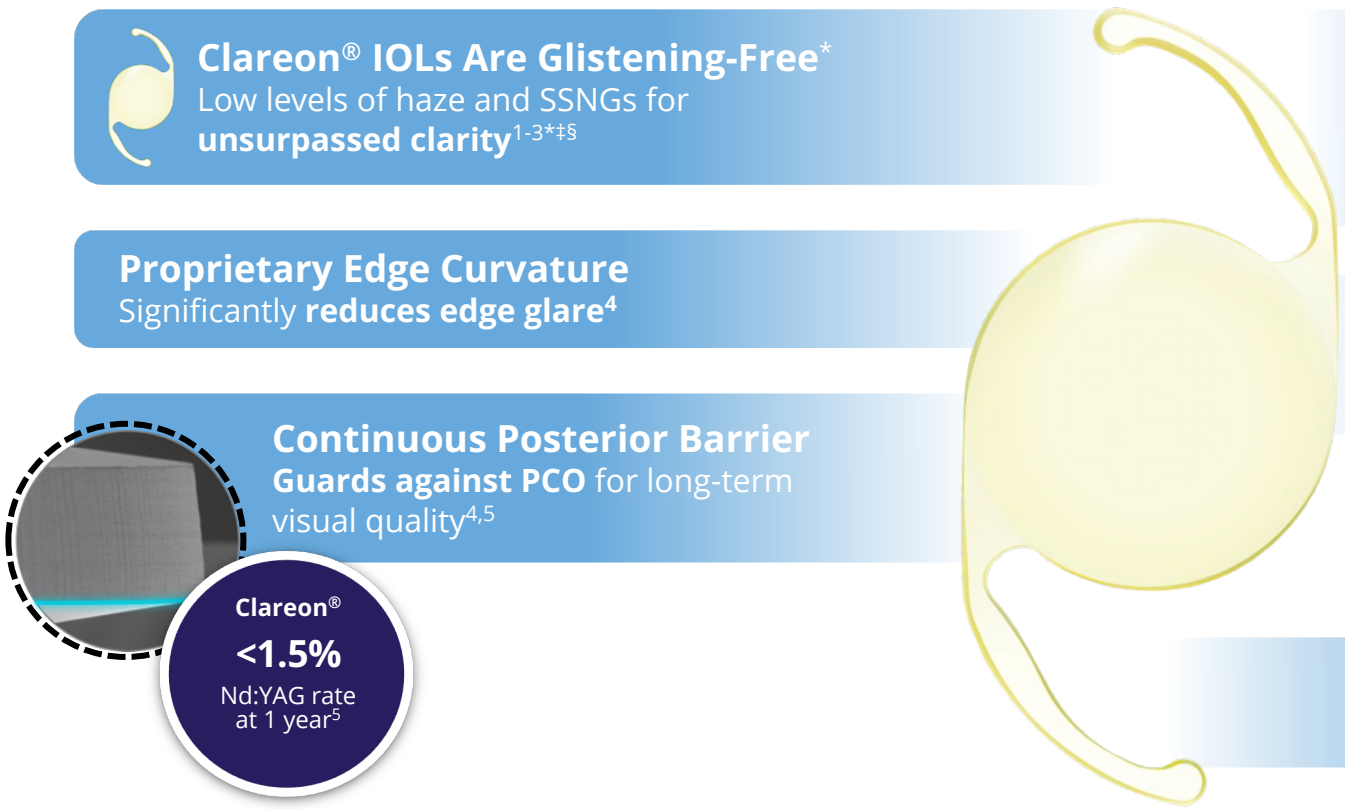
‡ AcrySof IQ Vivity and Clareon Vivity are optically equivalent.
§ Results from a prospective/retrospective, multicenter, non-randomized, parallel-group, controlled, assessor-masked interventional study comparing the performance of Clareon Vivity and Vivity Toric IOLs (n=75) with Clareon Monofocal and Clareon Toric IOLs (n=73), with 90–180 days of follow-up.

1. Clareon Vivity iFU. 2. Kohnen T, et al. Clin Ophthalmol. 2023;17:2449–2457. 3.Berdahl JP, Grosinger L, Reed O. Visual Performance of a Novel Wavefront Shaping Extended Depth-of-Focus Intraocular Lens on a New Hydrophobic Acrylic Platform. *J Cataract Refract Surg*. Published online July 21, 2025. . 4.Bala C, et al. J Cataract Refract Surg. 2022;48(2):136–143. 5.McCabe C, et al. J Cataract Refract Surg. 2022;48(11):1297–1304. 6.Howes F, et al. J Refract Surg. 2025;41(2):e131.

CLAREON® PLATFORM BENEFITS

KEY FEATURES & BENEFITS

Give Your Patients Continued Confidence with Clareon® IOLs



Clareon® IOLs Are Glistening-Free*

Low levels of haze and SSNGs for **unsurpassed clarity**[1-3*‡§]

Proprietary Edge Curvature

Significantly **reduces edge glare**[4]

Continuous Posterior Barrier

Guards against PCO for long-term visual quality[4,5]

STABLEFORCE® Haptics

- Excellent centration and stability for a range of capsule sizes[6-8]
- Minimal axial shift for maximum refractive predictability[7]

Fully-usable 6mm Aspheric Optic

Dedicated to sharp, crisp vision[4,8,9]

Clareon®
Fully-usable 6mm optic

TECNIS† IOL:
Usable optic up to 4.9mm

Advanced BioMaterial

Fibronectin binding for **enhanced stability**[10]

*Defined as modified Miyata grade 0, <25mv/mm². †Trademarks are the property of their respective owners. ‡Based on in vitro examinations of glistenings, surface haze and SSNGs. §Compared in vitro with TECNIS† OptiBlue† ZCB00V, TECNIS† ZCB00, Vivinex† XY-1, Eternity† Natural Uni W-60 and enVista† MX60. (Surface haze and SSNGs: n=10 lenses per group, P<0.001; Glistenings: n=30 IOLs per group, P<0.001).

1. Lehmann R, Maxwell A, Lubeck DM, *et al*. Effectiveness and safety of the Clareon monofocal intraocular lens: outcomes from a 12- month single-arm clinical study in a large sample. *Clin Ophthalmol* 2021:15:1647-1657. **2.** Oshika T, Fujita Y, Inamura M, Miyata K. Mid-term and long-term clinical assessments of a new 1-piece hydrophobic acrylic IOL with hydroxyethyl methacrylate. *J Cataract Refract Surg*. 2020;46(5):682-687. **3.** Werner L, Thatthamla I, Ong M, *et al.* Evaluation of clarity characteristics in a new hydrophobic acrylic IOL in comparison to commercially available IOLs. *J Cataract Refract Surg*. 2019;45(10):1490-1497. **4.** Das KK, Werner L, Collins S, Hong X. In vitro and schematic model eye assessment of glare or positive dysphotopsia-type photic phenomena: Comparison of a new material IOL to other monofocal IOLs. *J Cataract Refract Surg*. 2019;45(2):219-227. **5.** Clareon® IOL Directions for Use. **6.** AcrySof® Toric Directions for Use. **7.** Alcon data on file, 2017. REF-04161. **8**. Lane S, Collins S, Das KK, *et al*. Evaluation of intraocular lens mechanical stability. *J Cataract Refract Surg*. 2019;45(4):501-506. **9** Alcon data on file, 2017. REF-01212. **10.** Alcon data on file, 2017. REF-06341.

Clareon® IOLs Deliver Clarity, Excellence, and Performance

CLARITY

- **Exceptional clarity that lasts:**[1-4*†‡] Glistening-free§ IOL with among the lowest levels of haze and SSNGs[1-3]

EXCELLENCE

- Fully usable 6 mm aspheric optic dedicated to **sharp, crisp distance vision from edge to edge without compromises**[5-7]
- Proprietary edge curvature helps significantly **reduce edge glare**[7]

PERFORMANCE

- **Refractive predictability:** STABLEFORCE Haptics provide excellent axial stability and centration[5,10,11]
- **Exceptional rotational stability:** Optimizes the astigmatism correction with certainty[10-13]

Trademarks are the property of their respective owners. †Based on in vitro examinations of glistenings, surface haze and SSNGs. ‡Compared in vitro with TECNIS OptiBlue* ZCB00V, TECNIS* ZCB00, Vivinex* XY-1, Eternity* Natural Uni W-60 and enVista* MX60. (Surfacehaze and SSNGs: n=10 lenses per group, P<0.001; Glistenings: n=30 IOLs per group, P<0.001). §Defined as modified Miyata grade 0, <25mv/mm^2.

1. Lehmann R, Maxwell A, Lubeck DM, *et al*. Effectiveness and safety of the Clareon monofocal intraocular lens: outcomes from a 12- month single-arm clinical study in a large sample. *Clin Ophthalmol* 2021:15:1647-1657. **2**. Oshika T, Fujita Y, Inamura M, Miyata K. Mid-term and long-term clinical assessments of a new 1-piece hydrophobic acrylic IOL with hydroxyethyl methacrylate. *J Cataract Refract Surg* 2020; 46:682–687. **3.** Werner L, Thatthamla I, Ong M, *et al.* Evaluation of clarity characteristics in a new hydrophobic acrylic IOL in comparison to commercially available IOLs. *J Cataract Refract Surg* 2019; 45:1490–1497. **4.** Maxwell A, Suryakumar R. Long-term effectiveness and safety of a three-piece acrylic hydrophobic intraocular lens modified with hydroxyethyl-methacrylate: an open-label, 3-year follow-up study. *Clin Ophthalmol*. 2018;12:2031-2037. **5.** Clareon Monofocal IOL DFU SY60WF (v1.0). **6.** Alcon data on file, 2017. REF-01212. **7**. Das K, Werner L, Collins S. In vitro and schematic model eye assessment of glare or positive dysphotopsia-type photic phenomena: Comparison of a new material IOL to other monofocal IOLs. *J Cataract Refract Surg* 2019; 45:219–227. **8.** Alcon data on file, 2019. REF-07220. **9.** Alcon data on file, 2019. REF-09755. **10.** Clareon® Toric IOL Directions for Use. **11**. Alcon data on file, 2017. REF-04161. **12.** Lee BS, Chang DF. Comparison of the Rotational Stability of Two Toric Intraocular Lenses in 1273 Consecutive Eyes. *Ophthalmology*. 2018;125(9):1325-1331. **13.** Alcon data on file, 2019. REF-05749.

SUPPLEMENTARY SLIDES

Subject Demographics[1]
(Full analysis set)

Parameter	Clareon® Vivity® (N=73)	Clareon® Monofocal (N=76)	Overall (N=149)
Age, years			
Mean (SD)	68.4 (8.92)	71.5 (6.97)	70.0 (8.10)
Median (min, max)	70.0 (42, 86)	71.0 (52, 88)	71.0 (42, 88)
Age group, n (%)			
<65 years	17 (23.3)	8 (10.5)	25 (16.8)
≥65 years	56 (76.7)	68 (89.5)	124 (83.2)
Sex, n (%)			
Male	31 (42.5)	30 (39.5)	61 (40.9)
Female	42 (57.5)	46 (60.5)	88 (59.1)
Race, n (%)			
White	68 (93.2)	63 (82.9)	131 (87.9)
Black or African American	2 (2.7)	7 (9.2)	9 (6.0)
Asian	3 (4.1)	6 (7.9)	9 (6.0)
Ethnicity, n (%)			
Hispanic or Latino	0 (0.0)	1 (1.3)	1 (0.7)
Not Hispanic or Latino	73 (100.0)	75 (98.7)	148 (99.3)

IOL, intraocular lens; N, Number of subjects in each IOL group and overall; n, Number of subjects in specified category; SD, standard deviation.

1. Berdahl JP, Grosinger L, Reed O. Visual Performance of a Novel Wavefront Shaping Extended Depth-of-Focus Intraocular Lens on a New Hydrophobic Acrylic Platform. *J Cataract Refract Surg*. Published online July 21, 2025.

Key Inclusion and Exclusion Criteria[1]

Key inclusion criteria

- Adults (aged ≥18 years)
- Previous bilateral implantation of Clareon® Vivity®/Clareon® Vivity® Toric or Clareon® Monofocal/ Clareon® Toric IOLs for 3 to 6 months after 2nd eye implant
- IOL spherical power within 10.0 to 30.0 D range in both eyes and for both lens types
- If Toric lens: Cylinder power at IOL plane in the range +1.50 to +3.75 D in 0.75 D increments for each eye

Key exclusion criteria

- History of clinically significant ocular co-morbidities that would affect surgical outcomes based on investigator expert medical opinion
- History of corneal refractive surgery.
- Targeted to monovision defined as ≥1.50 D of anisometropia
- Clinically significant PCO affecting vision
- History of Amblyopia or Monofixation syndrome with poor stereoscopic vision

IOL, intraocular lens; PCO, posterior capsular opacification.

1.Berdahl JP, Grosinger L, Reed O. Visual Performance of a Novel Wavefront Shaping Extended Depth-of-Focus Intraocular Lens on a New Hydrophobic Acrylic Platform. *J Cataract Refract Surg*. Published online July 21, 2025.

Alcon medical device(s) comply with the current legislation for medical devices. Please refer to the relevant product instructions for use for a complete list of indications, contraindications, and warnings.