ULTRA® WAVE

SILICONE HYDROGEL

monthly disposable contact lens

A Silicone Hydrogel monthly contact lens, using unique multi-aspheric front surface designs providing patented aberration controls based on wavefront technology studies to deliver the following benefits:

Clearer Vision

Clearer vision in all conditions
Enhanced vision in low-light conditions
Enhanced contrast sensivity
Can mask astigmatism up to 1.25DC with spherical fitting

Improved Health & Comfort

Silicone Hydrogel material allows increased oxygen to the cornea
Enhanced ocular comfort through lens design

Early Presbyopes

Ideally suited to VDU use through enhanced intermediate vision
Postpones need for multifocals or over readers

Material	42% Filcon II 3, 58% Water
Base Curve	8.40mm
Diameter	14.10mm
Lens Design	Wavefront aberration controlled unique multi-aspheric front surface
Power Range (D)	-10.00DS to +8.00DS -0.25DS to -8.00DS in 0.25 steps -8.50DS to -10.00DS in 0.50 steps +0.25DS to +6.00DS in 0.25 steps +6.50DS to +8.00DS in 0.50 steps
Centre Thickness	0.07mm (-3.00DS lens)
Handling Tint	Clear
DK/t @ -3.00	86 x10^{-11} (cm^2/sec) [ml 0_2/(ml x mm Hg)]
Wear Modality	Monthly replacement for daily wear only
Pack Size	6 lenses

THE QUEEN'S AWARDS FOR ENTERPRISE: INNOVATION 2006

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Fitting Guide for UltraWave® SiH

Initial Requirements

Assess patient's suitability for contact lens wear in normal way.

Complete spectacle refraction.

Keratometry readings.

Horizontal Visible Iris Diameter (HVID).

Initial Fitting

Calculate the initial best vision sphere (BVS) using the following formula:

$$BVS = Sphere + \frac{Cylinder}{2}$$

Note: For astigmatic corrections greater than 1.25D consider HydroWave® or UltraWave® Toric.

Select lens of equivalent power to the best vision sphere (BVS) for the patient, allowing for vertex distance adjustments if the BVS power is greater than +/- 4.00D.

Insert selected lens and assess initial comfort and movement.

Fitting Assessment

After the lens has settled for 5 minutes, assess vision and fit including the following points:

The lens should exhibit good centration on primary (straight ahead) gaze and good corneal coverage.

Vertical movement on blinking (on upward gaze) should be between 0.5mm and 1mm.

The push up test (PUT) should show fast and smooth recentration of the lens.

There should be no scleral indentation or blanching. The patient should experience good comfort.

Over Refraction

Carry out an over refraction to find the final BVS for distance.

Order the lens with the power of the final BVS.

Early Presbyopes

For early presbyopes, the improved depth of focus of the UltraWave® SiH lens allows the following options to be investigated:

1) Assess the near vision capability of the patient with the correct distance BVS (over refraction) in place. If this is suitable order the lenses using this power (as above).

2) If the near vision is not acceptable insert lenses with power +0.50DS greater than the distance BVS in both eyes. Then reassess the near vision and distance vision. If both are acceptable then order this power.

3) If neither of the above provides acceptable vision then consider adding +1.00DS to the non-dominant eye only, leaving the dominant eye with the normal BVS for distance. Then reassess the near and distance acuities binocularly. Due to the unique multi-aspheric front surface lens design, good binocular intermediate vision can be obtained even with the monovision solution.

ULTRAVISION CLPL
INNOVATION IN PRACTICE

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