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## **Patient Information: IOL – VIP (Intraocular lens for visually impaired people)**

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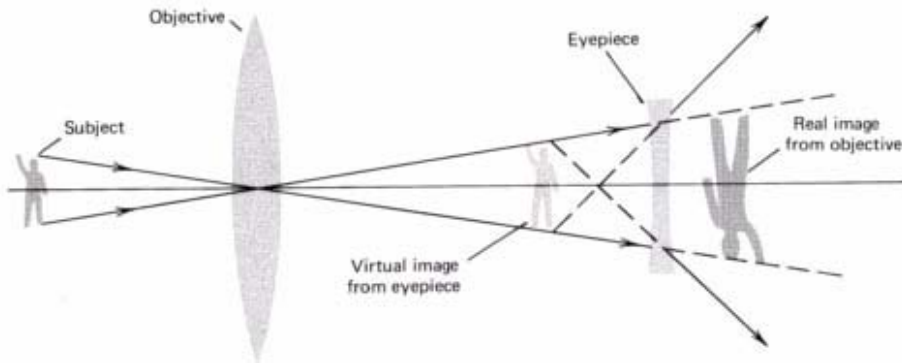
The use of intravitreal antigrowth factor agents has greatly increased the chance of retaining reasonably good vision following the development of wet ARMD. However, there remains a significant number of patients with poor vision due to macular scars in both eyes secondary to ARMD. These patients include those who only had a partial response to Lucentis treatment, those with dry age related macular degeneration and a very large group of patients who developed ARMD prior to the development of Lucentis treatment. In these patients visual function is sometimes improved by the use of low vision aids. These have traditionally been provided in the form of high power spectacles or magnifying glasses which are useful for reading but inconvenient for prolonged work, and not of great help for distance vision.



*Traditional magnifying spectacles/ Low Vision aids*

A new type of intraocular lens inserted in place of the natural lens has recently been developed which offers the opportunity to provide a magnified image on the retina (1.3 X ) while at the same time providing a reasonable field of view for distance vision. The lens system works on the principle of a Gallilean telescope and has the

additional benefit of displacing the image away from the damaged retina onto a healthier area with further improvement in vision.

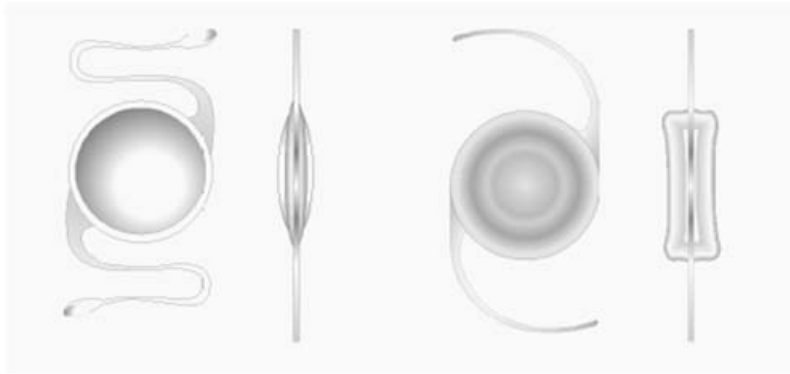


*Diagram of Galilean telescope system*

Initial results with this system have been very encouraging with a significant percentage of patients gaining visual improvement and some being able to read again. Surgery is usually carried out as a day case under local anaesthetic and consists of several steps :

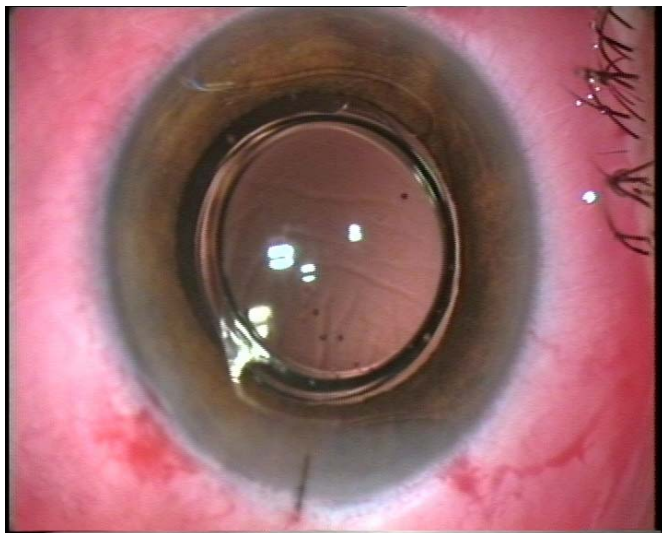
1. Out patient consultation to determine suitability for IOL-VIP system using a simulator which is placed in a spectacle frame and mimics the potential visual improvement possible following surgery.
2. Laser treatment to the iris one week prior to lens insertion. This is a simple out-patient procedure designed to prevent glaucoma following lens implantation.
3. Removal of cataract using routine cataract surgery techniques.
4. Implantation of 2 lenses to create the IOL-VIP system.
5. In patients who have already undergone cataract surgery a version of the IOL-VIP is available which can be used in addition to the normal replacement lens already in the eye

Patients normally notice improvement within a few days although some may require additional help to use the magnified, eccentric image.



*Diagram of the two intraocular lenses used to create the IOL-VIP system*

Initial studies suggest that duration of symptoms is not important. Those who potentially do best have some useful vision of 6/60 or better in one eye with a relatively small macular scar.



*Post-operative picture of the IOL-VIP in position.*

One lens is behind and one lens is in front of the iris. A small stitch is inserted which is removed at the first post-operative visit.

All intraocular surgery carries some risk and in the worst case scenario vision can be lost. However, studies so far indicate that the IOL-VIP implantation carries only slightly more chance of problems than routine cataract surgery.

If you would like further information or to make an appointment please contact my personal assistant on 01189 553457 or e mail [secretary@tanner-eyes.co.uk](mailto:secretary@tanner-eyes.co.uk)

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**Disclaimer**

*The information provided in this document is intended as a useful aid to general practitioners, optometrists and patients. It is impossible to diagnose and treat patients adequately without a thorough eye examination by a qualified ophthalmologist, optometrist or your general practitioner. Hopefully the information will be of use prior to and following a consultation which it supplements and does not replace.*

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