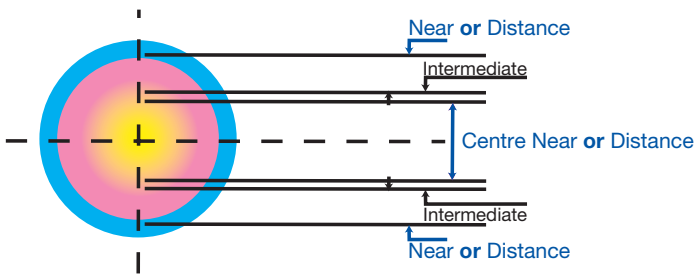




SAM[®] MF Soft



SAM[®] is a unique patented calculation system, used to control aberrations found in powered contact lenses.

By overcoming these aberrations, SAM[®] lenses offer superior vision to the wearer with the use of aplanatic optics.

SAM[®] technology ensures that lens powers do not deviate from selected Rx at any part of the lens.

Available as Centre Distance or Centre Near Multifocal, see diagram to the left.

Choose the best SAM[®] MF Soft contact lens design for your patient:

Centre Distance Design

Ensures the patient has superior distance-vision in all illumination conditions

Centre Near Design

Quality of the wearer's near-vision is not compromised in high illumination conditions, when the pupil is constricted

Flexible Zone Sizes

Zones can be changed depending on the patient's needs

Allows flexible fitting for modified mono-vision

Availability

Sphere and Toric form

Material	GM3 58% *
Base Curve	7.00mm to 9.80mm (0.10 steps)
Diameter	12.50mm to 16.00mm (0.10 steps)
Lens Design	Centre Distance or Centre Near
Power Range (D)	-30.00DS to +30.00DS (0.25 steps) Cyl -0.50DC to -11.00DC (0.25 steps) Axis: 1° to 180° (1° steps) Add: Up to +3.50DS
Centre Thickness	0.07mm (Sphere @ -2.00DS)
Handling Tint	Dark Blue
DK	21 x 10 ⁻¹¹ (cm ² /sec) [ml O ₂ /(ml x mmHg)]
Wear Modality	12 Monthly, for daily wear only
Pack Size	Single lens

* Also available in a GM3 72% material



Fitting Guide for SAM[®] Multifocal - Soft

Fitting Guidelines

The practitioner provides the following parameters:

- spectacle refraction including sphere, cyl, axis and add, as appropriate
- Back Vertex Distance (BVD)
- Keratometer readings (preferably with axes)
- Horizontal Visible Iris Diameter (HVID)
- Dominant eye
- Pupil diameter in normal light

Identification of the dominant eye enables a slightly larger area, for the near and near/intermediate powers, to be worked into the lens for the non-dominant eye. This promotes a more “comfortable” binocular relationship.

Initial Assessment

The lens parameters arising from the measurements provided will usually achieve first-time, optimum all-round vision. However in some cases modification may be required.

If the practitioner is satisfied with the physiological aspects of the fit, it is best to defer any adjustment to power until the patient has completed 7 to 10 days of regular wear. This period permits the patient’s visual system to become accustomed to the specific nature of the aspheric optical system.

Assessing the Fit

At the 2 weekly consultation, the fit should be assessed, taking note of the points outlined below:

Characteristics of a Flat Fit

Flat fittings result in excessive movement of the lens and this will affect the optical efficiency of the system with the following symptoms:

- There will be induced astigmatism in the over-refraction
- The over-refraction will require more plus for near vision
- Manual correction of the position of the lens on the eye will usually confirm the above
- For a toric lens the axis will usually rotate

In such cases, steepening of the fit, preferably by diameter increase, will correct the problem.

Characteristics of a Steep Fit

When the fitting is steep, vision is inconsistent and clears only for a brief time following a blink. In most cases, flattening of the fit, by changes to the BOZR, will overcome these problems. The steep fit also negates the effect of the stabilisation areas in the toric lens forms and there may be a slow, progressive movement of the cylinder axis away from its prime position.

Cylindrical Axis Mislocation

Where the multifocal is in toric form, axis mislocation will be detrimental to vision. In the case of small deviations (5 degrees or less), a compensating change in the cylinder axis will often rectify. Larger deviations will require additional consideration of the level of ballasting applied to the front surface and/or an increase in the diameter to increase the influence of the sclera in promoting stability. A change in BOZR would be required to maintain the equivalent fit.

Adjustments to Lenses

In the event that adjustments are required, we request that practitioners do not make their own adjustments, and instead supply symptomatic details of any problems along with any refractive information direct to UltraVision. The Clinical Services Department, who have access to the details of the complex structure of the lenses, will then determine the final specification of the lens to be made. This will enable the laboratory to effect the best combination of adjustments whilst retaining all the benefits of the SAM[®] technology.

Important Notes on Aftercare Visits

- As with all progressive multifocal corrections, there is an adaptation period of at least one week of regular wear
- Minor with-the-rule astigmatic errors may be ignored if the patient copes without this correction in their spectacle Rx or single-vision soft lenses
- Should unsatisfactory vision result from a lens, an over-refraction should be performed*, first for the distance, then **independently**, for the near.

* The use of pinholes or similar techniques in over-refraction of the SAM[®] Multifocal Soft contact lens is ineffective as an aid to evaluating visual results.



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