

ICL

sehkraft^o





experience a new dimension

Carina Fettweis

"No more annoying contact lenses, no more thick glasses and no more squinting without correction. I don't want to miss my ICLs anymore and would decide to have the surgery again anytime!"



ICL IMPLANTATION

The implantation of the Visian® ICL™ is the most minimally invasive procedure for correcting ametropia using lenses and has long been one of the safest and most proven methods of refractive surgery. First used in 1993, it has been a standard procedure for more than 20 years.

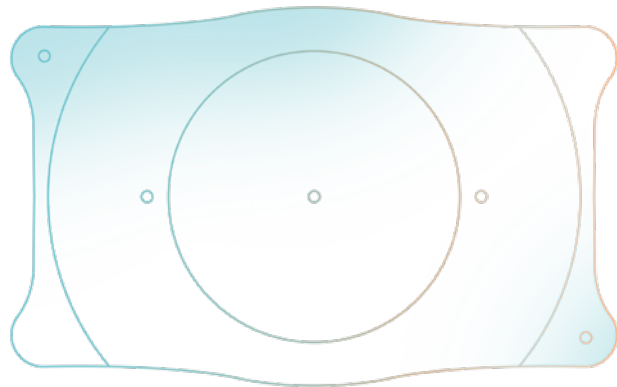
A custom-made lens corrects your refractive error, including the astigmatism, without any tissue changes being made to the eye. Of course, the tiny lens is invisible and you cannot feel it.

**INDEPENDENT OF GLASSES
AND CONTACT LENSES DESPITE
EXTREME AMETROPIA.**

The ICL is a flexible implantable contact lens. It is implanted in addition to your natural lens so that the eye's ability to adjust to near objects (accommodation) is maintained.

With the help of this lens, we can gently and precisely correct short-sightedness up to -18.0 dioptres, long-sightedness up to +10.0 dioptres and, in the toric version, astigmatism up to -6.0 dioptres.

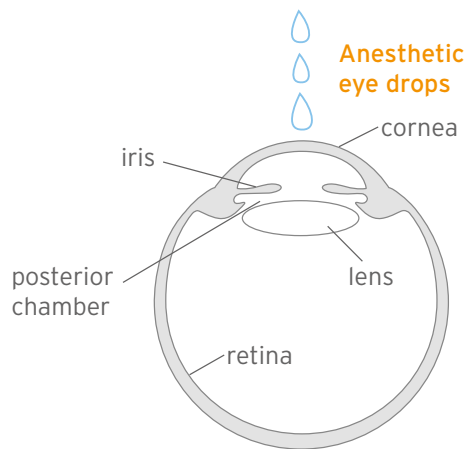
The ICL consists of a technologically mature collagen-based lens material, which in turn forms an essential part of our connective tissue. This makes the lens highly biocompatible, which means that it is not perceived by the eye as a foreign body.



THE SURGICAL PROCEDURE

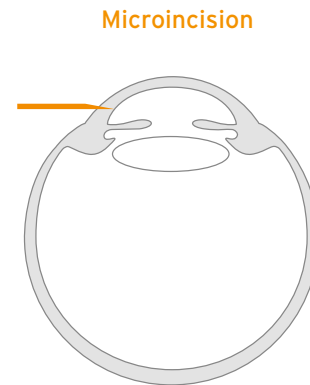
To implant the lens, the eye is tunnelled at the outer edge of the cornea with a micro incision only about 3.2 mm wide. The surgeon places the rolled-up lens through a soft cannula, it unfolds and is very gently brought into the correct position. The fine tunnel incision closes by itself due to the intraocular pressure.

Thanks to light sedation, you will not feel anything during the surgery itself. The treatment only takes about 15 minutes per eye. The operated eye is then protected by a transparent plastic cover until the next morning. If both eyes are operated on, we usually do it on two consecutive days.



01 | Eye drops

Administration of anesthetic eye drops.



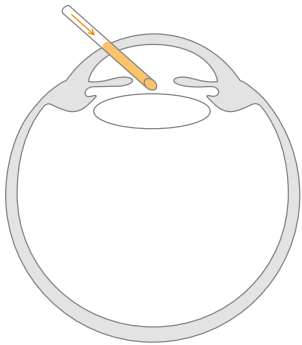
02 | Microincision

A small opening of only 3.2 mm is carefully created at the edge of the cornea.

Already on the first day you can notice an improvement in the quality of vision without glasses. Full visual performance is achieved after approx. 4-6 weeks. You can usually return to your job after just a few days.

You should avoid various sports, make-up and sunbathing for up to 3 weeks.

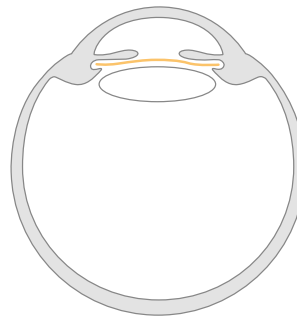
injector



03 | Implantation ICL

The new lens is positioned behind the iris by a microinjector and unfolds there by itself.

ICL in position



04 | Position in the eye

The lens is surrounded by aqueous humour and is located between the natural lens of the eye and the iris.

TEAM sehkraft

Precision, perfection, attention to detail, quality awareness, joie de vivre, empathy, reliability, responsibility - these are the qualities that unite our team.

We all share the same passion for the fascinating possibilities of modern refractive surgery, combined with high ethical standards in our work.

THE HIGHLY QUALIFIED AND EXPERIENCED TEAM IS THE KEY TO OUR SUCCESS.

Our high-performance team consists of more than 50 employees, including, in addition to ophthalmologists, graduate engineers in ophthalmic optics, Master of Science in ophthalmic optics/optometry, Bachelor of Science in optometry, optometrists, master opticians and ophthalmic opticians, who are responsible for all measurements and, above all, for the validation of the collected data as well as the implementation of international studies. Furthermore, they explain competently, understandably and with time.

Our qualified medical and reception staff are specially trained in their fields to ensure adequate counselling and care for our patients.

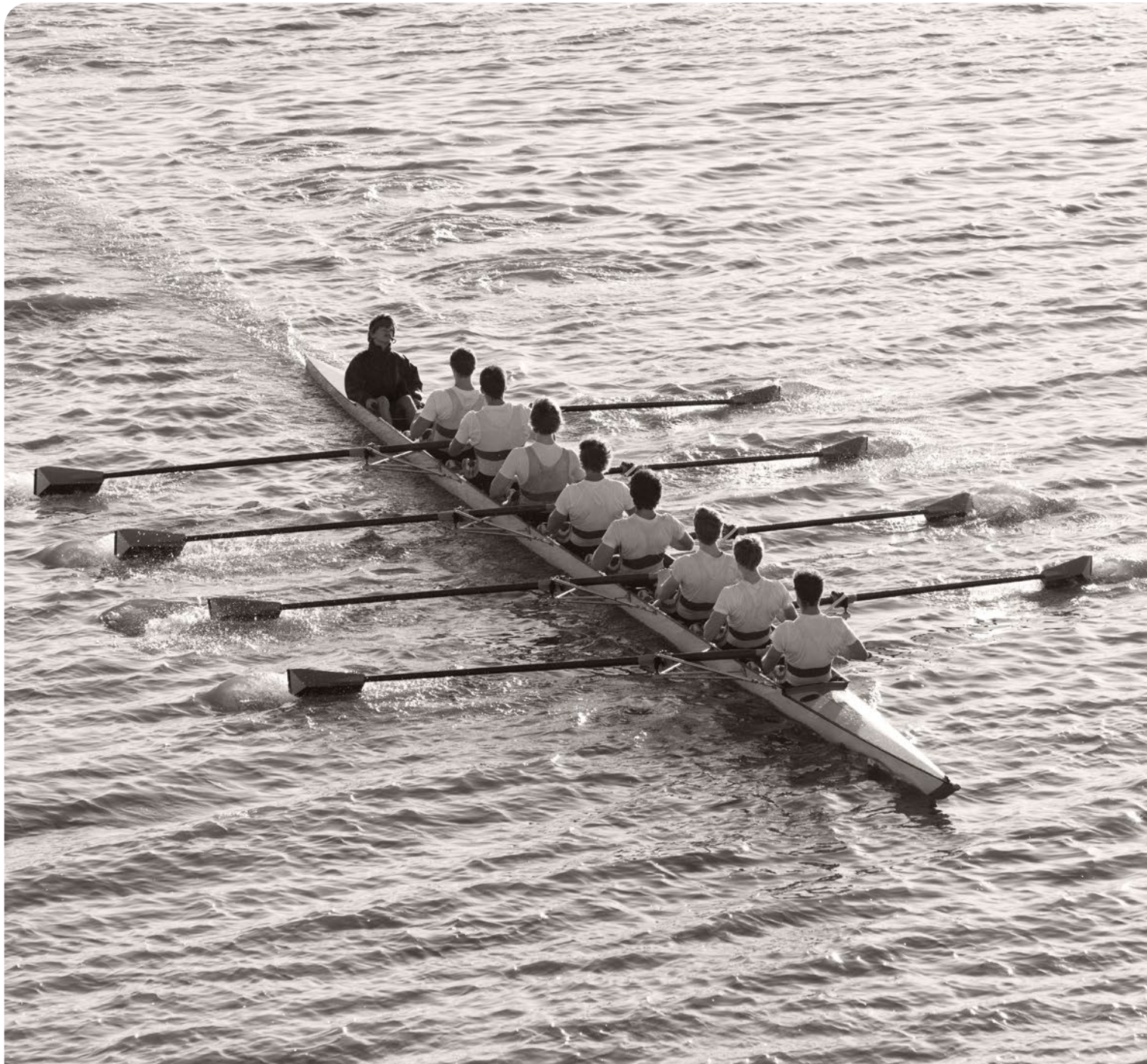
OUR PASSION, EXPERIENCE AND EXPERTISE FOR YOUR EYES.

The creative head and medical director of this team is Matthias Maus, founder and sole owner of sehkraft. He has been a practising ophthalmologist since 1991 and has been working in the field of photorefractive corneal surgery since 1992. He is one of the pioneers in the technical development of lasers and applications and is one of the most experienced surgeons internationally, having performed more than 70,000 LASIK operations.

All our surgeons have been intensively trained by Matthias Maus and of course operate according to the same high "sehkraft" standard.

In order to ensure and permanently improve our high quality standards and to promote the motivation and personality of our employees, regular internal and external training and further education, feedback meetings, audits and consistent coaching take place.

Together we have only one goal: that you can enjoy life without glasses and contact lenses and see better than ever before - and that is our motivation!



OPPORTUNITIES & RISKS

The implantation of the ICL is a wonderful method to make even extremely ametropic people independent of glasses or contact lenses. The implants are very well tolerated and can remain in the eye for decades without losing their properties or stability.

**MORE THAN 98% OF PATIENTS
ACHIEVE A VISUAL ACUITY
OF 100% OR BETTER WITH THE
VISIAN ICL.***

Even though the risks today are extremely low, an individual analysis of the respective eye is the basic prerequisite for successful implementation. The risk of serious complications with the implantation of ICLs is extremely low.

**100 % COULD SEE BETTER THAN
BEFORE THE OPERATION WITH
CONTACT LENS OR GLASSES.***

Increase in intraocular pressure

In rare cases, in the first hours or days after the operation, there may be an increase of the intraocular pressure. We therefore carry out regular checks during this time.

Halos and glare

At dusk or in darkness and with a widened pupil, light refraction at the edge of the artificial lens can lead to increased glare. During night-time driving, this can lead to similar phenomena to those experienced by wearers of hard contact lenses.

Opacity of the natural lens

In exceptional cases, an ICL can lead to clouding of the body's own lens. However, due to the special design of the current version, this is almost impossible.

**100% ARE CONVINCED THAT
THEIR WORK PERFORMANCE
HAS IMPROVED.***

* Source: Study and evaluation of US military surgeons.

COSTS

The costs for ICL lens implantation are between 2,750 euros and 4,200 euros per eye, depending on the lens type and refractive power.

Refractive surgery has been included in the catalogue of individually financed health services (IGeL) by the German Medical Association. Therefore, the treatment costs are generally not covered by the statutory health insurance funds.

Private health insurance companies decide on a case-by-case basis whether they will subsidise the treatment.

Please clarify this directly with your insurer and we will be happy to assist you with any queries.

**INVEST IN YOUR EYES, THE
ADDED VALUE IN QUALITY OF
LIFE IS PRICELESS.**

As a rule, it is possible to claim the treatment costs as an extraordinary burden for tax purposes.

Renata Torres da Silva

"I would do the ICL surgery again any time if I still had a third eye!"



FAQs

Our answers to your questions

Who is eligible for ICL?

Of course, we can only determine whether you are suitable for surgery after a detailed examination.

Basically, the ICL is an excellent solution for the following patients:

- You are between 18 and 50 years old
- You have a high refractive error: myopia (short-sightedness)/hyperopia (long-sightedness)/astigmatism (astigmatism)
- You are not suitable for LASIK due to very dry eyes, high myopia or a thin cornea

What are the contraindications?

There are some parameters that speak against the implantation of a lens. These include, for example, chronic inflammation of the interior of the eye and an existing cataract. The ICL requires sufficient space in the anterior chamber. If this is too small, we will find another solution for you.

What is the experience with ICL?

The ICL was first used in Austria at the end of 1993 and since 1997 also in Germany. More than 2 million ICLs have been implanted worldwide to date. The ICL is an implant manufactured according to strict quality specifications and the CE guidelines for medical products. The lens and the



implantation technique have been continuously developed and the results are excellent.

THE ICL IS INVISIBLE AND CANNOT BE FELT.

Is a subsequent correction possible?

Yes. Should the refractive power change again, an additional Femto-LASIK can then be considered. Of course, it is also possible to exchange the lens.

Can the ICL be seen in the eye?

No, because the lens is positioned behind the iris, it is invisible.

Can you feel the lens?

No, unlike a contact lens, the ICL is not noticeable.

Are the lenses well tolerated?

The ICL is made of Collamer™ (collagen HEMA polymer), a highly biocompatible material that can be processed flexibly.

How long does the lens last?

The lenses can remain in the eye for decades without losing their properties or stability.



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As of: November 2023

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