

CLARITI CONTACT LENS






PACKAGE INSERT

Clariti Elite (somofilcon A)
Clariti Toric (somofilcon A)
Clariti Multifocal (somofilcon A)
Clariti Multifocal Toric (somofilcon A)

**Soft (hydrophilic) Contact Lenses for Daily Wear
with UV Blocker**

SYMBOLS KEY

The following symbols may appear on the label or carton.

SYMBOL	DEFINITION
	Caution: Federal (USA) law restricts this device to sale by or on the order of a licensed practitioner
	See Instructions for Wearers
	Use by Date (expiration date)
	Batch Code
	Sterile using Steam Heat

DESCRIPTION

Clariti (somofilcon A) Soft (hydrophilic) Contact Lenses for Daily Wear is a hydrophilic copolymer of silicone containing monomers and hydrophilic monomers which is cross-linked with tetraethyleneglycol dimethacrylate.

When hydrated the lens consists of 44.0% somofilcon A and 56.0% water by weight of saline immersed in normal saline. A benzophenone UV absorbing monomer is used in the contact lens to help protect against transmission of harmful UV radiation and Clariti (somofilcon A) Soft contact lenses help protect against transmission of harmful UV radiation to the cornea and into the eye.

The average transmittance characteristics are less than 5% in the UVB range of 280 to 315nm and less than 50% in the UVA range of 316-380nm

The lens has a hemispherical flexible shell, which covers the cornea and a portion of the adjacent sclera, with the following dimensions:

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- Chord Diameter: 13.0mm to 15.5mm
- Center Thickness: 0.03mm to 0.50mm
- Base Curve: 7.5mm to 9.30mm
- Powers: -20.00 DS to +20.00 DS
- Toric Cylinder options: -0.75, -1.25, -1.75 and -2.25
- Toric Axis options: 10° to 180° (10° steps).
- Multifocal Add:

Lens “LOW” = “low” for spectacle near ADD lens (Max +2.25 ADD)

Lens “HIGH” = “high” for spectacle near ADD lens (+2.50 ADD or greater)

The physical/optical properties of the lenses are:

- Refractive Index: 1.4003
- % Transmittance @ 590nm: 98.13
- % Transmittance @ 280-315nm: 0.71
- % Transmittance @ 316-380nm: 20.62
- Surface Character: Hydrophilic
- Water Content: 56%
- Oxygen Permeability (DK): 60×10^{-11} (cm²/sec) (ml O₂/ml x mmHg) at 35°C (Fatt Method for determination of oxygen permeability).
- Specific Gravity: 1.17

LENS PARAMETERS

The lenses are as follows:

Clariti Elite (somofilcon A)

Sphere Powers: +20.00 to -20.00 DS
Center Thickness: varies with power e.g. 0.07mm (at -3.00 DS)
Diameter: 13.0 through to 15.5mm
Base Curve: 7.50 through to 9.30mm

Clariti Toric (somofilcon A)

Sphere Powers: +20.00 to -20.00 DS
Center Thickness: varies with power e.g. 0.105mm (at -3.00 DS)
Diameter: 13.0 through to 15.5mm
Base Curve: 7.50 through to 9.30mm
Cylinder Options: -0.75, -1.25, -1.75, -2.25
Axis: 10° to 180° (10° steps)

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Clariti Multifocal (somofilcon A)

Sphere Powers:	+20.00 to -20.00 DS
Center Thickness:	varies with power e.g. 0.07mm (at -3.00 DS)
Diameter:	13.0 through to 15.5mm
Base Curve:	7.50 through to 9.30mm

Add powers are to be prescribed dependent on specific patient requirements as determined by the Eye Care Professional, however as a guide, the lenses come in the following ADD powers:

Lens "LOW" = "low" for spectacle near ADD lens (Max +2.25 ADD)

Lens "HIGH" = "high" for spectacle near ADD lens (+2.50 ADD or greater)

Clariti Multifocal Toric (somofilcon A)

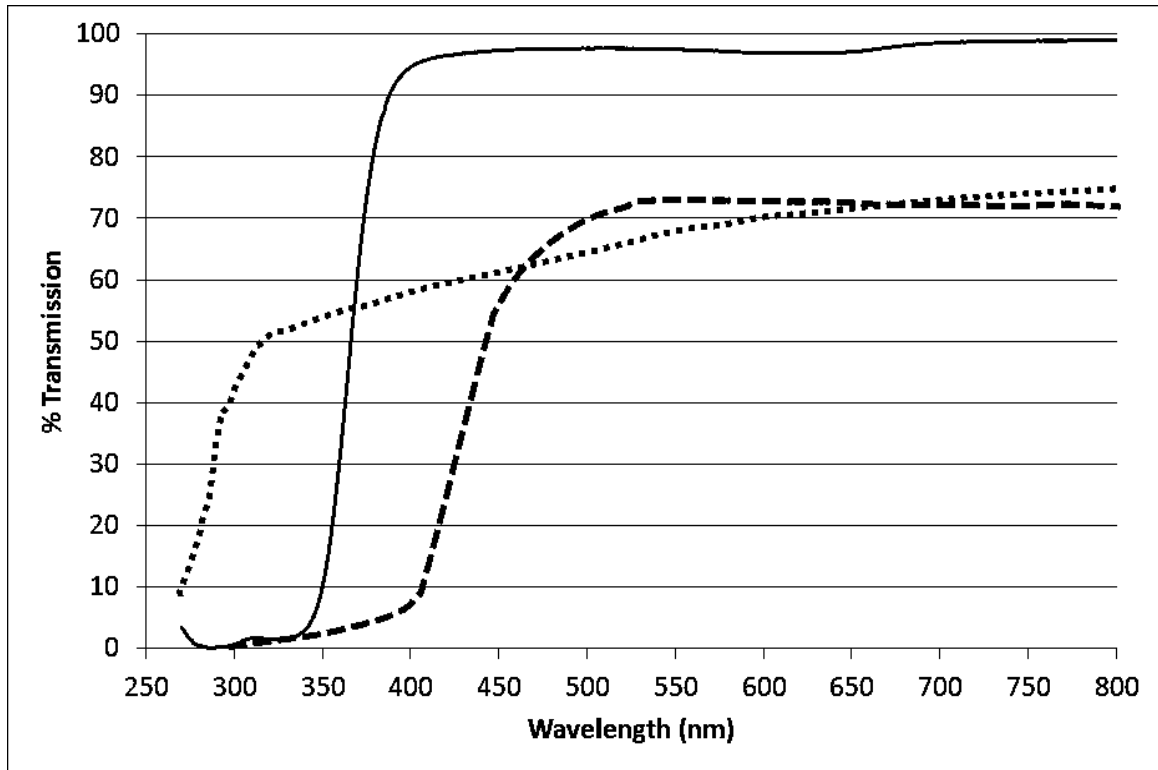
Parameters for these lenses are provided above with Clariti Toric and Multifocal lenses.

Call our Customer Service Department at (800) 341-2020 for current availability.




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TRANSMITTANCE CURVES

The transmittance curve below compares Clariti (somofilcon A) Soft (hydrophilic) Contact Lens with UV Blocker, a 24 yr. old human cornea and 25 yr. old human crystalline lens.



Key:

-  Clariti UV (Somofilcon A with UV blocker) soft contact lens with UV blocker. Curve shown is for a -6.00D lens with a center thickness of 0.070 mm, which represents the transmittance characteristics of the thinnest version of this UV-absorbing lens to be marketed.
-  24 year old human cornea *1
-  25 year old crystalline lens *2

1. Lerman, S., Radiant Energy and the eye, MacMillan, New York, 1980, p.58, fig 2-21
2. Waxler, M., Hitchins, V.M., Optical Radiation and Visual Health, CRC Press, Boca Raton, Florida, 1986, p.10, fig. 5

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WARNING:

UV- absorbing contact lenses are not substitutes for protective UV-absorbing eyewear such as UV absorbing goggles or sunglasses because they do not completely cover the eye and the surrounding area. You should continue to use absorbing eyewear as directed.

Note:

Long-term exposure to UV radiation is one of the risk factors associated with cataracts. Exposure is based on a number of factors such as environmental conditions (altitude, geography, cloud cover) and personal factors (extent and nature of outdoor activities). UV blocking contact lenses help provide protection against harmful UV radiation. However, clinical studies have not been done to demonstrate that wearing UV blocking contact lenses reduces the risk of developing cataracts or other eye disorders. Consult your Eye Care Practitioner for more information.

INDICATIONS (USES)

The **CLARITI ELITE** (somofilcon A) Soft (hydrophilic) Contact Lens with UV blocker is indicated for frequent replacement wear for the correction of refractive ametropia (myopia and hyperopia) in phakic or aphakic persons with non-diseased eyes that may exhibit astigmatism up to 2.00 Diopters that does not interfere with visual acuity.

The **CLARITI TORIC** (somofilcon A) Soft (hydrophilic) Contact Lens with UV blocker is indicated for frequent replacement wear for the optical correction of refractive ametropia (myopia and hyperopia) in phakic or aphakic persons with non-diseased eyes that may exhibit astigmatism up to 10.00 Diopters.

The **CLARITI MULTIFOCAL** (somofilcon A) Soft (hydrophilic) Contact Lens with UV blocker is indicated for frequent replacement wear for the optical correction of refractive ametropia (myopia and hyperopia) and/or presbyopia in phakic or aphakic persons with non-diseased eyes that may require a reading addition of +3.00 Diopters or less and may exhibit astigmatism up to 1.50 Diopters or less.

The lenses may be prescribed for daily wear with removal for cleaning and disinfection (chemical, not heat) prior to reinsertion as recommended by the Eye Care Professional.

Clariti (somofilcon A) Soft (hydrophilic) Contact lens with UV blocker help protect against transmission of harmful UV radiation to the cornea and into the eye.

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CONTRAINDICATIONS (REASONS NOT TO USE)

DO NOT USE your contact lenses when any of the following conditions exist:

- Acute and subacute inflammation or infection of the anterior chamber of the eye
- Any eye disease, injury, or abnormality that affects the cornea, conjunctiva, or eyelids
- Insufficiency of lacrimal secretion (dry eyes)
- Corneal hypoesthesia (reduced corneal sensitivity)
- Any systemic disease that may affect the eye or be exaggerated by wearing contact lenses
- Allergic reactions of ocular surfaces or adnexa that may be induced or exaggerated by wearing contact lenses or use of contact lens solutions
- Any active corneal infection (bacterial, fungal, protozoal, or viral)
- If the eyes become red or irritated

WARNINGS

You should be advised of the following warnings pertaining to contact lens wear:

- Problems with contact lenses or lens care products could result in serious injury to the eye. Proper use and care of your contact lenses and lens care products, including lens cases are essential for the safe use of these products.
- Eye problems, including a sore or lesion on the cornea (corneal ulcers) can develop rapidly and lead to loss of vision.
- The risk of an infected sore or lesion on the cornea (ulcerative keratitis) is greater for people who wear extended wear contact lenses than for those who wear daily wear lenses. Do not wear your lenses while sleeping as the risk of sore or lesion on the cornea (ulcerative keratitis) is greater than among those who do not wear them while sleeping.
- The risk of ulcerative keratitis among contact lens users who smoke is greater than among non-smokers.
- If you experience eye discomfort, excessive tearing, vision changes, or redness of the eye, you should immediately remove the lenses and promptly contact your Eye Care Practitioner. It is recommended that you see your Eye Care Practitioner routinely as directed.

Tap water, distilled water, or homemade saline solution should not be used to clean your contact lenses. The use of tap water or distilled water has been associated with Acanthamoeba keratitis, a corneal infection that is resistant to treatment and cure.

- **Water Activity** – Do not expose your contact lenses to water while you are wearing them.

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Water can harbor microorganisms that can lead to severe infection, vision loss or blindness. If your lenses have been submersed in water when swimming in pools, lakes or oceans, you should discard them and replace them with a new pair. Ask your eye care practitioner (professional) for recommendations about wearing your lenses during any activity involving water.

PRECAUTIONS

At your initial visit to your Eye Care Practitioner:

- Be sure you read and understand the full contents of this booklet and discuss it with your Eye Care Practitioner.
- Give your Eye Care Practitioner a complete history of your eye health, including any eye injuries, diseases, conditions or other problems you have had with your eyes, even if they seem unimportant to you.
- Tell your Eye Care Practitioner about your general health, any medicines you are taking, current treatment by a physician, any disease you had or now have and any prior surgery.
- Before leaving the Eye Care Practitioner's office, you should be able to promptly remove lenses or should have someone else available who can remove the lenses.

Lens Handling Precautions:

- **Always wash and rinse your hands before handling lenses.** Do not get cosmetics, lotions, soaps, creams, deodorants or sprays in your eyes or on the lenses. It is best to put on lenses before putting on makeup. Water-base cosmetics are less likely to cause damage lenses than oil base products.
- **Do not** touch contact lenses with your fingers or hands if your hands are not free of foreign materials, as microscopic scratches of the lenses may occur, causing distorted vision and/or injury to the eye.
- **Do not** touch the lens with your fingernails.
- **Carefully** follow the handling, insertion, removal and wearing instructions in this booklet and those prescribed by your Eye Care Practitioner.
- **Always** handle lenses gently and avoid dropping them.
- **Never** use tweezers or other tools to remove lenses from the lens container unless specifically indicated for that use. Pour the lens into your hand when removing from lens blister

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Lens Wearing Precautions:

- You should remove your lenses immediately if your eyes become red or irritated.
- **Never** wear lenses beyond the period recommended by your Eye Care Practitioner.
- **Always** discard lenses worn as prescribed by your Eye Care Practitioner.
- If aerosol products such as hair spray are used while wearing lenses, exercise caution and keep **your eyes closed** until the spray has settled.
- **Avoid** all harmful or irritating vapors and fumes while wearing lenses.
- **Ask** your Eye Care Practitioner about wearing lenses during sporting activities, especially swimming and other water sports. Exposing contact lenses to water during swimming or while in a hot tub may increase the risk of eye infection from microorganisms.
- **Avoid** rubbing your eyes with the lenses on, this can irritate your eye or dislodge the lens.
- **Keep** your eyes closed tightly when washing or showering to keep water and soaps out of your eyes, these may cause loss of the senses, contamination or injury to your eyes.
- **Always** contact your Eye Care Practitioner before using any medicine in the eyes.
- **Ask** your Eye Care Practitioner whether there are any other wearing restrictions that apply to you.

Follow-up visits to your Eye Care Practitioner:

- As with any contact lens, follow-up visits are necessary to assure the continuing health of your eyes. Be sure to keep your follow-up appointments.
- When you return for follow-up visits, be sure to tell your Eye Care Practitioner if your eyes have felt dry, irritated or anything other than completely comfortable while wearing your contact lenses.
- If there is any question in your mind about your wearing schedule and restrictions, cleaning lens handling procedures, lens replacement program, the condition of your lenses, your follow-up visit schedule, or anything else about contact lens wear, be sure to discuss the subject with your Eye Care Practitioner, who is there to help you and see you use your contact lenses safely and properly.
- If your eye care practitioner puts a dye or drops in your eyes during the examination, ask when you may be reinsert the lenses. The use of most dyes or drops will require a waiting period before the lenses may be reinserted.

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Who should know that you are wearing Contact Lenses?

- Inform your doctor (health care professional) about being a contact lens wearer.
- Always inform your employer of being a contact lens wearer. Some jobs may require use of eye protection equipment or may require that the patient not wear contact lenses.

ADVERSE EFFECTS

Be aware that the following problems may occur when wearing contact lenses:

- Your eyes may sting, burn and/or itch (irritation).
- There may be less comfort than when the lens was first placed on your eye.
- There may be an abnormal feeling of something in the eye (foreign body, scratched area).
- There may be potential for some temporary impairment due to peripheral infiltrates, peripheral corneal ulcers and corneal erosion. There may be potential for other physiological observations, such as local or generalized edema, corneal neovascularisation, corneal staining, injection, tarsal abnormalities, iritis and conjunctivitis, some of which are clinically acceptable in low amounts.
- There may be excessive watering (tearing), unusual secretions or redness of your eyes.
- There may be poor visual acuity, blurred vision, rainbows, or halos around objects, sensitivity to light (photophobia) or dry eyes may also occur if your lenses are worn continuously or for too long a time.

If you notice any of the above symptoms:

- **Immediately remove the lenses.**
- If the discomfort or problem stops, look closely at the lens.
- If the lens is in any way damaged, do not put the lens back on your eye. You should discard the lens and insert a new fresh lens on your eye.
- If your lens has dirt, an eyelash, or foreign body on it, or the problem stops and the lens appears undamaged, you should thoroughly clean, rinse and disinfect the lenses; then reinsert them.
- If the problem continues, remove the lenses and immediately consult your eye care professional.

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- When any of the above symptoms occur, a serious condition such as infection, corneal ulcer, neovascularisation or iritis may be present. **Seek immediate** professional identification of the problem and prompt treatment to avoid serious eye damage.

FITTING

Conventional methods of fitting contact lenses apply. For a detailed description of the fitting techniques, refer to the Patient Information and Fitting Guide, copies of which are available from:

CooperVision
Attn: Product Services
711 North Road
Scottsville, New York 14546
(800) 341-2020
www.coopervision.com

WEARING AND APPOINTMENT SCHEDULE

Your Eye Care Practitioner should prescribe the lenses for daily wear frequent replacement. Your Eye Care Practitioner will determine your wearing schedule.

The maximum suggested daily wearing time for the lenses is:

Day	Hours
1	(4)
2	(5)
3	(6)
4	(7)
5	(8)
6	(9)
7	(10)
8	(11)
9	(12)
10 and after	– all waking hours

Follow-up examinations are necessary to ensure continued successful contact lens wear and to ascertain the effects of the lenses on the eyes. The following appointment schedule is a suggested guideline:

- 24 hours post-dispensing
- 7 days
- 1 month
- 3 months

Every 6 months thereafter

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LENS CARE DIRECTIONS

1. Basic Lens Care Instructions

Eye Care Practitioners should review lens care directions with you, including basic lens care information and specific instructions on the lens care regimen to be followed.

It is essential that you learn and use good hygienic methods in the care and handling of your new lenses. Cleanliness is the first and most important aspect of proper contact lens care. In particular, your hands should be clean and free of any foreign substances when you handle your lenses. The procedures are:

- Always, wash, rinse and dry your hands before handling contact lenses.
- Always use fresh, unexpired lens care solutions. Never re-use solution.
- Use the recommended system of lens care either chemical (not heat) or oxidation (hydrogen peroxide) and carefully follow instructions on solution labelling.
- Different solutions cannot always be used together, and not all solutions are safe to use with all lenses. Do not alternate or mix lens care systems unless indicated on solution labelling.
- Do not use saliva or anything other than the recommended solutions for lubricating or rewetting lenses. Do not put lenses in your mouth.
- Lenses should be cleaned, rinsed and disinfected each time they are removed. Cleaning and rinsing are always necessary to remove mucus and film from the lens surface. Disinfecting is necessary to destroy harmful microorganisms.
- Always remove, clean, rinse and disinfect lenses according to the schedule prescribed by the Eye Care Practitioner. The use of an enzyme or any cleaning solution does not substitute for disinfecting your lenses.
- Never rinse your lenses in water from the tap. There are two reasons for this:
 - a. Tap water may contain impurities that can contaminate or damage your lenses and may lead to eye infection or injury.
 - b. You might lose your lens down the drain.

2. Lens Case Cleaning and Maintenance

Contact lens cases can be a source of bacterial growth. Lens cases should be emptied, cleaned and rinsed with solutions recommended by the lens case manufacturer, and allowed to air dry. Lens cases should be replaced at regular intervals as recommended by the lens case manufacturer or your Eye Care Practitioner.

3. Care For a Sticking (Non-Moving) Lens

If the lens stops moving or cannot be removed, you should be instructed to apply a few drops of the recommended lubricating solution directly to your eye and wait until the lens begins to move freely on your eye before removing it. If non-movement of the lens continues, you should immediately consult your Eye Care Practitioner.

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4. Care for a Dehydrated Lens

If your lens is off your eye and exposed to air, it will become dry and brittle. To rewet the lens:

Place the lens in the storage case and soak the lens in the recommended rinsing and storage solution for at least one hour or until the lens again feels soft and pliable.

Clean, rinse and disinfect the rewetted lens using the lens care system recommended by your Eye Care Practitioner.

If after soaking, the lens does not become soft or the surface remains dry, do not place the lens in your eye. Contact your Eye Care Practitioner.

5. Emergencies

If chemicals of any kind (household products, gardening solutions, laboratory chemicals, etc.) are splashed into your eyes, you should: **FLUSH EYES IMMEDIATELY WITH TAP WATER AND THEN REMOVE LENSES PROMPTLY. CONTACT YOUR EYECARE PRACTITIONER OR VISIT A HOSPITAL EMERGENCY ROOM WITHOUT DELAY.**

HOW SUPPLIED:

Each lens is supplied sterile in a blister pack containing isotonic saline solution with 0.005% w/v poloxamer 407 added. The blister pack is labelled with the base curve, diopter for spherical lenses or toric power, cylinder axis for toric lenses, multifocal add for multifocal lenses, diameter, lot number, UV blocker and expiration date of the product.

Do not use if blister pack has been broken or damaged.

REPORTING OF ADVERSE REACTIONS:

All serious adverse experiences and adverse reactions observed in patients should be reported to:

CooperVision
Attn: Product Services
711 North Road
Scottsville, New York 14546
(800) 341-2020
www.coopervision.com

CAUTION: Federal law (USA) restricts this device to sale by or on the order of a licensed Eye Care professional.