



**ISO 11979-7**

**Ophthalmic implants — Intraocular lenses —**

Part 7:  
**Clinical investigations of intraocular lenses for the correction of aphakia**

*Implants ophtalmiques — Lentilles intraoculaires —*

*Partie 7: Investigations cliniques de lentilles intraoculaires pour la correction de l'aphakie*

**Fifth edition  
2024-01**

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Published in Switzerland

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This document was prepared by Technical Committee ISO/TC 172, *Optics and photonics*, Subcommittee SC 7, *Ophthalmic optics and instruments*, in collaboration with the European Committee for Standardization (CEN) Technical Committee CEN/TC 170, *Ophthalmic optics*, in accordance with the Agreement on technical cooperation between ISO and CEN (Vienna Agreement)

This fifth edition cancels and replaces the fourth edition (ISO 11979-7:2018), which has been technically revised. The changes related herein for updating the document to the fifth edition apply to devices that will enter the marketplace after the date of publication of the fifth edition and are not designed or meant to limit any devices currently approved and marketed, nor those devices in the process of approval.

The main changes are as follows:

- development of definitions of non-accommodative posterior chamber “Simultaneous Vision Range” (SVIOL) lenses that include the subtypes of MIOL (Multifocal), EDF (Extended Depth of Focus) and FVR (Full Visual Range) IOLs, and defining each of these IOL types to allow differentiation among the lens types based on clinical and safety performance measures;
- establishment of guidelines for clinical testing of newly defined IOL types as listed above as well as related novel lens types, with alignment of testing methodologies among the lens types;
- ISO 11979-1, ISO 11979-2, ISO 11979-4 and ISO/TR 22979 are under revision and, when published, will be aligned with this edition of ISO 11979-7.

A list of all parts in the ISO 11979 series can be found on the ISO website.

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Intraocular lenses (IOLs) are used to correct residual refractive errors in subjects who have aphakia. Such residual refractive errors typically include sphere and astigmatism but may also correct for a lack of accommodation. Different designs of IOLs can be used to correct for specific refractive errors. In the case where an IOL is designed to provide more than one type of refractive correction, that IOL will have to satisfy each of the separate requirements of those correction designs.

This document provides requirements and recommendations for intraocular lens investigations of new IOL models. In the case where an IOL model is a modification of a parent IOL model, a risk analysis can be used in order to determine the appropriate level of testing.