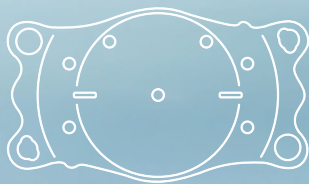


UNIQA

Ziemer Phakic Lens



Predictability via System



Swiss Made

ziemer 
OPHTHALMOLOGY



A New Era in Phakic Lenses



The UNIQA Swiss Made
phakic lens platform
designed for predictability
via system.

Introducing UNIQA

The New Ziemer Phakic Lens



Powered by Ziemer DNA

For over 25 years, Ziemer has been a trusted partner in ophthalmology, working alongside you to help provide patients with clear vision through advanced, high-end solutions rooted in innovation, precision engineering, and consistent quality. Today, we carry this legacy forward with a new milestone.



Less variability, more predictability*

With a 100% Swiss Made UNIQA, we extend our refractive product portfolio and provide an integrated solution for phakic IOL surgery, from preoperative planning through to postoperative outcomes. The UNIQA system is designed to improve vault predictability and long-term outcome consistency, so you can perform surgery with absolute confidence at every step.

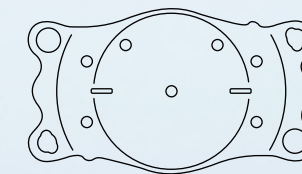
What makes UNIQA special?

- System-based approach to phakic IOL surgery
- Swiss Made excellence
- Granular sizing for fine-tuned fitting
- Advanced design for optimized positioning and flow

*In this document, "variability" refers to sources of variability throughout the surgical process that the UNIQA aims to minimize, and "predictability" refers to the predictability of postoperative vaulting that the UNIQA is designed to support.



Innovation is in Our DNA



The new Ziemer Phakic Lens is testament to this. Be a part of the innovators' journey.



Swiss Made

A Modern Solution To a Classic Challenge

One of the key challenges in phakic IOL surgery is anatomical mismatch. When lens sizing is based on “average-eye” assumptions, the risk of variability increases. UNIQA is engineered to support the management of key variables across the phakic IOL workflow by supporting a structured planning approach and consistent execution, while fully preserving your clinical judgment and autonomy.

Every Eye Is Different

UNIQA is engineered to reduce unnecessary variability across the phakic IOL workflow

Clinical Focus: Consistency Over Surprises

UNIQA supports surgeons in minimizing outliers and improving vault predictability.¹



Manufacturing Excellence

Swiss Made Precision

Produced in our Swiss cleanrooms using Ziemer's proprietary diamond-turning technology, UNIQA embodies the precision heritage of Swiss watchmaking. Every lens reflects Swiss standards of accuracy, stability, and quality.

Swiss Manufacturing Principles

- High precision and consistency, batch after batch
- Robust process control and full traceability
- Rigorous testing and quality assurance

Swiss Made: Mark of Excellence

Swiss manufacturing principle ensures consistently high production standards and rigorous quality control, to minimize variability in lens quality and provide you great peace of mind for every procedure.



Swiss Made

ziemer 

Sizing Granularity

That Reduces Compromise

Eyes differ significantly. UNIQA is available in diameters ranging from 11.00 mm to 14.00 mm, with precise 250 µm sizing increments. Fine sizing options are designed to improve anatomical match and help avoid compromise, particularly in borderline cases.



Range of Sizes:
11 mm – 14 mm

Practical Benefits for Surgeons

- Clearer sizing decisions
- Greater confidence in vault behaviour¹
- Ability to fine tune fit within approved indications

Precision Sizing: Confident & Uncompromised Fit

UNIQA offers one of the largest phakic IOL size ranges on the market, enabling customized lenses tailored to each of your patient's individual anatomy, bringing refractive surgery one step closer to consistent, predictable excellence.

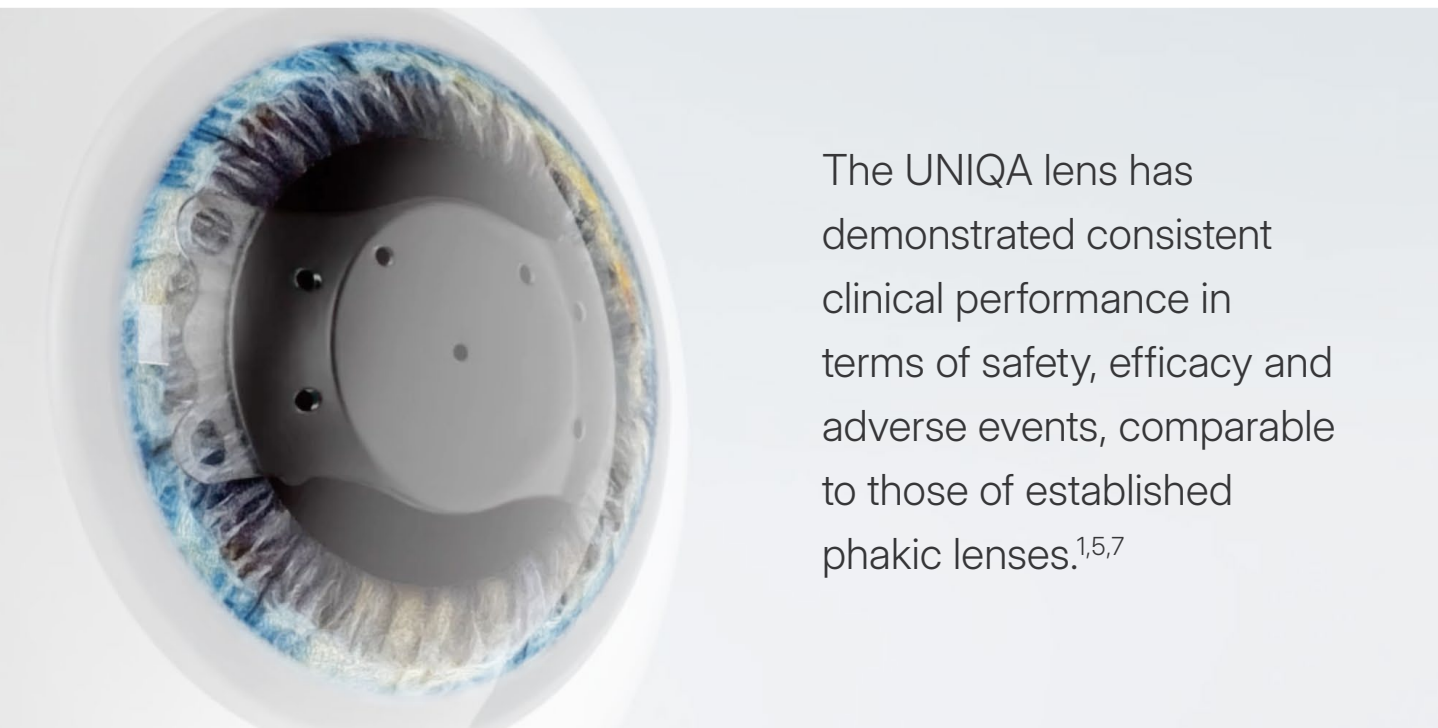


More **Sizes**
Precision
Confidence

Design Features

Built For Controlled Positioning and Flow

The modern UNIQA lens design forms another key pillar of the system, engineered to support safety, vault predictability, and stability.

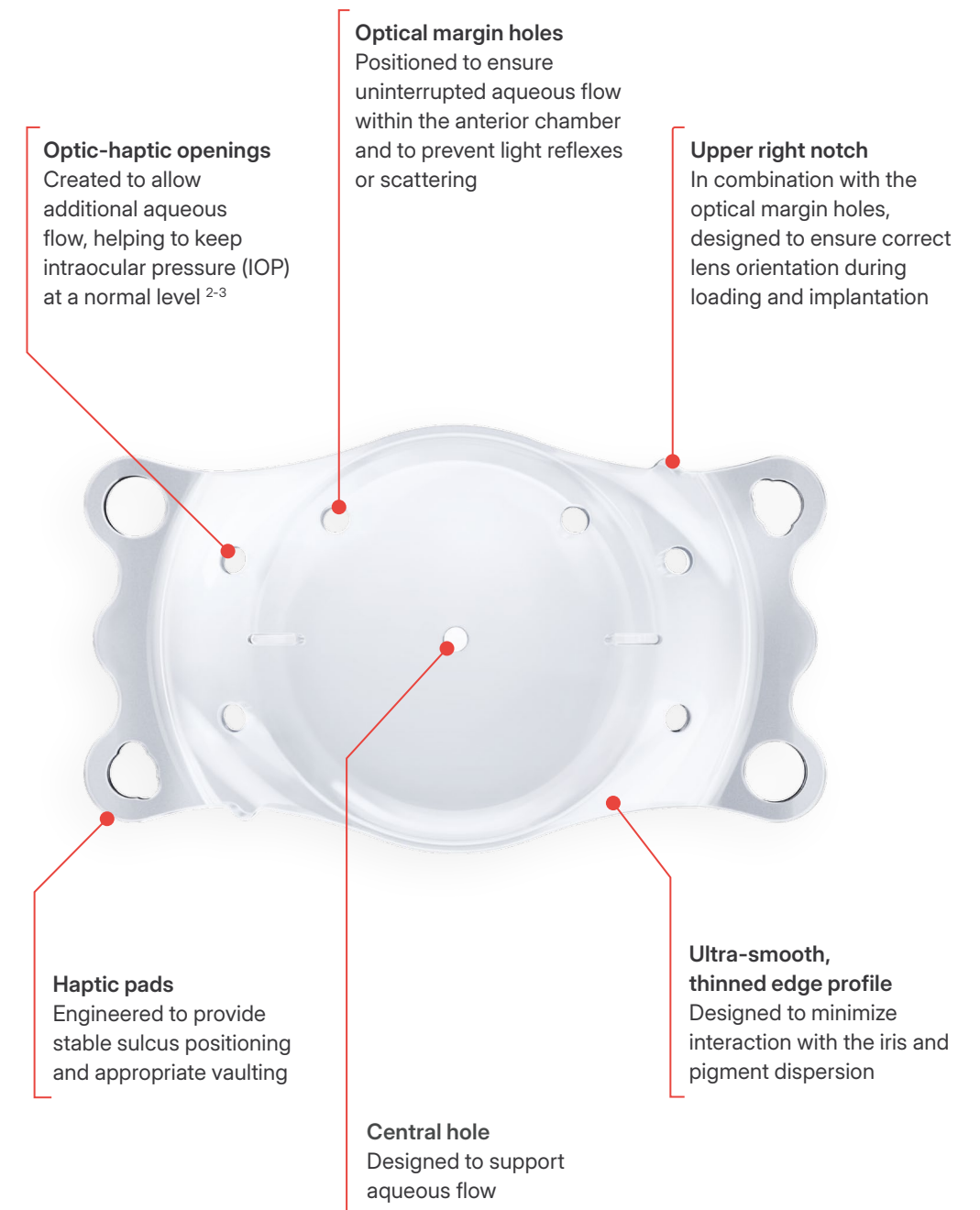


Precision by Design

UNIQA lens features are designed for controlled aqueous flow, stable positioning, and predictable vaulting, helping you operate with confidence at every implantation.

UNIQA

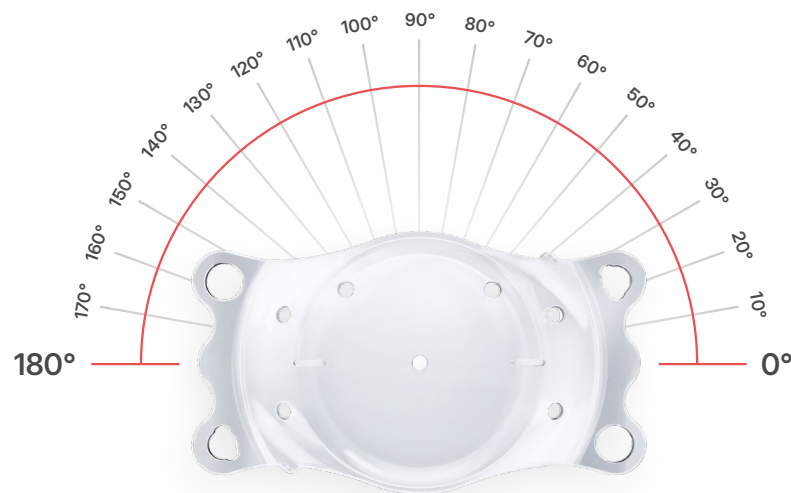
Zieler Phakic Lens



Smart Toric Precision Without the Complexity

The cylinder of each toric UNIQA is individually positioned so that the lens is always aligned horizontally.

Each toric UNIQA is individually manufactured with the cylinder precisely aligned to the patient's axis of astigmatism, enabling horizontal implantation at the 0-180° axis. The toric design does not require intraoperative lens rotation or additional axis alignment during implantation, intended to minimize the risk of alignment errors and to deliver reliable astigmatism correction with surgeon confidence and patient comfort.



Individually Manufactured Cylinder: Improved Comfort

UNIQA Toric is designed to simplify toric implantation through a fixed 0-180° orientation, avoiding the need for intraoperative alignment and rotation, and supporting consistent refractive outcomes – so you have one less thing to worry about.

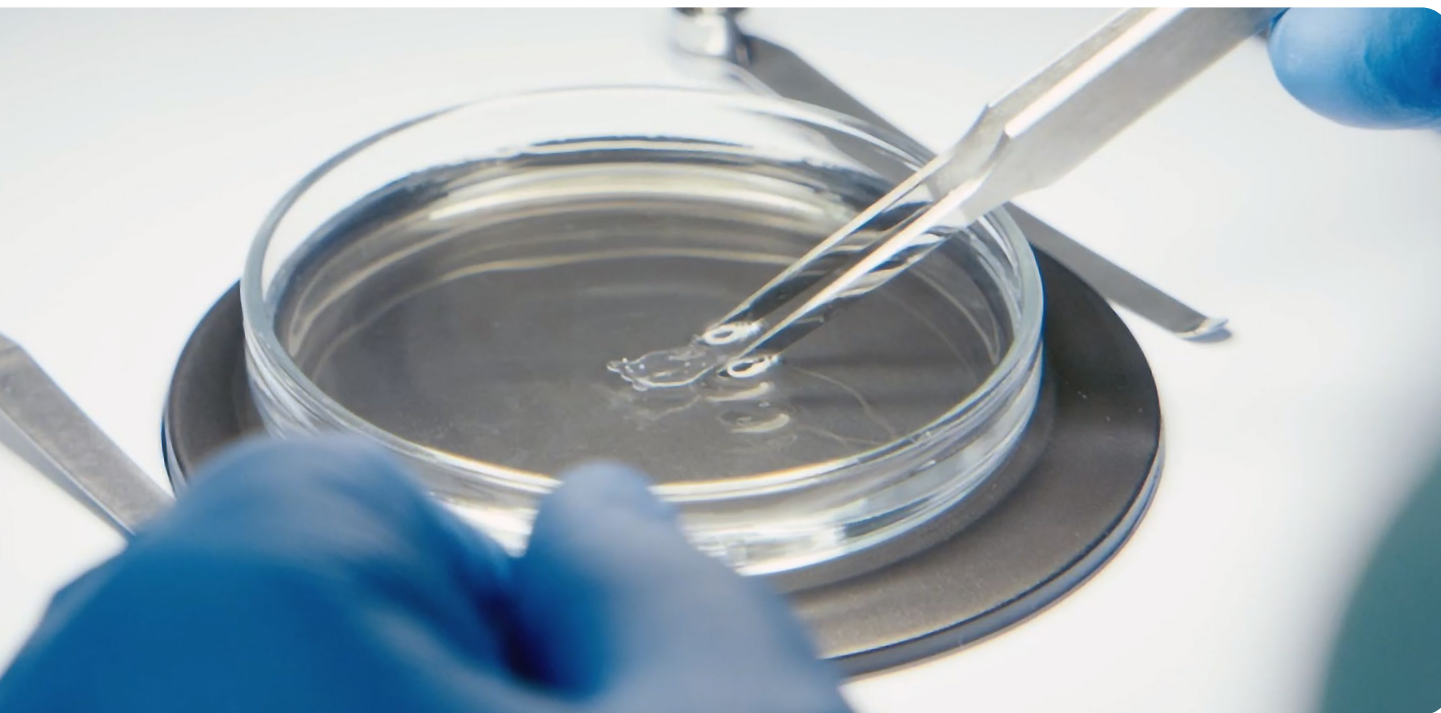


Win Time,
Elevate Care

Clinical Outcomes

Supporting Predictability

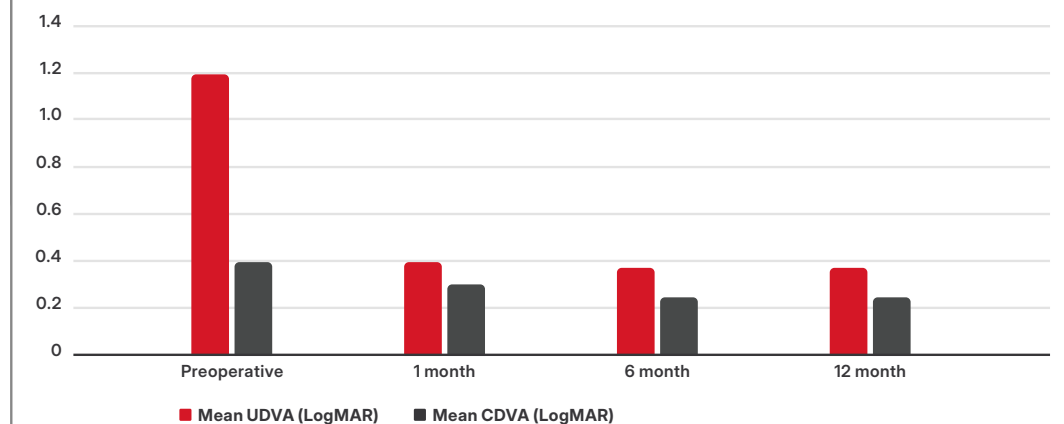
UNIQA is designed to reduce variability across individual cases, supporting consistent refractive and visual outcomes.



Consistent Refractive Results and Visual Independence

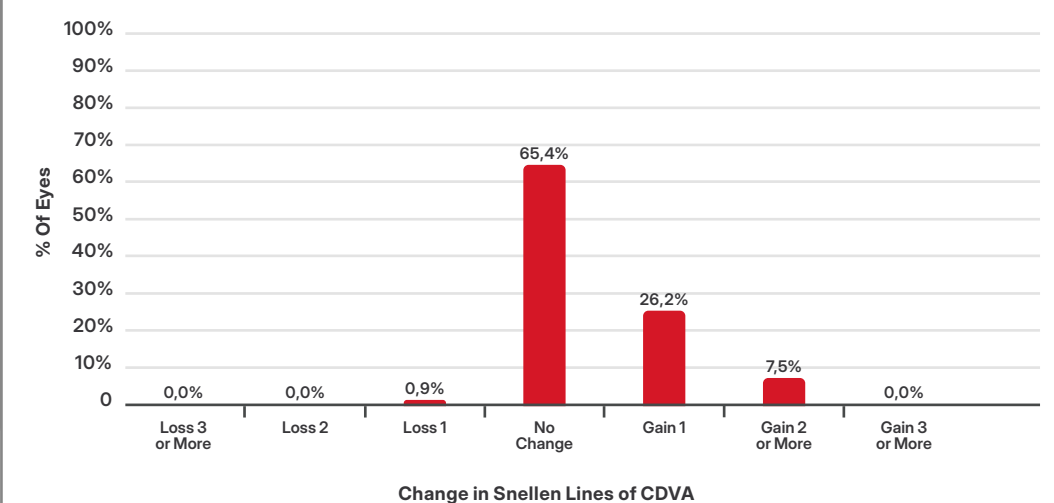
Clinical studies have demonstrated excellent and stable postoperative refractive outcomes and the achievement of visual independence in patients.

Efficacy



Post-op UDVA closely matched pre-op CDVA, with a mean efficacy index of 1.1 at 12 months postoperative.⁴

Safety



Demonstrated favorable safety outcomes, with the majority of eyes maintaining or gaining lines of CDVA when compared to preoperative values.⁵

Has shown **excellent refractive predictability with 94% of eyes** achieving a spherical equivalent within $\pm 0.50D$ at 12 months postoperative.⁶

Reinforcing Confidence In Long-Term Safety

Multiple studies confirm an excellent safety profile with low rates of adverse events such as endothelial cell loss (ECL), anterior subcapsular cataract (ASC), pupillary block and minimal risk of intraocular pressure (IOP) elevation.^{3,6,7}

	Baseline Mean ± SD; (range)	Six months post-op Mean ± SD; (range)	P-value*
Endothelial CD (cell/mm²)	2625.52 ±246.18; (1870-3115)	2549.09 ±248.89; (1850-3102)	0.03
CCT (µm)	503.52 ±32.74; (400-576)	498.97 ±34.79; (397-595)	0.35

Table 1: The mean values from endothelial cell density (ECD) and central corneal thickness (CCT), presented and compared at 6 months post-op, showed corneal health remained stable, with minimal endothelial cell loss impact and no change in corneal thickness.³

	Baseline	One day post-op	6 months post-op	P-value*
IOP (mm Hg)	13.72 ±1.4; (11-16)	13.88 ±1.2; (11-16)	13.62 ±1.3; (12-16)	0.37

Table 2: The IOP values remain similar at baseline and 1 day and 6 months after surgery, there was no statistical significance difference between baseline, 1 day and 6 months after surgery (P=0.37).³

	3 months post-op	6 months post-op	P-value**
Vault (µm)	541.15 ±117.12; (305-890)	541.71 ±117.67; (305-890)	0.97

Table 3: Vault remained optimal and stable at 6 months post-op (P=0.97).³

Long-term Safety You Can Trust

UNIQA lenses, together with preoperative planning, standardized workflows, and clinical governance practices, are intended to support a consistent safety profile over time.

* p = 6 months post-operative vs preoperative baseline
** p = 6 months post-op vs 3 months post-op



We Have It All

The Complete Refractive Ecosystem

With UNIQA, Ziemer has become the company in ophthalmology that truly covers the full refractive spectrum. Partnering with Ziemer gives clinics a unique opportunity to differentiate themselves in a competitive market, by offering cutting edge technologies and next generation procedures that today's patients demand.

If you already use a Ziemer laser, our strong R&D commitment means your workflow will only get better. With the future integration of a femtosecond laser to support pIOL procedures, we aim to bring you even greater ease, precision, and efficiency.

Ziemer's Refractive Applications & FlowSuite



Join Ziemer's complete refractive ecosystem and lead the market with innovation.

Built to Support Your Success

New to Refractive Surgery?

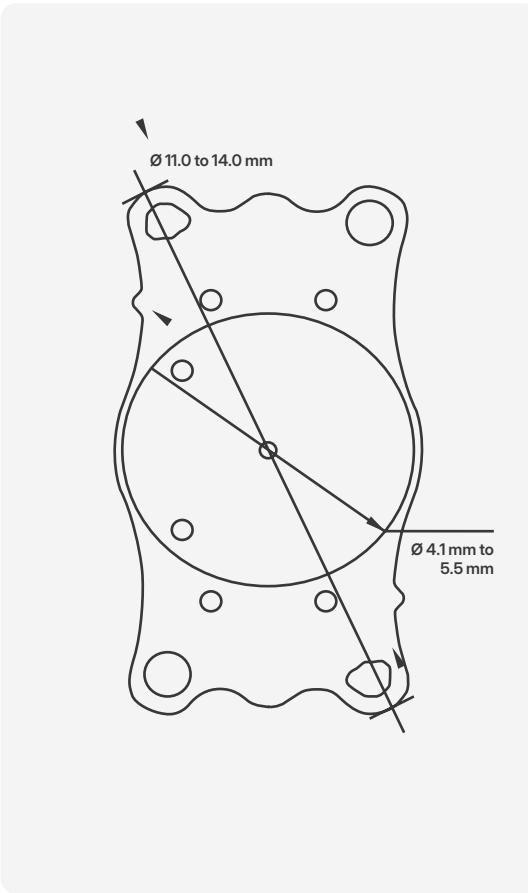
Phakic IOLs represent one of the fastest-growing segments in refractive vision correction.⁸ UNIQA integrates seamlessly into surgical workflows and does not require large capital investment to begin with.

Ziemer provides comprehensive training, mentoring, and clinical support to ease your transition and empower your refractive practice. With a clinically proven concept perfected through Swiss manufacturing, you can unlock your full potential.



UNIQA AT-A-GLANCE

UNIQA combines a single-piece, hydrophilic lens design with a broad diopter range and a foldable profile for small-incision implantation. Designed with a clear central optical zone and UV-absorbing material, UNIQA offers a versatile solution for phakic lens correction.



Models	Spherical and Toric
Material	Hybrid Hydrophilic Acrylic
Lens Diameters	11.0 mm to 14.0 mm (in 0.25 mm steps)
Optical Zone Diameter	4.1 mm to 5.5 mm
Diopter Range	-0.5D to -30.0D (in 0.5D steps) +0.5D to +3.5D (in 0.5D steps)
Cylinder Range	+1.0D to 10.0D (in 0.5D increments)
Central Feature	Central hole designed for aqueous flow

We Deliver Vision to the World

Contact us today and
learn more about UNIQA.



ziemergroup.com/uniqa



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References: **1** Chingan, A et al. Comparison of clinical outcomes and vault between two types of posterior phakic intraocular lenses in correction of myopia and myopic astigmatism. Eur J Ophthalmol 2025; 35(5): 1585-1592 **2** Bianchi, GR et al. Implantable phakic contact lens: vault evaluation 5 years postoperatively. J Cataract Refract Surg 2024; 50: 1000-1005 **3** Bianchi, GR et al. Initial Results From a New Model of Posterior Chamber Implantable Phakic Contact Lens: IPCL V2.0. Med Hypothesis Discov Innov Ophthalmol 2019; 8(2): 57-63 **4** Gad Elkareem, AM et al. Visual and safety outcomes of a new implantable phakic contact lens in patients with a high degree of myopia. Delta Journal of Ophthalmology 2021; 22: 192-200 **5** Taneri, S et al. Initial clinical outcomes of two different phakic posterior chamber IOLs for the correction of myopia and myopic astigmatism. Graefes Arch Clin Exp Ophthalmol 2022; 260: 1763-1772 **6** Yu NH, Kang KH, Tchah H, Koh K. A comparative study of two phakic posterior chamber implantable lenses. Medicine 2024; 103:20(e38194). **7** Amer I, Ziada HA, Elgazzar AF, Abdella WS, Abdelgabar AA, Goda I, Amer RS, Abdel-Rahman Osman HO, Mohamed SA, Mansour MN, Alsadawy Hassan M, El Gabbar AGA, Hamed MA. Safety and efficacy of implantable phakic contact lens versus implantable collamer lens in myopia correction. Med Hypothesis Discov Innov Ophthalmol. 2023 Winter; 12(4): 160-167. **8** Market Scope. (2025). 2025 refractive survey market report: Global analysis for 2024 to 2030. Market Scope.

Clinical evidence includes published data on posterior chamber phakic IOL platforms and internal technical documentation, in line with applicable regulatory requirements. For indications, contraindications, warnings and precautions, refer to the IFU applicable in your country. Planning support may be provided via digital tools and/or specialist planning support, depending on market availability.

Availability may vary by country due to regulatory requirements. Please contact Ziemer for details.
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