Stellest®

Prescribing Essilor® Stellest® lenses

essilor

IDENTIFICATION OF MYOPIA RISK FACTORS

Myopia risk factor categorization is utilized under license from Myopia Profile Pty Ltd

	LOW RISK	MEDIUM RISK	HIGH RISK
Current age of child[1-4]	16 years or older	10 to 16 years	9 years old or younger
Family history of myopia[1,5]	No myopic parents	One myopic parent	Both parents myopic
Time spent outdoors[1,5-7]	2.5+ hours / day	1.5 to 2.5+ hours / day	0 to 1.5 hours / day
Time spent on near work (outside of school hours)[1,6,8]	0 to 2 hours / day	2 to 3 hours / day	3+ hours / day
Refractive error (for risk of myopia onset)[9]			<+0.75 at 6-7 years

ESSILOR® STELLEST® LENS

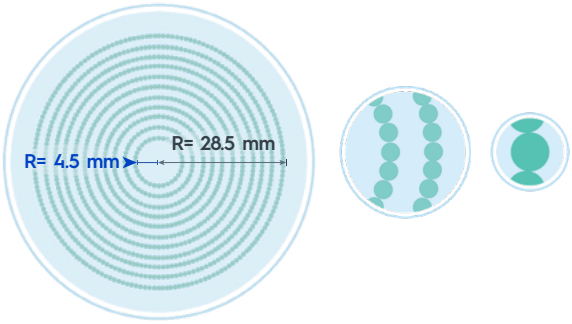
Essilor®'s latest generation of spectacle lenses, designed to control myopia progression and axial elongation while correcting refractive error in myopic children.

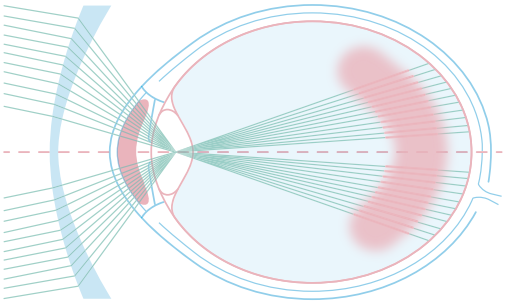
The Essilor® Stellest® lens comprises of a single vision zone and a myopia control zone made with Highly Aspherical Lenslet Target (H.A.L.T.) technology.

ESSILOR® STELLEST® LENSES MECHANISM OF ACTION

H.A.L.T. technology comprises of 1021 contiguous highly aspherical lenslets, arranged over 11 rings.

Light rays passing through the aspherical lenslets create a volume of non focused light in front of the retina and which follows the shape of a child's theoretical myopic retina.





LENSLET DISTRIBUTION & FEATURES

The Essilor® Stellest® lens comprises of a single vision zone and a myopia control zone made with H.A.L.T. technology.

The single vision zone ensures the correction of refractive error in all gaze directions.

The 1021 lenslets, which cover 40% of the lens front surface, provide a large myopia control zone that fits a large frame choice and offers the H.A.L.T. technology effect in all gaze directions from edge to edge of the lens.

THE ESSILOR® STELLEST® LENS CLINICAL TRIAL

- Prospective, randomized, double-masked 2-year clinical trial in Essilor®'s joint research lab with the Wenzhou Medical University in China
- 104 myopic children in single vision lenses (50) or Essilor® Stellest® lenses (54)

ESSILOR® STELLEST® LENS EFFICACY

YEAR 1 AND YEAR 2

Results demonstrate that there was a greater efficacy when Essilor® Stellest® lenses were worn more than 12 hrs/day, than when worn less than 12 hrs/day

AFTER THE FIRST AND SECOND YEAR

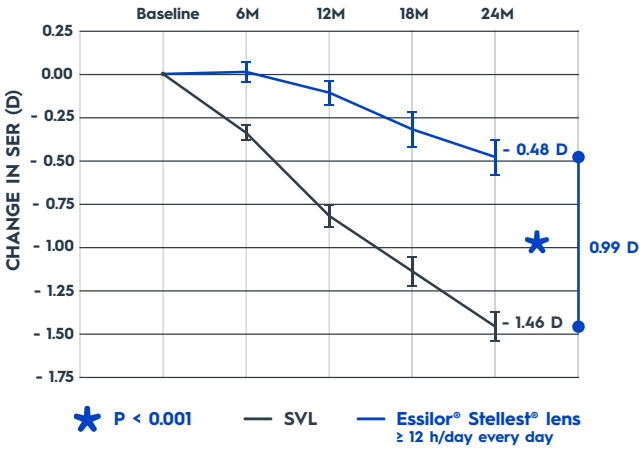
- The eye growth of **9 out of 10** children wearing Essilor® Stellest® lenses full time was similar or slower than non-myopic children.[10]

YEAR 2

ESSILOR® STELLEST® LENSES SLOW DOWN MYOPIA PROGRESSION BY 67% ON AVERAGE*[11]

Essilor® Stellest® lenses slowed down myopia progression by **0.80D (55%)** on average for all subjects[11]

Wearing Essilor® Stellest® lenses ≥12h/ day every day, increased efficacy to **0.99D (67%)***[11]

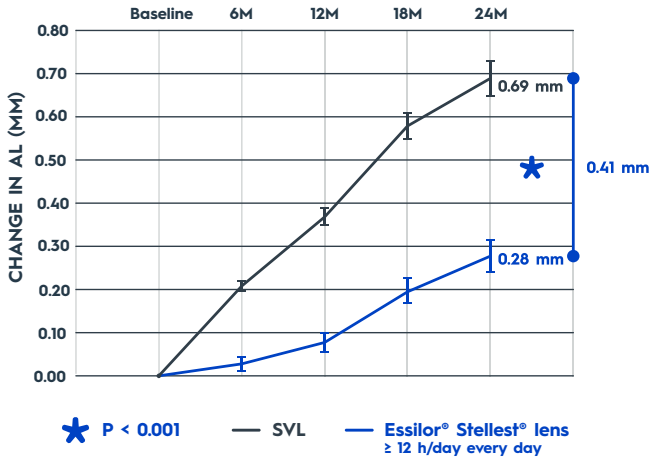


Change in unadjusted SER of OD. Error bars represent SEM.

ESSILOR® STELLEST® LENSES SLOW DOWN AXIAL ELONGATION BY 60% ON AVERAGE*[11]

Essilor® Stellest® lenses slowed down axial elongation by **0.35mm (51%)** on average for all subjects[11]

Wearing Essilor® Stellest® lenses ≥12h/ day every day, increased efficacy to **0.41mm (60%)***[11]



Change in unadjusted AL of OD. Error bars represent SEM.

YEAR 3 TO 5

- Essilor® Stellest® lenses remained effective in slowing myopia progression during the third[12], fourth and fifth year[13,14]
- Essilor® Stellest® lenses were effective in slowing myopia progression & axial elongation in older children (10-18 years old)[12,14]
- Over five years, Essilor® Stellest® lenses slowed myopia progression by 1.75D and axial elongation by 0.72mm on average for all subjects*[14]

VISUAL PERFORMANCE

All children wearing Essilor® Stellest® lenses had vision as clear as those children wearing single vision lenses.[15]

Essilor® Stellest® lenses offer clear vision at all viewing distances, including far vision and near vision.

RELATIONSHIP BETWEEN EFFICACY AND OTHER PARAMETERS

Efficacy results are not influenced by other parameters such as age, gender, initial myopia or axial length, myopic parents, lag of accommodation or near phoria.[15]

ADAPTATION TO THE ESSILOR® STELLEST® LENS

90% of children adapted within 3 days after first dispensing§[15]

100% of children adapted within 1 week after first dispensing§[15]

RECOMMENDED WEARING TIME

The more a child wears Essilor® Stellest® lenses the better the efficacy.[11] Hence, children should wear Essilor® Stellest® lenses during waking hours:

12hr at least per day, every day

ESSILOR® STELLEST® LENS RANGE AVAILABILITY

TECHNOLOGY	H.A.L.T.
SPHERE / CYLINDER POWER	SPH [0.00; -10.00]; CYL [0.00; +4.00]
EXTENDED RANGE¶	SPH [+2.00; -12.00]; CYL [0.00; -4.00] depending on sphere (SER must be ≤0 for sphere [0.00; +2.00])
PRISM	up to 2 Δ/lens
DIAMETER	ø65 MM, ø70 MM
COATING	Crizal® Rock™
MATERIAL	Airwear® 1.59
UV CUT OFF	100% UV Protection#

Essilor® Stellest® lenses are now available with sun tints, to continue to wear Essilor® Stellest® lenses for outdoor activities with UV protection, glare reduction and comfortable vision.¶

ESSILOR® STELLEST® LENS RECOMMENDATION

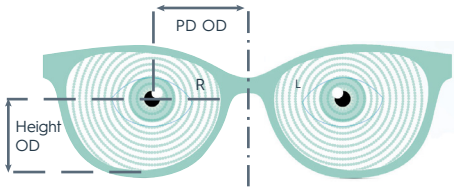
CENTRATION & FITTING

The position of the reference point is the centre of the rings of the lenslets. It is the point where the prescription is measured and controlled.

This marking (dot) is the reference point for the centering of the lens.

HORIZONTALLY
Monocular pupillary distances OD and OS

VERTICALLY
Monocular heights OD and OS



PRESCRIBING ESSILOR® STELLEST® LENSES

As soon as myopia progression has been detected in a child, Essilor® Stellest® lenses can be recommended. Early intervention would be beneficial.

The clinical trial enrolled children between 8 and 13 years old.[11] The age range of children benefiting from the Essilor® Stellest® lens in the randomized clinical trial and follow up studies was between 8 and 18 years after five years.[14]

VISIT 01
INTERVIEW
EXAMINATION
DIAGNOSTIC RECOMMENDATIONS

VISIT 02
DISPENSING
ADVISING

VISIT 03 +2 weeks
FIRST FOLLOW UP
& CHECK UP OF COMPLIANCE/
WEARING TIME

VISIT 04 +6 months
FOLLOW UP EVERY 6 MONTHS
& CHECK UP OF COMPLIANCE/
WEARING TIME

H.A.L.T, Highly Aspherical Lenslet Target

* Two-year prospective, controlled, randomized, double-masked clinical trial results on 54 myopic children wearing Essilor® Stellest® lenses compared to 50 myopic children wearing single vision lenses in Wenzhou China. Results based on 32 children from the Test Group wearing Essilor® Stellest® lenses at least 12 hours per day every day for two consecutive years

† Compared to combined single vision lens groups SVL(0M-24M)+SVL2(24M-36M)

‡ Compared to the 60-month progression of the extrapolated control group (predicted average annual decrease in SER by 9.7%, Smotherman C, et al. IOVS 2023;64:ARVO E-Abstract 811 and predicted average annual decrease in AL by 15%. Shamp W, et al. IOVS 2022;63:ARVO E-Abstract A0111)

§ One-year results from the two-year prospective, controlled, randomized, double-masked clinical trial results on 54 myopic children wearing Essilor® Stellest® lenses compared to 50 myopic children wearing single vision lenses.

¶ Subject to availability and launch timelines

\# By absorption. Additional UV back side reflection reduction when combined with Crizal® coating

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