

MYAH*

Build, Manage, and Grow Your
Myopia & Dry Eye Practice



Myopia greatly impacts the quality of life and personal development of children¹.

It has never been a better time to join the battle against the global myopia epidemic. The MYAH is the perfect instrument for eyecare professionals interested in building, managing, and growing a myopia service.

Overview of MYAH



Corneal Topography including keratoconus screening and pupillometry



Axial Length measurement by Optical Low Coherence Interferometry



Progression reports for analyzing treatment efficacy



Comprehensive suite of Dry Eye assessment tools



Patient-friendly with rapid capture



Compact, space-saving, easy to operate

Did you know that 50% of the world's population² may be myopic by 2050?

European regions are not an exception.

Region	2000	2010	2020	2030	2040	2050
Central Europe	20.5%	27.1%	34.6%	41.8%	48.9%	54.1%
Eastern Europe	18.0%	25.0%	32.2%	38.9%	45.9%	50.4%
Western Europe	21.9%	28.5%	36.7%	44.5%	51.0%	56.2%
Global	22.9%	28.3%	33.9%	39.9%	45.2%	49.8%

Building a myopia management practice requires you to educate your patients and their families about the implications of myopia progression, to manage the condition and to grow your service offering.

BUILD YOUR MYOPIA MANAGEMENT SERVICE:

The MYAH provides the initial baseline to monitor risk, allowing you to start the conversation early with parents.

MANAGE: TO TREAT OR NOT TO TREAT?

The MYAH provides essential information to assess the risk of myopia and for close monitoring of the effectiveness of any myopia interventions.

GROW YOUR MYOPIA MANAGEMENT SERVICE:

Offering axial length screening tests may complement your refraction tests.

The MYAH offers all the technologies required to support myopia management: optical biometry, corneal topography and pupillometry - it is a one-time investment. In addition, the MYAH is an all-in-one solution that offers an evolving platform which provides the tools to add or grow Dry Eye Management.





Monitor the progression of myopia and the effectiveness of intervention.

Percentile growth charts for axial length allow eye care practitioners to monitor eye growth, facilitating decision-making in the management of myopia. These charts, available for boys (left) and girls (right), are derived from a large population-based European study³. Practitioners can quickly identify whether axial length is moving up or down the percentiles at each visit, with the risk of myopia in adulthood clearly indicated. Growth charts may also be helpful in communicating myopia risk to parents.

The Rx and Axial Length charts help you track progression and monitor the effectiveness of intervention. The MYAH provides this data so that you can compare changes over time. The MYAH also uses the same proven technology as the Topcon Aladdin biometer, producing reproducible axial length results⁴.

Dynamic Pupillometry

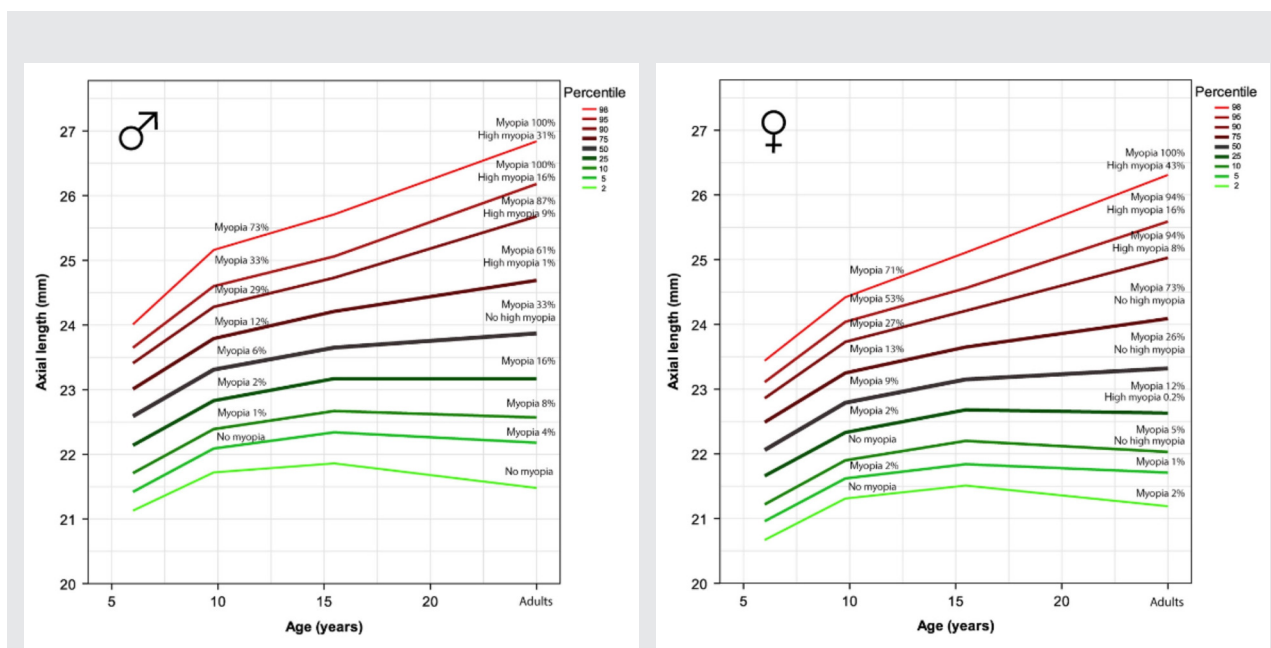
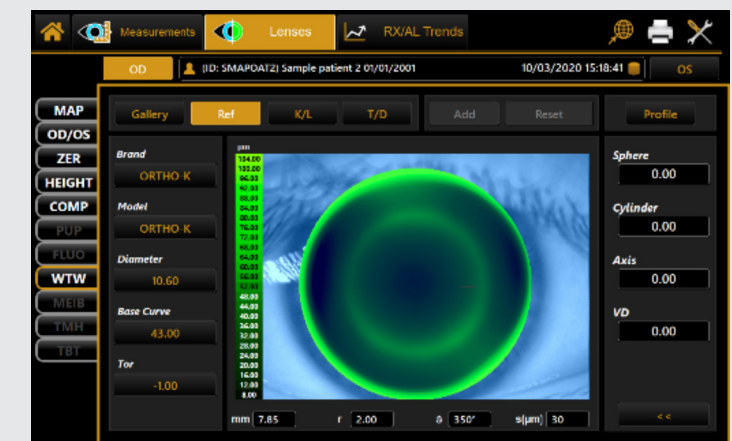
Provides clear information on the reaction time and size of the pupil, which may be useful to monitor low dose atropine compliance or to titrate the dose of atropine. The user can examine pupil centration and diameter over a range of light levels, which is useful for Ortho-K and multifocal lens fitting, and is also informative for pre and post-refractive surgery.



Contact Lens Fitting

The MYAH provides support for contact lens fitting, reducing the number of lenses that need to be trialed on the eye:

- Includes a database of conventional RGP and Ortho-K lenses.
- Export topography data to 3rd party calculators.
- Fluorescein simulation with ability to save and review data.



* percentile growth charts not available on the MYAH at time of publication of this brochure.

Dry Eye Assessment Tools

These tools offer non-invasive Tear Break-up Time (NIBUT), Meibomian gland imaging with the area of loss analysis, tear meniscus height analysis, blink analysis, real fluorescein imaging and video acquisition, and video review of anterior corneal aberrations between blinks.



Corneal Topography

The MYAH offers another range of tools to analyze the anterior cornea, including topographic maps, 3D maps, comparison maps, height maps, Zernike analysis and keratoconus screening.



Corneal Aberration Summary

The Zernike expansion coefficient is used to determine which component(s) dominate the aberration structure of the cornea and to what degree.

The anterior corneal Zernike summary consists of 36 polynomials up to the 7th order and provides a clear view of the optical irregularities that can impact the quality of vision.



MYAH makes your practice dynamic and smart.

This versatile instrument, with its intuitive and user-friendly interface, integrates easily into your workflow and offers different options for exporting the results.

4 EASY STEPS



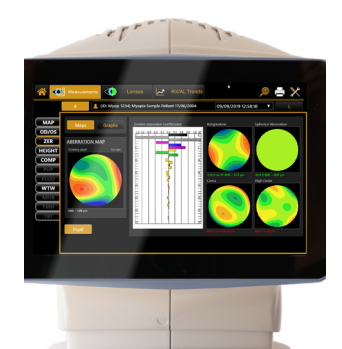
Select patient* and acquisition mode.



Align patient and adjust automated chinrest.



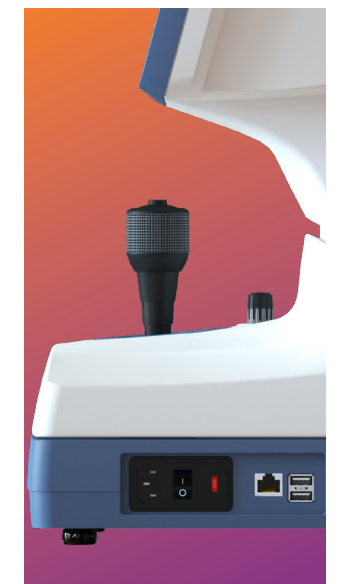
Follow alignment guides to focus and trigger to start.



Review results and print/export reports to network or USB.

* Create new patient, select existing patient or select patient from DICOM (search/worklist).

Small footprint. Fits anywhere in your practice.



MYAH SPECIFICATION

FEATURE	SPECIFICATION
Keratoscopic cone	24 rings equally distributed on a 43 D sphere
Analyzed points	Over 100.000
Measured points	Over 6.000
Corneal coverage	Up to 9.8 mm on a sphere of radius 8,00 mm (42.2 diopters with n=1,3375)
Diopter power range	28.00 – 67.50 D
Display Resolution	0.01 D, 0,01mm
Axial Biometry	Low-coherence interferometry on optical fiber (SLED @ 820 nm)
Capture system	Guided-focus
Monitor	LCD 10,1 inch capacitive touch screen
Database	Internal
Pupillometry	Dynamic, Photopic, Mesopic, Scotopic
Fluorescein	Image, Video
Reports	Corneal map, Comparison map, Contact lens, Height map, Zernike analysis, Pupillometry, Meibomian glands, Tear Film Break-up Time, Tear Meniscus Height, Rx/AL Trend analysis, Fluorescein report
Working environment	10 °C – 40 °C, Relative humidity 8 – 75% (no condensing), Atmospheric pressure 800 – 1060 hPa
Power supply	AC 100 – 240 V 50/60 Hz
Power consumption	100 VA
Dimensions	320 mm (W) x 490 mm (H) x 470 mm (L), 18 Kg
Printing options	USB printer, Network printer, PDF on network shared folder, PDF on USB PDF or Image on network folder or on USB
Operating System	Windows 10 64-bit
RAM	4 GB
Hard Disk	500 GB
External connections	LAN integrated, 2x USB

INFORMATION ON MEASUREMENTS

MEASUREMENT		MEASURING RANGE	DISPLAY RESOLUTION	IN VIVO REPEATABILITY
Keratometry	Radius of curvature	5,00 – 12,00 mm	0,01 mm	±0,02 mm
	Curve Radius in Diopter (D) (n=1,3375)	28,00 – 67,50 D	0,01 D	±0,12 D
Axial Length		15,00 – 36,00 mm	0,01 mm	±0,03 mm
Pupil dimension		0,50 – 10,00 mm	0,01 mm	N/A
Limbus (White-To-White)		8,00 – 14,00 mm	0,01 mm	±0,05 mm
IBI Index (Interblink Interval)		0,2 – 20,0 s	0,1 s	N/A
Non-invasive Break-Up Time (TBT)		0,5 – 30,0 s	0,1 s	N/A
Meibomian Glands area of loss		0 – 100%	1%	N/A
Tear Meniscus Height		0,10 – 1,00 mm	0,01 mm	N/A

* This product is not available in all geographic areas. Please check with your distributor for availability.

- Report of the Joint World Health Organization-Brien Holden Vision Institute. Global Scientific Meeting on Myopia. The Impact of myopia and high myopia. University of New South Wales, Sydney, Australia. 16-18 March 2015.
- Holden, BA, Frick, TR, Wilson, DA et al. Global prevalence of myopia and high myopia and temporal trends from 2000 through 2050. *Ophthalmology*. 2016; 123:1036–42. Available from: doi: DOI: 10.1016/j.ophtha.2016.01.006
- Tideman, JW, Polling, JR, Vingerling, JR, Jaddoe, VVW, Williams, C, Guggenheim, JA, Klaver, CCW. Axial length growth and the risk of developing myopia in European children. *Acta Ophthalmol*. 2018; 96: 301–309. Available from <https://doi.org/10.1111/aos.13603>
- Mandal, P, Berrow, EJ, Naroo SA, et al. Validity and repeatability of the Aladdin ocular biometer. *BJO*. December 01, 2015. Available from <http://dx.doi.org/10.1136/bjophthalmol-2013-304002>

IMPORTANT

Subject to change in design and/or specifications without advanced notice. In order to obtain the best results with this instrument, please be sure to review all user instructions prior to operation. Medical device MDD Class IIa. Manufacturer: VISIA imaging S.r.l.



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