

What it is

A soft, flexible lens made of biocompatible collamer, implanted in the space between your iris and your natural lens. Nothing is removed, the cornea is not reshaped, and your natural lens keeps working. It is invisible and removable.

Who it suits

Usually patients aged 21 to around 50 with a stable prescription, where laser eye surgery is unsuitable: very high prescriptions, thinner or irregular corneas, or significantly dry eyes. It is an honest first-choice alternative, not a consolation prize, and some suitable for laser choose it anyway for its reversibility. If laser or lens replacement would be safer, we will say so.

Your alternatives

Glasses carry no surgical risk. Contact lenses are not risk free: serious corneal infection affects roughly 2 in 10 000 daily wear soft lens wearers each year, and around 20 in 10 000 of those who sleep in them. Laser vision correction and lens replacement are both offered at Blue Fin Vision®, so the recommendation can follow the eye.

Sizing is the safety mechanism

Correct sizing is one of the most important determinants of long-term ICL safety. The lens must sit at the correct height above your natural lens, called the vault. Your assessment includes ZEISS Pentacam anterior segment imaging, anterior chamber depth, white-to-white measurement and an endothelial cell count. If measurements disagree, we repeat them, and if they continue to disagree, no lens is ordered.

Both eyes on the same day

Routine at Blue Fin Vision® since November 2016, performed as two entirely separate operations. The second eye proceeds only if the first has been completely uncomplicated. If it does not proceed and you choose not to go ahead later, that eye's fee is returned in full.

Recovery

- Day of surgery: bright but hazy, halos, mild ache. Relax at home.
- Day 1: review with pressure check and vault imaging. Many patients already see markedly better.
- Days 2 to 7: most patients are back at work within a few days. No eye rubbing, swimming or eye makeup for two weeks.
- Weeks 2 to 6: vision sharpens and settles. Attend every review, even if your eyes feel perfect.

Aftercare

A course of antibiotic and anti-inflammatory drops, confirmed in your written discharge summary and included in your fee, as are all follow-ups.

How well does it work?

The ICL has more than two decades of published evidence. Reviews of the current central port design report high accuracy, high satisfaction and a markedly improved safety profile, with follow-up to seven and eight years showing stable correction. We will give you an individual estimate at your consultation.

Main risks

Early cataract was the historic concern and is now rare with the central port design; sizing and lifetime vault monitoring are the protections. Pressure inside the eye can rise early and is checked before you go home and the next day. Endothelial cells are counted annually, with elective removal discussed if the count trends towards 2 000 cells/mm². A small proportion of lenses are exchanged for sizing, and a toric lens can occasionally need repositioning; both are covered. Infection and severe loss of vision are rare.

Expected side effects

Halos and sometimes a faint ring around lights at night are common early and usually fade over the first months. Dry eye disturbance is much less than after laser surgery, because no corneal nerves are cut.

Lifetime monitoring, included

Every patient is enrolled in the ICL Lifetime Monitoring Protocol™ at no extra cost: consultant reviews at months 1, 3 and 12 within the surgical fee, then from month 12 annual vault imaging against the published 250 to 750 micron range and annual endothelial cell counts against your own baseline, for the life of the implant. If a cataract develops later, the ICL is removed at cataract surgery under the pre-priced Post-ICL Cataract Surgery Pathway.

Costs

- ICL surgery, both eyes, with your STAAR lenses: £7,500 non-toric; £8,250 with one toric; £9,000 with both toric.
- Sedation with consultant anaesthetist, if chosen: £700 per session. A diazepam tablet is free.
- Consultation and diagnostic scans: £500, prepaid and separate.

VAT exempt. The fee includes theatre and hospital fees, all follow-up appointments, all discharge medication, the ICL Lifetime Monitoring Protocol™, any enhancement, and management of any complication with no additional surgical fee. ICL surgery is generally not covered by private medical insurance.

Enhancement

If a residual prescription genuinely limits your result, refinement is fully covered by Blue Fin Vision®, with no cost-sharing, assessed once vision stabilises at around three months, within a 12 month window automatically extended to 24 months where refinement is likely. Provider policies vary widely, so always ask for enhancement terms in writing.

This page is a summary, not a consent document

It does not replace the full ICL Surgery patient information booklet, which contains the complete information on risks, alternatives, limitations and aftercare, and which forms part of your informed consent alongside your consultation, your summary letter and consent form. Read the full booklet before your consultation. In full: [The Blue Fin Vision® Advantage](#) | [Enhancement Policy](#) | [ICL Lifetime Monitoring Protocol™](#)

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