

Clinical Evaluation of a Manufacturing Process for a  
Frequent Replacement Silicone Hydrogel Multifocal  
Contact Lens

STUDY ID

CLN705-M103

PROTOCOL

NCT05765227

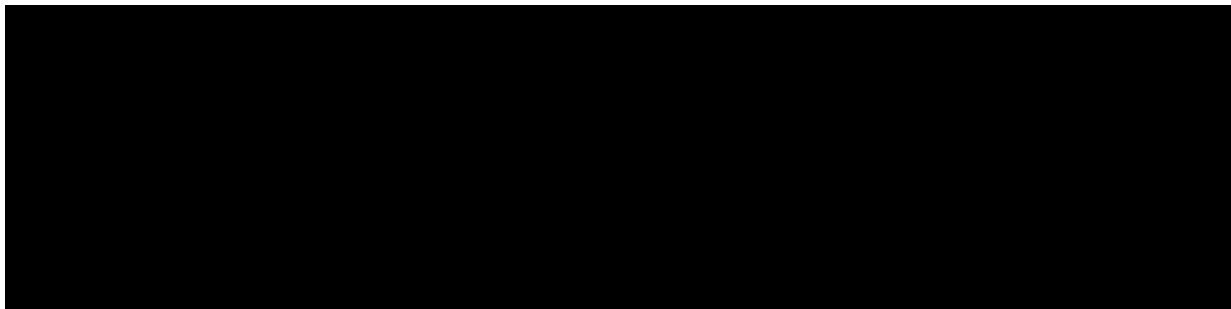


**Feasibility Clinical [REDACTED] Protocol for CLN705-M103**

**Title: Clinical evaluation of a manufacturing process for a frequent replacement silicone hydrogel multifocal contact lens**

|  |   |
|--|---|
| <b>[REDACTED] Protocol Number and Version:</b> | CLN705-M103, Version 1.0  |
| [REDACTED]                                     |   |
| <b>Sponsor Name and Address:</b>               | Alcon Research, LLC and its affiliates (“Alcon”)<br>6201 South Freeway<br>Fort Worth, Texas 76134-2099                      |
| <b>Test Product(s):</b>                        | Lehfilcon A Multifocal SiHy contact lens<br>[REDACTED]<br>Air Optix plus Hydraglyde MF contact lens (AOHG MF)<br>[REDACTED] |

**Sponsor Contact Details**



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Confidential  
May not be used, divulged, published, or otherwise disclosed without the consent of  
Alcon*

Investigator Agreement:

- I have read the Feasibility Clinical [REDACTED] Protocol described herein and the Feasibility Clinical [REDACTED] Protocol governing it, recognize its confidentiality, and agree to conduct the described trial in compliance with Good Clinical Practice (GCP), the ethical principles contained within the Declaration of Helsinki, this protocol, all applicable regulatory authority regulations, and conditions of approval imposed by the reviewing IRB or regulatory authority.
- I will supervise all testing of the device involving human subjects and ensure that the requirements relating to obtaining informed consent and IRB review and approval are met in accordance with applicable local and governmental regulations.
- I have read and understand the appropriate use of the investigational product(s) as described in the protocol, current Investigator's Brochure, product information, or other sources provided by the sponsor.
- I understand the potential risks and side effects of the investigational product(s).
- I agree to maintain adequate and accurate records in accordance with government regulations and to make those records available for inspection.
- I agree to comply with all other requirements regarding the obligations of clinical investigators and all other pertinent requirements of the sponsor and government agencies.
- I agree to ensure that all associates, colleagues, and employees assisting in the conduct of the study are informed of their obligations in meeting the above commitments.

Have you ever been disqualified as an investigator by any Regulatory Authority?

☐ No      ☐ Yes

Have you ever been involved in a study or other research that was terminated?

☐ No      ☐ Yes

If yes, please explain here:

Principal investigator:

Signature

Date

Name and professional  
position:

Address:

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## Abbreviations and Acronyms

| Abbreviation | Definition                                   |
|--------------|--|
| ADE          | Adverse device effect                        |
| AE           | Adverse event                                |
| BCVA         | Best corrected visual acuity                 |
| °C           | Degrees Celsius                              |
| CDMA         | Clinical Development & Medical Affairs       |
| CSS          | Clinical Site Specialist                     |
| CT&OL        | Clinical Trial & Operations Lead             |
| D            | Diopter(s)                                   |
| eCRF         | Electronic case report form                  |
|              |  |
| GA           | Georgia                                      |
| GCP          | Good Clinical Practice                       |
| ICF          | Informed consent form                        |
| ID           | Identification                               |
| IP           | Investigational product                      |
| IRB          | Institutional review board                   |
| JCR          | Johns Creek Research                         |
| LID          | Lens identification number                   |
| logMAR       | Logarithm of the minimum angle of resolution |
| ■            | ■  |
| ■            | ■  |
| MR           | Manifest refraction                          |
| ■            | ■  |
| OD           | Right eye                                    |
| OS           | Left eye                                     |
| OU           | Both eyes                                    |
| PI           | Principal investigator                       |
| R&D          | Research & Development                       |
| SADE         | Serious adverse device effect                |
| SiHy         | Silicone hydrogel                            |
| US or USA    | United States                                |

| Abbreviation | Definition    |
|--------------|---------------|
| VA           | Visual acuity |

## 1 FEASIBILITY CLINICAL [REDACTED] PROTOCOL

### 1.1 Revision History

| Version | Brief Description and Rationale  |
|---------|----------------------------------|
| 1       | Initial Version of this document |
|         |                                  |

### 1.2 Study Overview

| [REDACTED] Protocol Study Details |   |  |
|-----------------------------------|---|--|
| Study Rationale and Objective     | The purpose of this clinical trial is to evaluate the clinical performance of a manufacturing process on a frequent replacement multifocal contact lens   |  |
| Investigator(s) Site              | Johns Creek Research Clinic<br>11460 Johns Creek Parkway<br>Johns Creek, GA, 30097 USA  |  |
| External Organizations            | Not Applicable  |  |
| Planned Duration of Exposure      | Subjects will be exposed to up to 2 study lenses per eye, each will be worn for 2 days (+3 days): <ul style="list-style-type: none"><li>Study Lens 1</li></ul> <div>[REDACTED]</div>  |  |
| Number of Subjects                | Planned to enroll: Up to 150 subjects<br>[REDACTED]<br>[REDACTED]   | Target to complete: Up to 150 subjects |
| Study Population                  | <ul style="list-style-type: none"><li>Habitual soft Multifocal contact lens wearers aged <math>\geq 40</math> years with normal eyes (not needing ocular medication, other than correction for refractive error). Subjects should have at least 3 months wearing experience, wear these lenses at least 5 days per week and at least 8 hours per day.</li><li>To qualify, subjects must require cylindrical correction <math>\leq 0.75D</math>, be able wear study contact lens with sphere power ranging</li></ul> |  |

|   |   |  |  |   |   |
|---|---|--|--|---|---|
| <b>Protocol Study Details</b>   |   |  |  |   |   |
|   | <p>between +3.00D and -7.00D and requiring a near ADD of LO, MED or HI</p> <div style="background-color: black; width: 100%; height: 150px;"></div>   |  |  |   |   |
| <b>Lens Assignment</b>  | No formal randomization will be implemented (a predetermined order will be provided by Sponsor, if applicable).   |  |  |   |   |
| <b>Study Design</b>   | <table border="1"> <tr> <td> <input checked="" type="checkbox"/> Prospective<br/> <input type="checkbox"/> Randomized </td> <td> <input checked="" type="checkbox"/> Single-masked (trial subject)<br/> <input type="checkbox"/> Open-label </td> </tr> <tr> <td> <input type="checkbox"/> Single group<br/> <input type="checkbox"/> Parallel group<br/> <input type="checkbox"/> Crossover<br/> <input checked="" type="checkbox"/> Other: either single group or crossover depending on number of study lenses evaluated </td> <td> <input type="checkbox"/> Contralateral<br/> <input checked="" type="checkbox"/> Bilateral<br/> <input type="checkbox"/> Monocular lens wear </td> </tr> </table> <p>Visit Schedule:</p> <ul style="list-style-type: none"> <li>If only 1 study lens to be tested in a trial: <ol style="list-style-type: none"> <li>Visit 1 - Screening/Baseline/Dispense Lens 1</li> <li>Visit 2 (2 (+3) days after Visit 1) Follow-up Lens 1 (to occur at least 4-6 hours after lens insertion)/Exit</li> </ol> </li> </ul> <div style="background-color: black; width: 100%; height: 100px;"></div> <div style="background-color: black; width: 100%; height: 20px;"></div> <div style="background-color: black; width: 100%; height: 20px;"></div> | <input checked="" type="checkbox"/> Prospective<br><input type="checkbox"/> Randomized | <input checked="" type="checkbox"/> Single-masked (trial subject)<br><input type="checkbox"/> Open-label | <input type="checkbox"/> Single group<br><input type="checkbox"/> Parallel group<br><input type="checkbox"/> Crossover<br><input checked="" type="checkbox"/> Other: either single group or crossover depending on number of study lenses evaluated | <input type="checkbox"/> Contralateral<br><input checked="" type="checkbox"/> Bilateral<br><input type="checkbox"/> Monocular lens wear |
| <input checked="" type="checkbox"/> Prospective<br><input type="checkbox"/> Randomized  | <input checked="" type="checkbox"/> Single-masked (trial subject)<br><input type="checkbox"/> Open-label  |  |  |   |   |
| <input type="checkbox"/> Single group<br><input type="checkbox"/> Parallel group<br><input type="checkbox"/> Crossover<br><input checked="" type="checkbox"/> Other: either single group or crossover depending on number of study lenses evaluated | <input type="checkbox"/> Contralateral<br><input checked="" type="checkbox"/> Bilateral<br><input type="checkbox"/> Monocular lens wear   |  |  |   |   |
| <b>Decision Criteria</b>  | No prospective decision criteria have been defined for this study.  |  |  |   |   |
| <b>Assessments</b>  | <p>1. VA with study lenses (logMAR; OU) @ 4m</p> <div style="background-color: black; width: 100%; height: 20px;"></div> <div style="background-color: black; width: 100%; height: 20px;"></div>  |  |  |   |   |

| Protocol Study Details    |  |
|---------------------------|--|
|                           |  |
| <b>Safety Assessments</b> | <ol style="list-style-type: none"><li>1. AEs</li><li>2. Biomicroscopy</li><li>3. Device deficiencies</li></ol>   |
| <b>Inclusion Criteria</b> | <ol style="list-style-type: none"><li>1. Subject must be at least 40 years of age.</li><li>2. Subject must be able to understand and must sign an informed consent form (ICF) that has been approved by an Institutional Review Board (IRB).</li><li>3. Subject must be willing to stop wearing their habitual contact lenses for the duration of study participation.</li><li>4. Currently wears multifocal soft contact lenses in both eyes for a minimum of 5 days per week and 8 hours per day during the past 3 months.</li></ol> |

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| Protocol Study Details                                     |   |  |       |            |          |                      |  |  |
|--|---|--|-------|------------|----------|----------------------|--|--|
|  | The following product or lens naming conventions will be used: <ul style="list-style-type: none"><li>■ [REDACTED]</li><li>■ [REDACTED]</li><li>■ [REDACTED]</li><li>• AOHG MF</li><li>■ [REDACTED]</li></ul>  |  |       |            |          |                      |  |  |
| <b>Subject Characteristics and Study Conduct Summaries</b> | The following will be presented: <ul style="list-style-type: none"><li>• Conduct</li></ul>  |  |       |            |          |                      |  |  |
| <b>Assessment Analysis Strategy</b>                        | <p>[REDACTED]</p> <p>Results from selected assessment will be summarized using descriptive statistics according to its measurement scale. Listings will be provided as necessary.</p> <p>The Safety Analysis Set will serve as the analysis data set for all effectiveness analyses.</p>  |  |       |            |          |                      |  |  |
| <b>Planned Effectiveness Analyses</b>                      | <p>[REDACTED]</p> <p>[REDACTED]</p> <table><tr><th>Title</th><th>Assessment</th><th>Analysis</th></tr><tr><td>VA with study lenses</td><td>Visual Acuity<ul style="list-style-type: none"><li>■ [REDACTED]</li><li>• 4m (OU)</li><li>■ [REDACTED]</li><li>■ [REDACTED]</li></ul></td><td>Table for continuous variables (Dispense, Follow-up)</td></tr></table> <p>[REDACTED]</p> |  | Title | Assessment | Analysis | VA with study lenses | Visual Acuity <ul style="list-style-type: none"><li>■ [REDACTED]</li><li>• 4m (OU)</li><li>■ [REDACTED]</li><li>■ [REDACTED]</li></ul> | Table for continuous variables (Dispense, Follow-up) |
| Title  | Assessment  | Analysis   |       |            |          |                      |  |  |
| VA with study lenses                                       | Visual Acuity <ul style="list-style-type: none"><li>■ [REDACTED]</li><li>• 4m (OU)</li><li>■ [REDACTED]</li><li>■ [REDACTED]</li></ul>  | Table for continuous variables (Dispense, Follow-up) |       |            |          |                      |  |  |

| Protocol Study Details                    |  |
|---|--|
|   |  |
|   |  |
| <b>Sample Size and Power Calculations</b> | No formal sample size calculation is provided given the descriptive and feasibility nature of the study. |

### 1.3 Study Product and Associated Materials

|                                   | <b>Test Product 1</b><br>[REDACTED] MF contact lenses or LID]  | <b>Comparator Product 1</b><br>[AIR OPTIX plus HydraGlyde Multifocal]  |  |
|-----------------------------------|--|--|--|
| <b>Primary component/material</b> | Lehfilcon A  | Lotrafilcon B  |  |
| <b>Manufacturer</b>               | Alcon Laboratories, Inc.   | Alcon Laboratories, Inc.   |  |
| <b>Power Range</b>                | <ul style="list-style-type: none"><li>• LO Add with +1.00 to -5.00D (in 0.25D steps) spherical power as available</li><li>• MED Add with +3.00D to -7.00D (in 0.25D steps) spherical power as available</li><li>• HI Add with +3.00D to -7.00D (in 0.25D steps) spherical power as available</li></ul> | <ul style="list-style-type: none"><li>• LO Add with +1.00 to -5.00D (in 0.25D steps) spherical power as available</li><li>• MED Add with +3.00D to -7.00D (in 0.25D steps) spherical power as available</li><li>• HI Add with +3.00D to -7.00D (in 0.25D steps) spherical power as available</li></ul> |  |
| <b>Supply</b>                     | The sponsor will provide this test product.  | The site will procure this comparator product.   |  |
| <b>Packaging and Labeling</b>     | Primary label on blister foil pack includes, at a minimum: <ul style="list-style-type: none"><li>• material name or identifier</li><li>• base curve</li></ul>  | Commercial primary and secondary labeling and packaging  |  |
|                                   |  |  |  |

|  | <b>Test Product 1</b><br><b>[REDACTED] MF contact</b><br><b>lenses or LID]</b>  | <b>Comparator Product 1</b><br><b>[AIR OPTIX plus</b><br><b>HydraGlyde Multifocal]</b> |  |
|--|---|--|--|
|  | <ul style="list-style-type: none"><li>• diameter</li><li>• packing solution</li><li>• power</li><li>• lot number</li><li>• expiration date</li><li>• content statement</li><li>• investigational device statement</li><li>• sponsor information</li><li>• country of origin</li></ul> Secondary color-coded label on packages includes: <ul style="list-style-type: none"><li>• clinical protocol number</li><li>• material name or identifier</li><li>• power</li><li>• an investigational use only statement</li><li>• tracking or handling unit number</li></ul> [If product is marketed |  |  |

|            | Test Product 1<br>[REDACTED] MF contact lenses or LID]   | Comparator Product 1<br>[AIR OPTIX plus HydraGlyde Multifocal]  |  |
|------------|--|---|--|
|            | include the following]<br>Commercial primary label on blister foil pack includes: <ul style="list-style-type: none"><li>• material name</li><li>• base curve</li><li>• diameter</li><li>• packing solution</li><li>• power</li><li>• lot number</li><li>• expiration date</li><li>• content statement</li><li>• country of origin</li><li>• manufacturer information</li></ul> |   |  |
| Storage    | Lenses should be stored at room temperature.   | Refer to manufacturer’s instructions.   |  |
| Other      | Replacement lenses are allowed only if there is a device deficiency (e.g., torn lens) or if the lens falls on the ground and investigator wants to insert a new lens.  | Replacement lenses are allowed only if there is a device deficiency (e.g., torn lens) or if the lens falls on the ground and investigator wants to insert a new lens. |  |
| Associated | <ul style="list-style-type: none"><li>• CLEAR CARE Cleaning and Disinfecting Solution will be used with study</li></ul>  |   |  |

|                  | <b>Test Product 1</b><br>[REDACTED] MF contact<br>lenses or LID]   | <b>Comparator Product 1</b><br>[AIR OPTIX plus<br>HydraGlyde Multifocal] | [REDACTED]<br>[REDACTED] |
|------------------|--|--|--------------------------|
| <b>Materials</b> | lenses for the duration of study. <ul style="list-style-type: none"><li>• LacriPure rinsing/reinsertion PRN will be used as needed with study lenses.</li><li>• Lubrication/re-wetting drops will not be permitted during study lens wear.</li></ul> |  |                          |

**Table 1-1 Schedule of Study Procedures and Assessments**

|    | Procedure/ Assessment   | Visit 1                             | Visit 2   |  |  |  | Unscheduled Visit/Early Exit Visit | Source Only* |     |   |
|----|---|-------------------------------------|---|--|--|--|------------------------------------|--------------|-----|---|
|    |   | Screening/Baseline/ Dispense Lens 1 | Follow up Lens 1 (2 (+ 3) Days) after Visit 1 (minimum 4 - 6 hrs after insertion) |  |  |  | Exit                               |              |     |   |
| 1  | Informed Consent  | X                                   |   |  |  |  |                                    |              |     |   |
| 2  | Demographics  | X                                   |   |  |  |  |                                    |              |     |   |
| 3  | Medical History   | X                                   | X   |  |  |  |                                    | X            | X   |   |
| 4  | Concomitant Medications   | X                                   | X   |  |  |  |                                    | X            | X   |   |
| 5  | Inclusion/ Exclusion  | X                                   |   |  |  |  |                                    |              |     |   |
| 6  | Habitual lens<br><i>(brand, power)</i>  | X                                   |   |  |  |  |                                    |              |     |   |
| 7  | VA w/ habitual correction<br><i>(OD, OS, Snellen distance)</i>  | X                                   | (X)   |  |  |  |                                    | X            | (X) | X |
| 8  | Manifest refraction <i>(most plus sphero-cylindrical)</i><br><i>(data for repeat subjects – ILB in EDC)</i> | X                                   |   |  |  |  |                                    | (X)          | (X) |   |
| 9  | BCVA<br><i>(OD, OS, logMAR; distance and near with manifest refraction)</i>                                 | X                                   |   |  |  |  |                                    | (X)          | (X) |   |
| 10 | Biomicroscopy   | X                                   | X   |  |  |  |                                    |              | X   |   |
|    |   |                                     |   |  |  |  |                                    |              |     |   |

|    | Procedure/ Assessment   | Visit 1                                | Visit 2   |  |  |      | Unscheduled Visit/Early Exit Visit | Source Only* |
|----|---|--|---|--|--|------|------------------------------------|--------------|
|    |   | Screening/Baseline/<br>Dispense Lens 1 | Follow up Lens 1<br>(2 (+ 3) Days) after<br>Visit 1<br>(minimum 4 - 6 hrs<br>after insertion) |  |  | Exit |                                    |              |
|    |   |  |   |  |  |      |                                    |              |
| 13 | Dispense study lenses   | X                                      |   |  |  |      | (X)                                | X            |
|    |   |  |   |  |  |      |                                    |              |
| 17 | VA w/ study lenses,<br>(logMAR)<br>• Distance (4m; OU)<br>■<br>■<br>■ | X                                      | X   |  |  |      | (X)                                |              |
|    |   |  |   |  |  |      |                                    |              |

|    | Procedure/ Assessment | Visit 1                             | Visit 2   |  |  |      | Unscheduled Visit/Early Exit Visit | Source Only* |
|----|-----------------------|-------------------------------------|---|--|--|------|------------------------------------|--------------|
|    |                       | Screening/Baseline/ Dispense Lens 1 | Follow up Lens 1 (2 (+ 3) Days) after Visit 1 (minimum 4 - 6 hrs after insertion) |  |  | Exit |                                    |              |
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|    | Procedure/ Assessment | Visit 1                                | Visit 2   |  |  |      | Unscheduled<br>Visit/Early<br>Exit Visit | Source<br>Only* |
|----|-----------------------|--|---|--|--|------|--|-----------------|
|    |                       | Screening/Baseline/<br>Dispense Lens 1 | Follow up Lens 1<br>(2 (+ 3) Days) after<br>Visit 1<br>(minimum 4 - 6 hrs<br>after insertion) |  |  | Exit |  |                 |
| 30 | Exit Form             | (X)                                    | (X)   |  |  | X    | (X)                                      |                 |

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## **1.4 Study-Specific Lens Returns**

### **1.4.1 Worn IP**

Worn IP will be returned to the sponsor. Use the following instructions for collection, storage, and shipping, unless otherwise instructed by the sponsor.

If worn IP is to be returned, provide all of the following specifications:

- Removal from eye: Clean hands
- Storage container: Unused screw-top lens case
- Label information:
  - Protocol number
  - Site number
  - Subject ID
  - Eye
  - Lens type/ identification
  - Lot number
  - Date collected
- Storage solution: PURILENS Plus Preservative Free Saline (PURILENS Plus Saline)
- Storage temperature: Refrigerated 4-10°C
- Timing of return: Study Completion or periodically as communicated by sponsor
- An inventory/list of lenses being returned

