trated in FIG. 9 wherein three strands 63, 64 and 65 are spaced uniformly and secured adjacent the lens body peripheral edge as previously described. If such a lens is used, a three point fixation will be achieved once the lens is implanted, which may provide even more sufficient centering and fixation, although implantation procedure may be more difficult because of the additional strand. The same would hold true for a four strand embodiment as will be clearly understood within the purview of the invention herein. However, regardless of the number of strands utilized in achieving the lens described herein, the means for securing one end thereof may be like that previously described. Moreover, the necessity of having the other strand end unsecured or free is most important, because without such a feature, the spring-like feature of the memory retaining polypropylene composition strand would be affected. Thus, since full compression of at least one of the strands during implantation is essential according to the procedure described herein, if significant resistance of such compression were met, it would be disadvantageous. On the other hand, with one strand end unsecured or free, compression of the strand is readily achieved since it occurs by simple causing the single strand to bend from its normal straight position.

FIG. 10 illustrates an alternative lens embodiment in which lens body 70 is secured in a ring member 68 having attached thereto the supporting strands 72 and 74. The ring preferably comprises the same FDA approved polypropylene, previously described. With the strands also being of the same material, the ring and strands form a unitary member, which may be conveniently produced by a single molding operation. Alternatively, the polypropylene strands may be separately formed and welded or otherwise adhered to the ring. The ring member preferably will include a circular cavity exposed along the inner ring surface in which the lens body edge is secured. Where the polypropylene ring is somewhat flexible, the more rigid lens body may be conveniently snapped into such a ring cavity during assembly. The lens of this embodiment will be implanted using the same technique previously described. Other advantages and features as well as modifications of the intraocular lens and implantation procedure described herein and within the purview of the invention will be evident to those skilled in the art.

I claim:

1. In a cataract surgery following capsular extraction, a method of implanting an intraocular lens having an acrylic resin lens body and first and second flexible and memory retaining curved looped strands wherein one end of each strand is secured adjacent the peripheral edge of said lens body and the other end is unsecured, comprising inserting said lens through the pupil with said first strand first followed by said lens body, directing said first strand against the ciliary body, further urging said lens through the pupil thereby compressing said first strand until said second strand passes through said pupil, and directing said second strand against the ciliary body opposite said first strand, whereby the entire lens is located within the posterior chamber and posterior to the iris.

2. In cataract surgery following capsular extraction, a method of implanting an intraocular lens having a plastic lens body and first and second flexible and memory retaining curved looped strands wherein one end of each strand is secured adjacent the peripheral edge of said lens body and the other end is unsecured, comprising inserting said lens through the pupil with said first strand first followed by said lens body, directing said first strand into the posterior chamber, further urging said lens through the pupil and into the posterior chamber thereby compressing said first strand within the posterior chamber until said second strand passes through said pupil and into the posterior chamber, and directing said second strand opposite said first strand in the posterior chamber, whereby the entire lens is located and fixed within the posterior chamber and posterior to the iris.

3. The method of claim 2 wherein said capsular extraction is an extracapsular extraction in which at least a portion of the capsule remains in the posterior chamber and whereby said lens is inserted into said posterior chamber and fixed by the capsule therein.

4. In cataract surgery following capsular extraction, a method of implanting an intraocular lens having a plastic lens body and a plurality of flexible and memory retaining curved looped strands wherein one end of each strand is secured adjacent the peripheral edge of said lens body and the other end is unsecured, comprising inserting said lens through the pupil with a first one of said strands first following by said lens body, directing said first strand into the posterior chamber, and further urging said lens through the pupil and into the posterior chamber thereby compressing said first strand within the posterior chamber until the other of said strands pass through said pupil and directing said other strands into the posterior chamber, whereby the entire lens is located and fixed within the posterior chamber and posterior to the iris.

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