RPE Detachment in AMD: Injection Index May Predict Long Term Visual Outcomes







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# Disclosures

I have no financial disclosures to report.

## **Key points**

- Largest PED/AMD cohort and longest follow-up reported to date
- Injection index = # of injections / year
- Statistical analysis of data from this large, retrospective cohort suggests clinically significant findings
  - High cumulative injection index may yield improved visual outcomes at 4 and 5 years in patients with PED/AMD
  - Patients may gain an additional 0.5 ETDRS letters per injection per year

Anti-VEGF: transformative treatment paradigm AMD Most patients lose vision after a period of relatively regular treatment The "under-treatment paradox"

Decreased treatment frequency and duration

Fewer injections over time

- Treatment burden
- Non-compliance
- Treatment strategies (treat and extend or prn)
- Socio-economic issues
- Anatomic and functional disease progression



### Hypothesis: Injection Index

- A simplified quantification of treatment frequency, injection index (ii), defined as the number of anti-VEGF injections per year from the time of presentation, may provide a useful means of evaluating real world data irrespective of treatment strategy, anti-VEGF agent, or other confounding variables.
- If validated, injection index may become a useful means of discussing and investigating treatment regimens across all diseases treated with VEGF suppression.

### RPE Detachment in Neovascular AMD

- 1. Traditionally thought to have **poor prognosis**
- 2. Typically excluded from major prospective trials given "poor prognosis"
  - "Difficult to treat,
  - Resistant to anti-VEGF, (persistent fluid)
  - Unsatisfactory response"
  - RPE Tears (0-27%)
  - Atrophy post treatment
  - Disciform scar formation
- 3. Literature suggests: Best Review: Sarraf:RETINA:November 2018 (38;11)
  - Under appreciated: greater than 60% of eyes treated with AMD
  - Post hoc large trials, retrospective studies, prospective trials with low numbers of eyes and follow up 2 years or less
  - No agreement on treatment regimen, agent, ideal anatomic outcomes as they relate to vision
  - "Treatment goals for patients presenting with PED should focus on visual acuity"

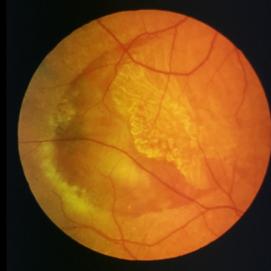


Image courtesy of Alan Bird

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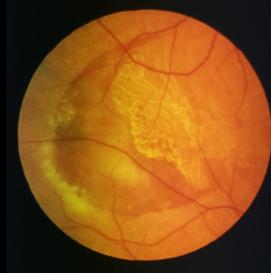
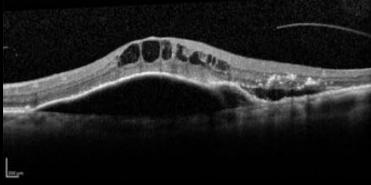
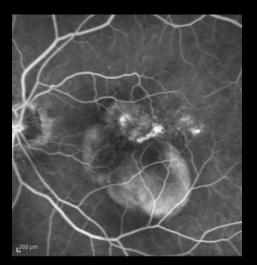


Image courtesy of Alan Bird

### PED /AMD

**Retrospective Analysis** 256 eyes UCLA / Tel Aviv 5 Year follow-up (1.04-12.74 years) Vision outcomes by injections/year "Injection Index" Anti-VEGF agent agnostic Baseline anatomy, demographics balanced **RPE** Tears at baseline excluded

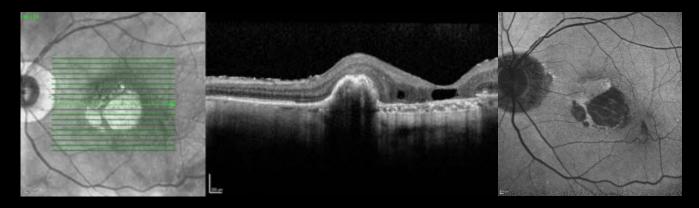




1/15/2015, OS FA 5:39.72 35\* ART(22)



## Methods



#### Inclusion criteria:

- PED with AMD
- >100 micron PED
- 1 year follow-up

#### Excluded:

- Baseline RPE tears
- PCV, other retinal diseases
- LP or worse vision

Groups:

<u>High ii (≥9 injections)</u>

Low ii (<9 injections)

#### Analysis:

If patient changed groups, remaining visits were excluded

### Methods

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- PED with AMD
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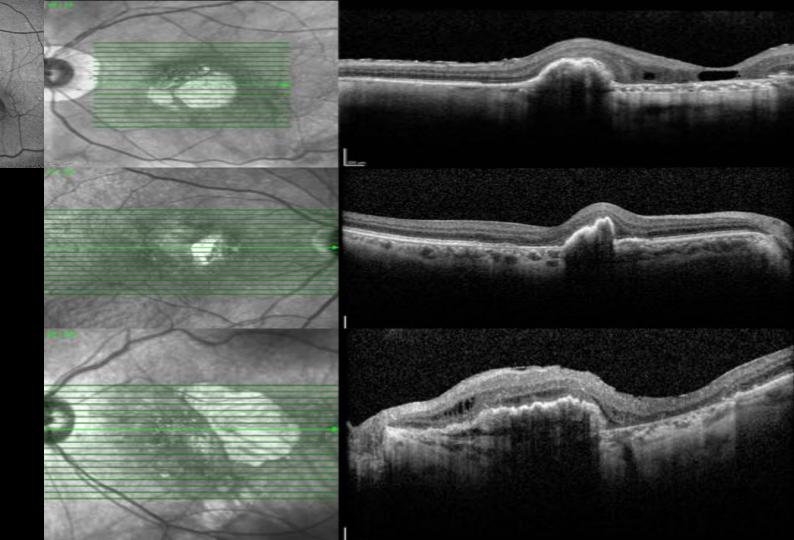
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<u>Groups</u>: High ii (≥9 injections) Low ii (<9 injections)

### Analysis:

If patient changed groups, remaining visits were excluded

EXAMPLES OF RPE TEARS EXCLUDED AT BASELINE



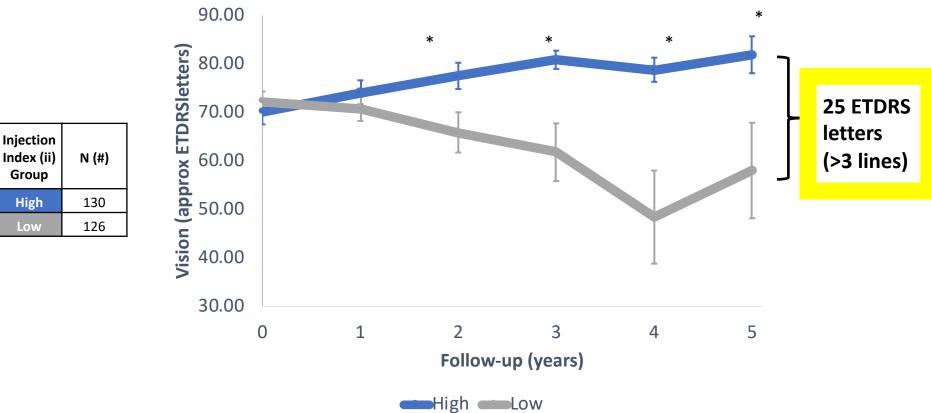
### Demographics

	Injection Index (ii)		DValue
	High (≥9) (N=130)	Low (<9) (N=126)	P Value
Age (years)	78.3	78.1	0.80
Gender (Female, %)	59%	64%	0.41
Eye (OD, %)	55%	48%	0.26
Baseline Vision (Snellen)	20/80	20/73	0.53
Baseline PED Height (Microns)	327.1	280.6	0.05
Treatment Naïve (%)	73%	87%	0.005

### Demographics

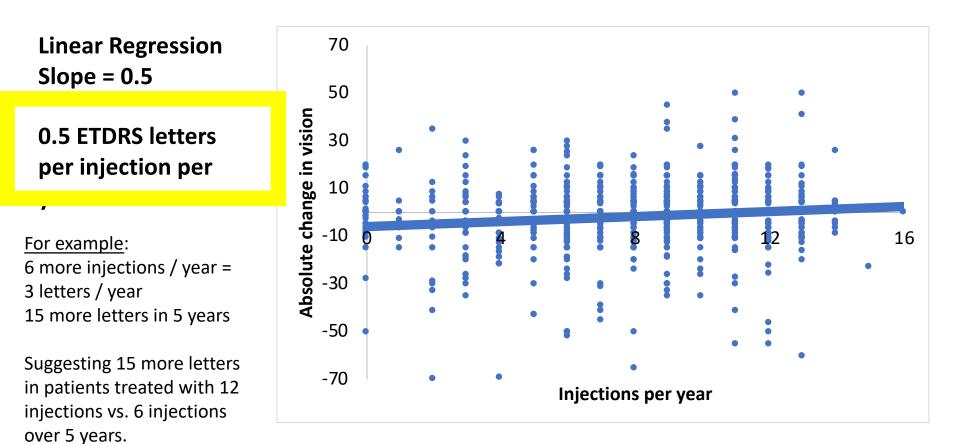
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## Vision by Injection Index over 5 Year Follow-up



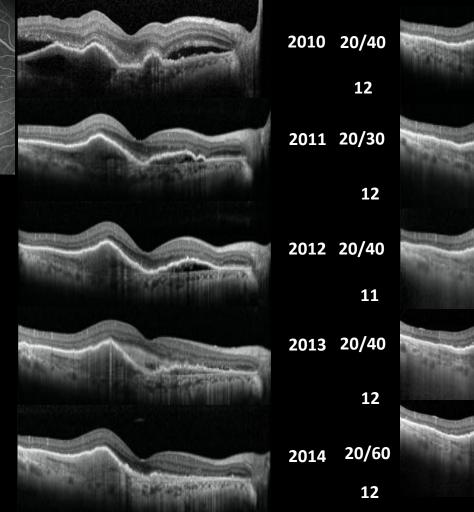
\* Indicates p<0.05

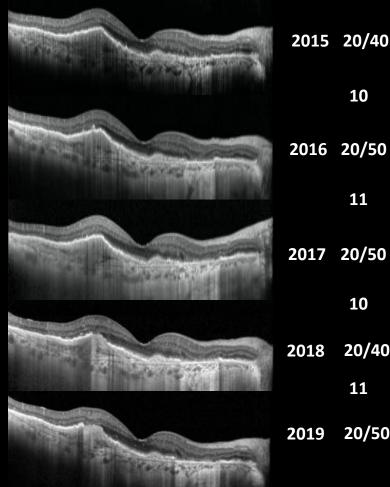
## Change in vision per injection





(No indication of pachychoroid disease)





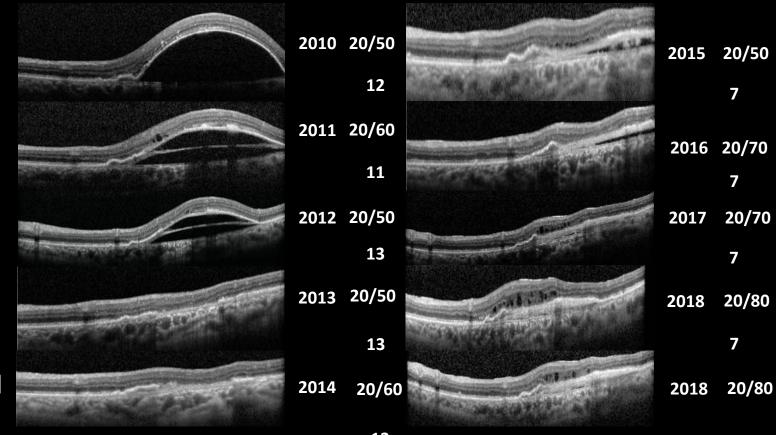
20/50

10



# Example Case

(No indication of pachychoroid disease)



### **Rates of Complications**

- Total number of injections = 9824
- Number of endophthalmitis = 1
- Rate = 0.01%
- Number of new RPE tears = 0

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## Thank You

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