Loss to Follow up in Patients with Neovascular Age Related Macular Degeneration treated with Anti-VEGF therapy in the United States

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Summary Statement

- * Adherence to Anti-VEGF treatment is essential to Optimize Outcomes in Neovascular AMD
- * High Rate of Loss to Follow Up in Neovascular AMD with nearly 1 out of 5 patients Loss to Follow Up
- Risk Factors include Increasing Age, Male Sex, Unreported Ethnicity, Unilateral Involvement, Private Insurance, Govt/ Military Insurance

Retina Specialists Clinics...

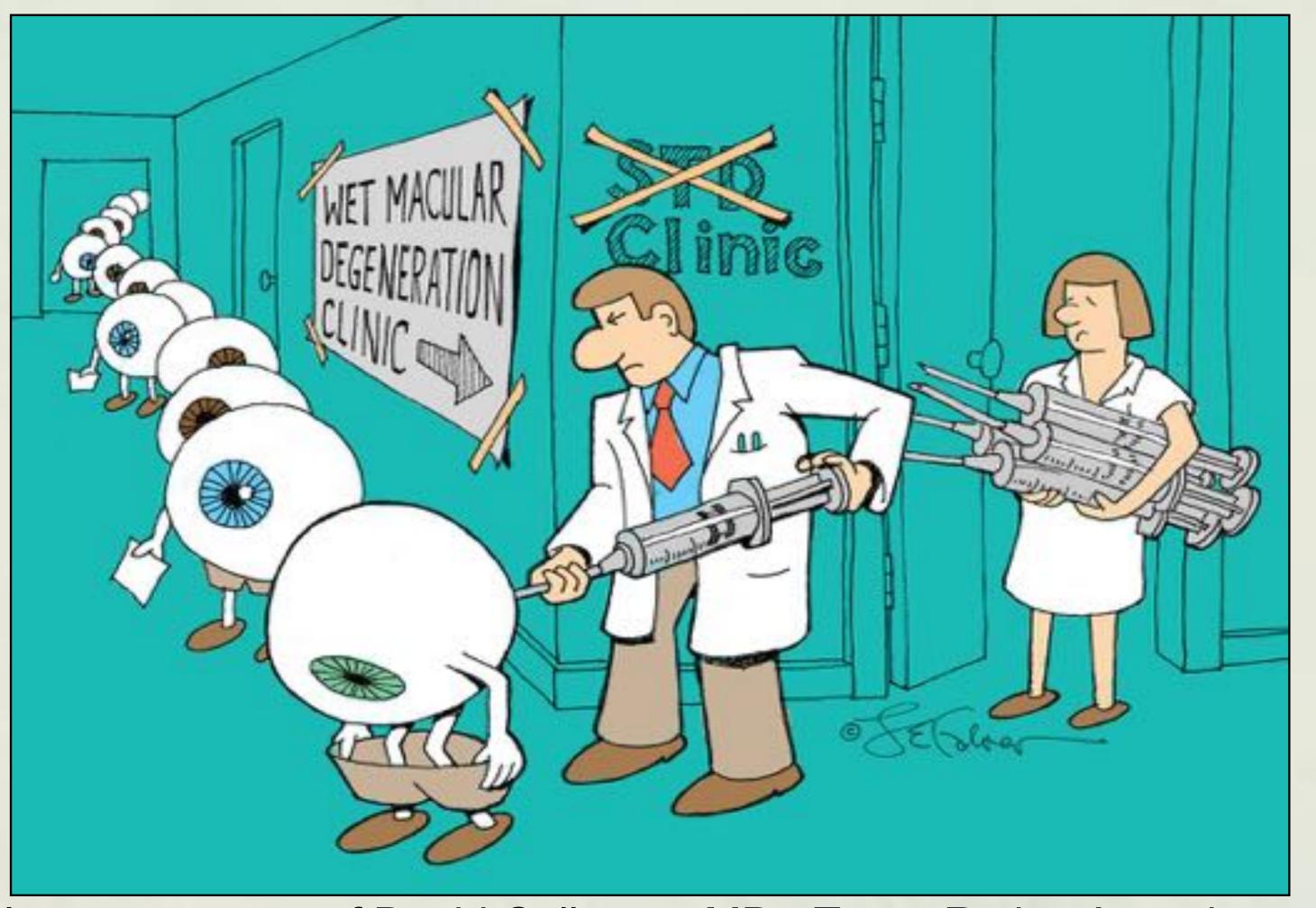


Image courtesy of David Callanan, MD - Texas Retina Associates

Loss to Follow Up

- Defined as no visit 12 months after an intravitreal injection
- High Rate in Neovascular AMD
- 22% among the 9,007 patients in a large
 private practice with 13 sites
- * Obeid et al. JAMA Ophthal. 2018: 136 (11) 1251-1259.



To determine the Incidence of Loss to Follow Up in patients with Neovascular Age-related Macular Degeneration treated with anti-VEGF therapy in the United States

Methods



- National Registry (IRIS, AAO)
- Patients diagnosed with Neovascular AMD between January 1, 2013 -December 31, 2015 and treated with anti-VEGF therapy from January 1, 2013 to December 31, 2018.
- Loss to Follow Up was defined as visit greater than 12 months from last intravitreal injection
- Multivariable logistic regression analysis involving baseline demographic and clinical conditions were utilized to determine odds ratios (OR) and 95% confidence intervals (CI).

Patient Population

IRIS REGISTRY

Neovascular AMD between 2013-2015 n=717,019

Intelligent Research In Sight

Received Anti-VEGF injections between 2013-2018

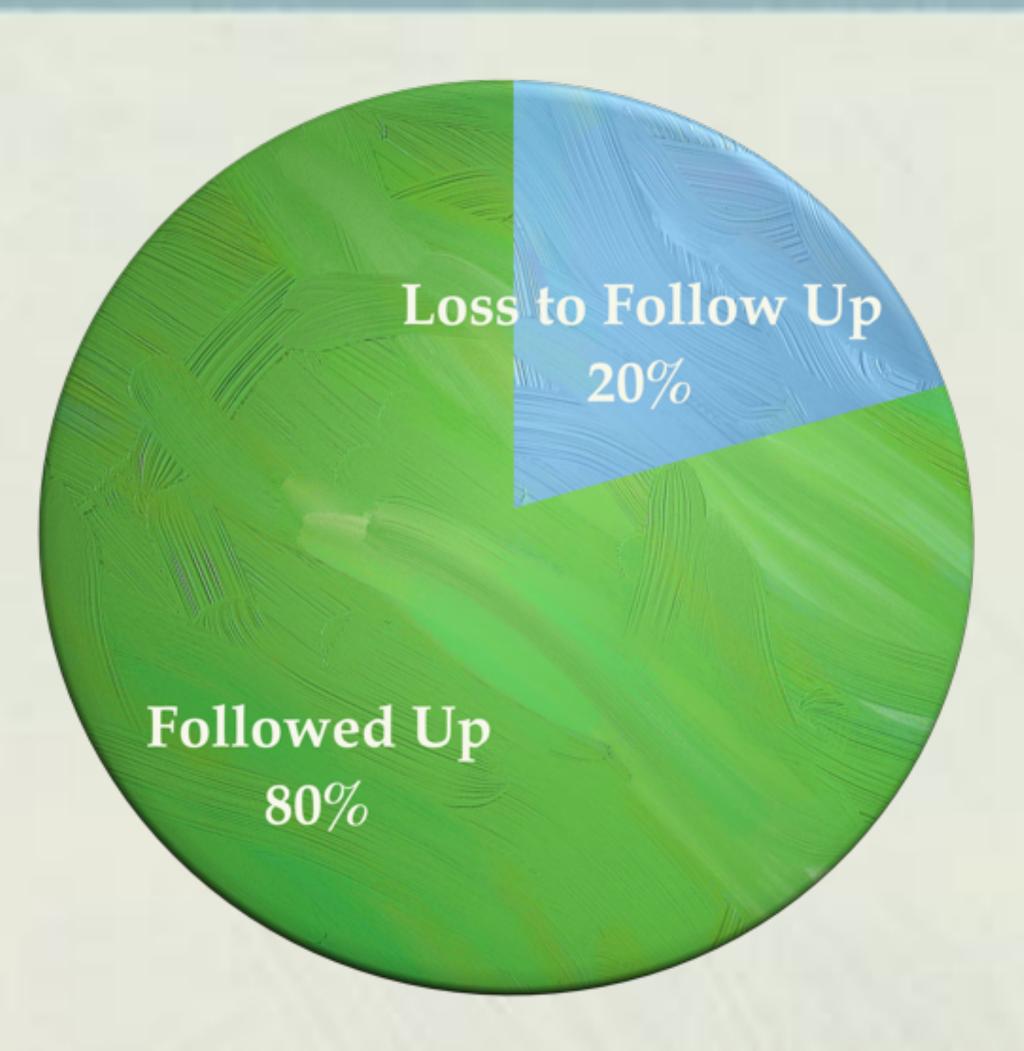
n = 393,372

Exclude patients with PDR, DME, RVO, Myopic Degeneration, Idiopathic CNV n=314,912

Neovascular AMD initiated with Anti-VEGF therapy

n=310,912

Results



Among those LTFU, only 1.3% had later follow up

Baseline Characteristics- AGE

Age	OR (95% CI)	P-Value
<70	1 (Reference)	
71-75	1.12 (1.07, 1.18)	<0.0001*
76-80	1.18 (1.13, 1.23)	<0.0001*
81-85	1.34 (1.29, 1.39)	<0.0001*
86-90	1.62 (1.56, 1.68)	<0.0001*
>90	2.08 (2.00, 2.17)	<0.001*

Baseline Characteristics- SEX

Sex	OR (95% CI)	P-Value
Male	1 (Reference)	
Female	0.90 (0.88, 0.92)	<0.0001*
Unreported	1.88 (1.50, 2.36)	<0.0001*

Baseline Characteristics- Race/Ethnicity

Race/Ethnicity	OR (95% CI)	P-Value
White	1 (Reference)	
African-American	1.03 (0.93, 1.15)	0.56
Asian	0.85 (0.78, 0.93)	0.0004*
Hispanic	0.99 (0.94, 1.06)	0.91
Other	1.08 (0.93, 1.27)	0.31
Unreported	1.76 (1.72, 1.81)	<0.001*

Baseline Characteristics- Eye Involvement

Eye Involvement	OR (95% CI)	P-Value
Bilateral	1 (Reference)	
Unilateral	4.98 (4.88, 5.09)	<0.0001*

Baseline Characteristics- Baseline Vision

Baseline Vision	OR (95% CI)	P-Value
>20/40	1 (Reference)	
20/50-20/200	0.98 (0.96, 1.00)	0.09
< 20/200	0.61 (0.59, 0.64)	<0.001*

Baseline Characteristics- REGION

Region	OR (95% CI)	P-Value
South	1 (Reference)	
East	0.90 (0.88, 0.92)	<0.001*
Midwest	0.77 (0.75, 0.79)	<0.001*
West	0.92 (0.89, 0.95)	<0.001*

Baseline Characteristics- INSURANCE

Insurance	OR (95% CI)	P-Value
Private	1 (Reference)	
Dual Medicare & Medicaid	0.76 (0.72, 0.80)	<0.0001*
Government/Military	1.15 (1.03, 1.27)	0.0119*
Medicaid	0.99 (0.89, 1.11)	0.90
Medicare	0.75 (0.72, 0.78)	<0.001*

Baseline Characteristics- Provider Zip Codes

Median Household Income for Provider Zip Code	OR (95% CI)	P-Value
>\$100,000	1 (Reference)	
\$75,001-\$100,000	1.17 (1.11, 1.24)	<0.0001*
\$50,001-\$75,000	1.20 (1.14, 1.26)	<0.0001*
< \$50,000	1.22 (1.16, 1.28)	<0.0001*

Clinical Characteristics

	Loss to Follow Up	NOT Lost to Follow Up	P-Value
Time to Last Follow Up	15 months	42 months	<0.0001*
Number of Injections	9.1	8.8	<0.0001*
Visual Acuity Outcomes			
Change in Vision from Baseline	-2.2 letters	-0.3 letters	<0.0001*
>20/40	52%	59%	<0.0001*
< 20/200	10%	7%	<0.0001*

Conclusions

High Rate of Loss to Follow up in Neovascular AMD

* Risk Factors include Increasing Age, Male Sex, Unreported Ethnicity, Unilateral Involvement, Private Insurance, Govt/Military Insurance

Improving Adherence key to Optimizing Long Term Outcomes

Limitations

- Retrospective Report
- * Electronic Medical Records: Data Entry and Coding Errors
- Unable to rule out Deaths