

LONG-TERM OUTCOMES OF ANTI-VASCULAR ENDOTHELIAL GROWTH FACTOR TREATMENT IN PERIPAPILLARY CHOROIDAL NEOVASCULARIZATION DUE TO AGE-RELATED MACULAR DEGENERATION

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PURPOSE: To report the long-term outcomes of anti-vascular endothelial growth factor (VEGF) treatment in eyes with peripapillary choroidal neovascularization (PPCNV) associated with age-related macular degeneration (AMD).

METHODS: A retrospective cohort study included patients with AMD related PPCNV. Eyes were treated with anti-VEGF according to pro re nata regimen. Inactivation index was calculated as the proportion of disease inactivity from the total follow up time.

RESULTS: Sixty-seven eyes of 66 consecutive patients were included in the study; mean follow-up time was 53.2 months. Best corrected visual acuity (BCVA) remained stable for the first four years of follow up, with a significant deterioration in BCVA thereafter. Baseline BCVA was a significant predictor of final BCVA (p0.001). The mean inactivation index was 0.38±0.23. Subretinal fluid (SRF) at presentation was significantly associated with decreased inactivation index (p 0.05). Worse baseline BCVA, SRF and pigment epithelium detachment (PED), male sex and younger patient age were associated with increased risk for recurrence after first inactivation (p 0.05).

CONCLUSION: The use of anti-VEGF agents in the treatment of AMD related PPCNV managed to preserve BCVA in the first four years of follow-up. Male sex, SRF and PED at presentation and baseline BCVA are associated with increased risk for PPCNV recurrence after the first inactivation, and should prompt careful follow up in these patients.