DME TREATMENT WITH RANIBIZUMAB IN THE REAL-WORLD
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Purpose: Optimal outcomes are achieved on randomized multicenter clinical trials, regarding the treatment of DME with ranibizumab. In clinical practice, treat-and-extend dosing regimens reduce the management and economic burdens of the treatment. With this study we examine the reality of a general hospital. Methods: Retrospective, observational study on a general hospital in Portugal. DME patients treated with ranibizumab between January 1 and December 31 of 2012 with a follow-up period of up to 1.5 years. Primary outcomes were change in visual acuity (ETDRS chart) and central macular thickness (OCT-SD). Data were analyzed using SPSS. Results: Sixty-four eyes were treated with up to 6 injections. Nearly 62% of eyes had undergone macular laser for at least 5 months before injections. Seventy-five percent of eyes without previous laser had moderate-to-severe vision loss and the same percentage of eyes previously treated with laser had mild-to-moderate vision loss. Gains in visual acuity and decrease of central macular thickness after injections were statistically significant after injection, p<0.01 and p<0.001 respectively. The correlation between these two variables wasn’t statistically significant. We had zero cases of endophthalmitis, 3 cases of elevated intraocular pressure and 2 cases of lamellar macular holes after injection. Conclusion: Ranibizumab is effective in the treatment of DME, but the average results on general hospitals are not as good as they can be due to less frequent patient monitoring and lower number of treatments.

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