Purpose: Optimal outcomes are achieved with monthly ranibizumab treatment for wAMD. In clinical practice as-needed or treat-and-extend dosing regimens have been adopted to reduce management burdens. AURA examines real-world utilization and related outcomes of ranibizumab.

Methods: Retrospective, international (Canada, France, Germany, Ireland, Italy, Netherlands, UK, Venezuela), observational study. Consecutive AMD patients prescribed ranibizumab and started treatment between January 1 and August 31, 2009, were included, with a follow-up period of up to 2.5 years. Primary outcomes were change in visual acuity and resource utilization. Data presented as descriptive statistics.

Results: Results for France and Germany are available. Mean change in visual acuity from baseline at Year 1 and 2 was 0.8 ± 17.3 and 0.1 ± 18.2 letters in France, and −0.4 ± 16.0 and −2.4 ± 17.7 letters, respectively, in Germany. Mean number of monitoring visits in Year 1 and 2 was 8.5 and 4.9 in France, and 7.8 and 3.1, respectively, in Germany. Mean number of treatment visits in Year 1 and 2 was 4.7 and 2.1 in France, and 4.5 and 1.4, respectively, in Germany. Mean number of injections in Year 1 and 2 was 4.4 and 1.9 in France, and 4.2 and 1.1, respectively, in Germany.

Conclusions: Treatment with ranibizumab results, on average, in poorer than expected visual outcomes due to less than monthly monitoring and low numbers of treatments per year. Although these results are better than untreated evolution of wAMD, consideration should be given to closer adherence to published protocols to improve visual outcomes.