## Visual Acuity Outcomes and Anti-VEGF Therapy Intensity in Diabetic Macular Oedema: A Real-World Analysis of 28,658 Patient Eyes

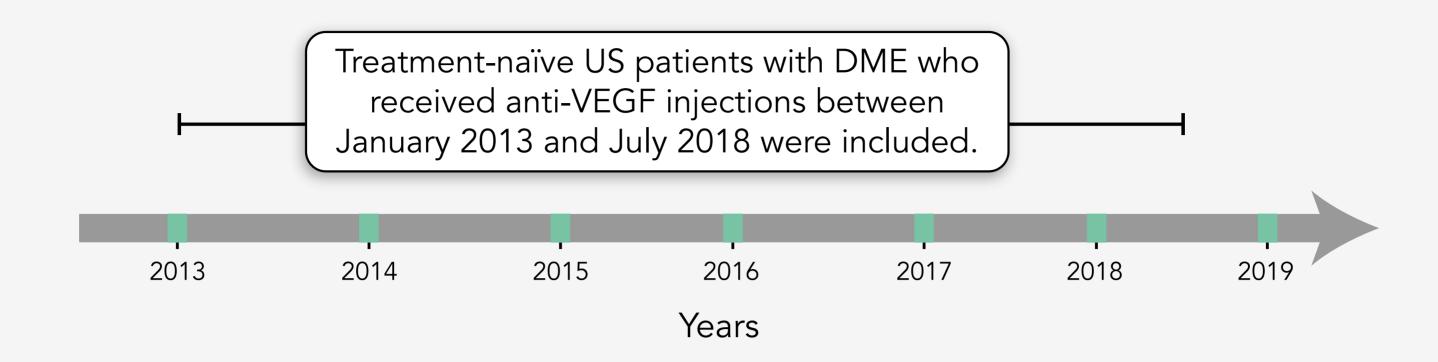
Ciulla TA, Pollack JS, Williams DF. *Br J Ophthalmol*. 2021;105:216-221. doi:10.1136/bjophthalmol-2020-315933

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The aim of this study was to assess visual acuity (VA) outcomes and antivascular endothelial growth factor (anti-VEGF) treatment intensity in diabetic macular edema (DME). Information from nearly 1.5 million unique patients and over 11 million encounters was utilized, comprised of a panel of 350 retina specialists within the United States in various locations, diversified by population density (65% urban, 32% suburban, and 3% rural) and geographic region (24% Mid-Atlantic, 24% Southeast, 20% West, 12% Southwest, 8% Northeast, 7% Great Lakes, and 4% North Central).



Retrospective analysis on 1-year VA outcomes and relationships with anti-VEGF treatment intensity was performed using a database of aggregated de-identified electronic medical records (Vestrum Health).

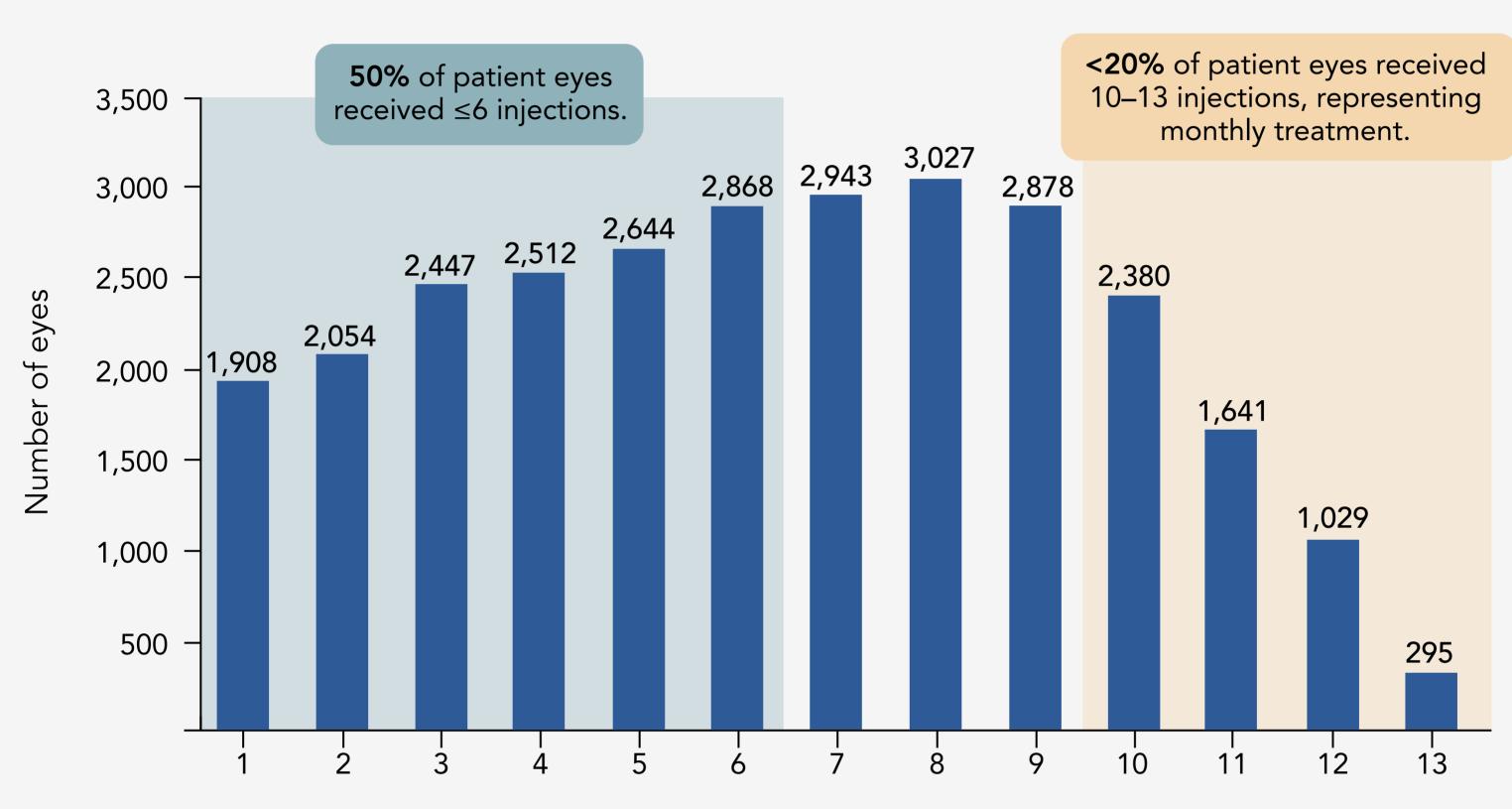


This study excluded patients with other retinal diagnoses. Gender, age, VA, and anti-VEGF medications were extracted from the database.



By year 1, patient eyes underwent a mean of 6.4 and a median of 6.0 anti-VEGF injections.

## Year 1 distribution of DME patient eyes stratified by number of anti-VEGF injections received

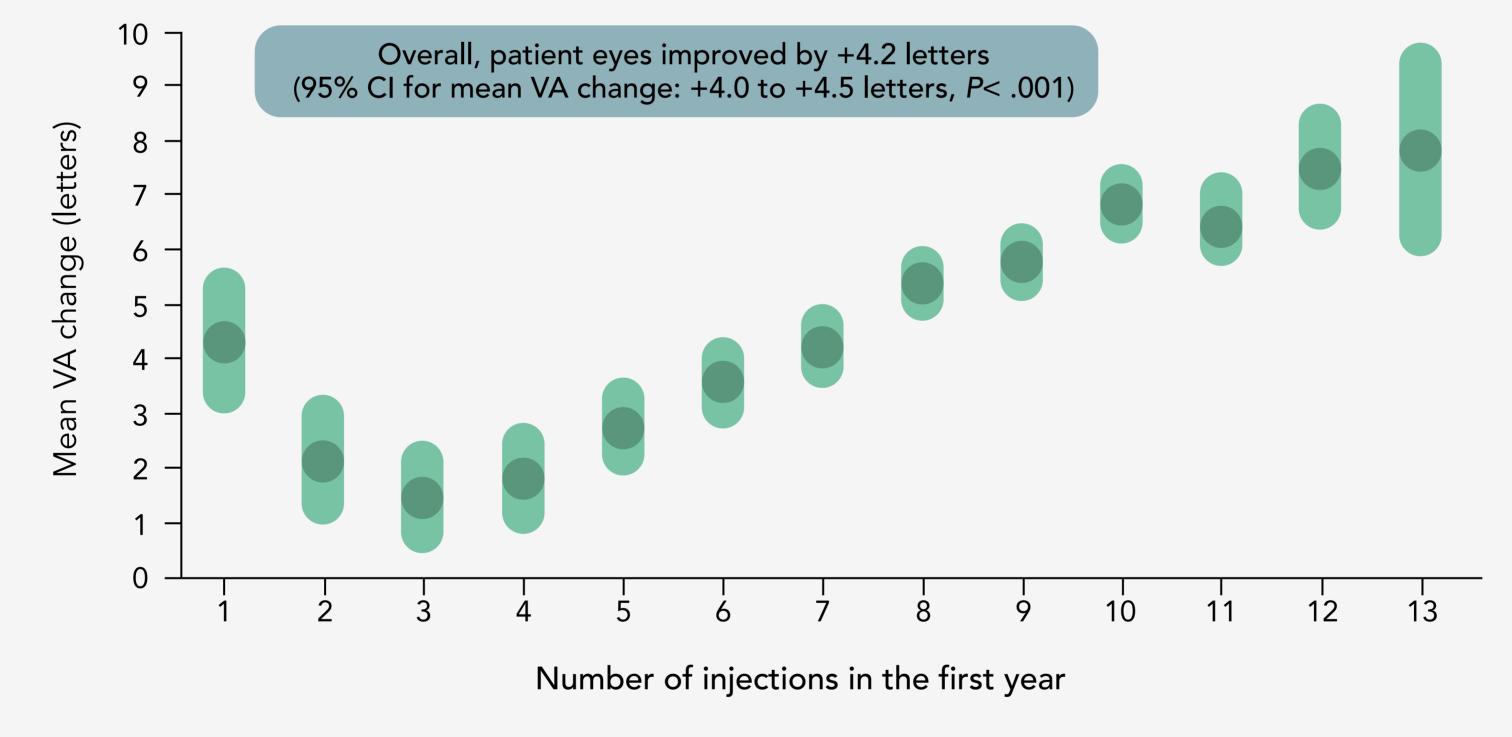




By year 1, mean letters gained showed a linear relationship with number of anti-VEGF injections, beyond 2 injections.

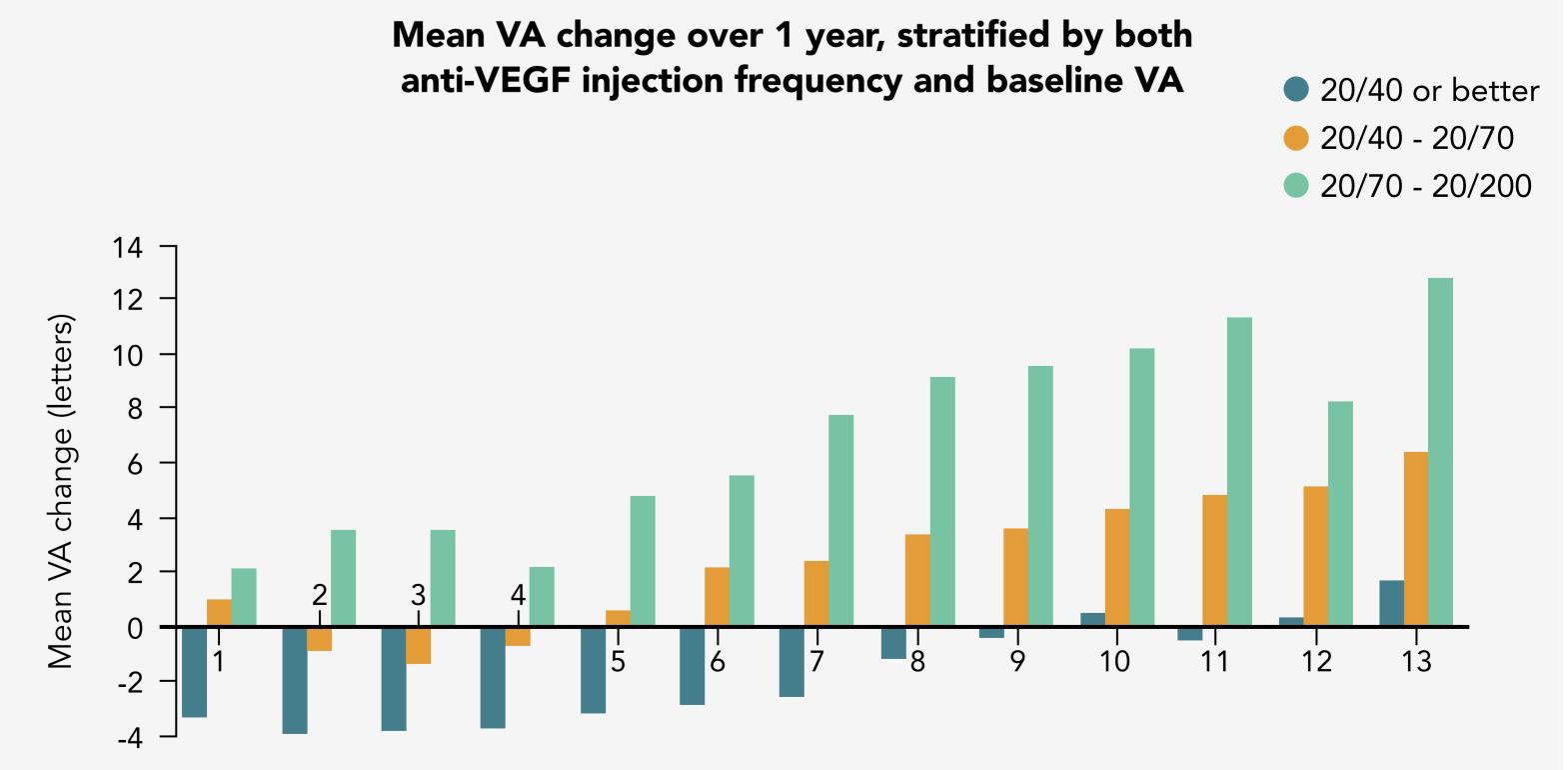
Number of injections in the first year

## Year 1 change in VA versus anti-VEGF injections administered to all DME patient eyes





The mean 1-year VA change tended to increase in patient eyes with both increased anti-VEGF injection frequency and decreased baseline VA, although there were ceiling effects related to baseline VA.



Number of injections in the first year



In clinical practice, patients with DME undergo fewer anti-VEGF injections and exhibit worse visual gains compared with patients in randomized clinical trials. Visual outcomes correlate with treatment intensity at 1 year, with ceiling effects related to baseline VA.