REAL WORLD TREATMENT OUTCOMES IN POLYPOIDAL CHOROIDAL VASCULOPATHY (PCV) IN A CAUCASIAN POPULATION OF BRITISH ETHNICITY.

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01. BACKGROUND

- Increased use of better imaging modalities alongside increased recognition of the condition has led to a rise in PCV diagnoses in the Caucasian population.
- A variety of options are available for treatment of PCV which have extensive studies in the Asian population.
- The response to these treatments is less well studied in the Caucasian population.

02. AIMS

- To study treatment responses in the largest, retrospective, real-world outcomes study of PCV in the Caucasian population.
- To compare real-world outcomes between different treatment groups. Anti-VEGF monotherapy vs Combination of anti-VEGF and PDT therapy vs Observation Only

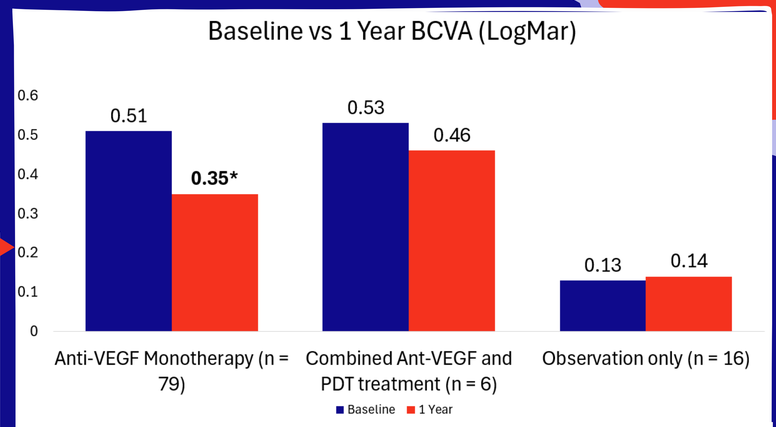
03. METHODOLOGY

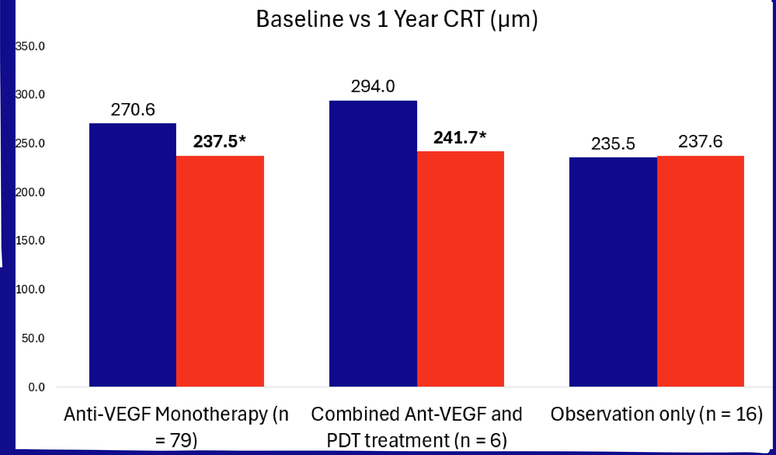
Retrospective review of 95 Caucasian patients in a single centre with diagnosis of PCV between 2013 and 2018 were included.

Best corrected visual acuity (BCVA), central retinal thickness (CRT), indocyanine green angiography (ICGA) characteristics, numbers and type of treatment were analysed at baseline and at 1 year.

04. RESULTS

- One hundred and one eyes included from 90 patients received either anti-VEGF injections (n = 79) alone or combination therapy with anti-VEGF and PDT (n = 6).
- A third untreated group was also observed (n = 16).
- Both treatment groups showed improvement in BCVA at 1 year and this was statistically significant in the monotherapy group with a mean gain of 8.3 letters ($p<0.001$).
- Mean CRT decreased in all treatment groups at twelve months and this change was significant ($p<0.01$)
- **Significant differences emboldened and asterixed on bar charts adjacent***





05. LIMITATIONS

- Patients were only offered Aflibercept or Ranibizumab as per NICE Guidelines. Outside these limits, Bevacizumab was offered.
- This group is therefore a mixed treatment group with patients on both different anti-VEGF therapies with non-standard dosing schedules.
- There was no clear protocol as to when, or if PDT, should be used.
- Our combination therapy group (n=6) was poorly powered to detect clinically significant outcomes.

06. CONCLUSIONS

- Our PCV study is one of the largest in a Caucasian population with predominant British ethnicity.
- Similarly to large studies in Asian populations, we have showed that Anti-VEGF monotherapy is effective in improving visual outcomes and CRT.
- We believe future prospective studies comparing anti-VEGF monotherapy and combination anti-VEGF/PDT therapy would be clinically informative.