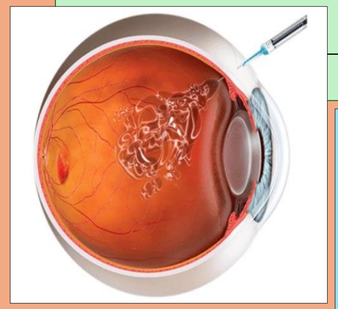
Real world use of Faricimab in treating nAMD patients previously treated with other anti VEGF in CTMUHB, Wales



The RCOphth Annual Congress
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Purpose

To assess efficacy and safety of intravitreal Faricimab in patients previously treated with Eylea or Lucentis or both in CTMUHB

Methods

Retrospective study of clinical notes of 32 eyes, (for the period of September 2022 till April 2024 = 86 weeks) diagnosed with nAMD.
Visual acuity, OCT parameters (CMT plus presence of SRF/ IRF) were assessed at the beginning of switching treatment to Faricimab and at each visit. Interval between injections and complications were also noted

Faricimab

FDA approved **bispecific antibody** treatment designed to block both VGEF and Ang-2. A key advantage of Vabysmo is its **more flexible dosing regimen**, extending the time between treatments and reducing the number of injections to the eye.

Reasons for switching treatment included:

1. unable to extend beyond four weeks (16)
2. unable to extend beyond six weeks (7)
3. persistent SRF (3)
4. not responding to treatment (4)
5. chronic SRF (1)
6. recurrence (1)

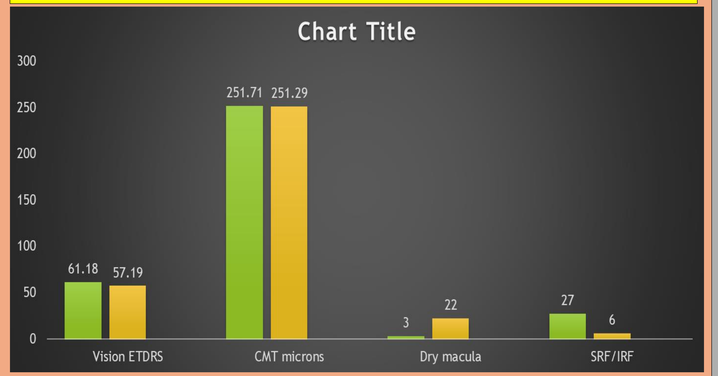
Diagnosis at start of treatment swap

31 eyes wetAMD
7 were occult nAMD
1 RAP/CSCR

At start of new treatment :

32 eyes in 28 patients were included
Mean age : 79.43 (Range 61-96) years
Mean visual acuity : 61.18 (Range 20-87) ETDRS letters
Mean CMT : 251.71 (Range 196-440) microns
Structural changes :
3 were dry
10 eyes had PED
27 had SRF/IRF/Both
3 had SHRM
1 had haemorrhage

Comparison of Va, CMT, OCT findings at start and at 86 weeks



At 86 weeks after commencement of treatment :

29 eyes were receiving treatment (1 patient died, 1 refused treatment midway, 1 did not show any active NVM and was diagnosed to have SHRM)
Mean visual acuity : 57.19 (Range 16-79) ETDRS
Mean CMT : 251.29 (Range 183-456) microns
Average number of injections : 10 (Range 5-15)
Structural changes
22 were dry
6 eyes had PED
6 had SRF/IRF/Both
4 had SHRM
2 had haemorrhage
5 had scarring/atrophy

Outcome and results at 86 weeks :

Outcome is comparable to results with treatment with intra vitreal Eylea with

- an average change in visual acuity of -0.62 ETDRS letters ;
- average CMT improvement of 0.42 microns ;
- structural drying up of macula after an average of 3.54 (Range 1-8) injections.
- Able to extend treatment in 73.68%
- Not of much benefit in 19.8%

Faricimab achieves non-inferior CST improvement compared to other anti-VEGF therapies, with extended dosing intervals reducing hospital appointments.
Our patients are being followed up for longer term outcome analysis.

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