REAL-WORLD EFFICACY, SAFETY, AND DURABILITY OF AFLIBERCEPT 8MG IN NEOVASCULAR AGE-RELATED MACULAR DEGENERATION

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Purpose

Neovascular age-related macular degeneration (nAMD) is a leading cause of vision loss, often requiring frequent anti-vascular endothelial growth factor (VEGF) injections. Limited real-world data exists on the effectiveness of aflibercept 8 mg, a higher-dose VEGF inhibitor, particularly in patients with suboptimal responses to prior treatments. We hypothesize that aflibercept 8 mg improves visual acuity, reduces central subfield thickness (CST), and resolves fluid biomarkers in both treatment-naive and pre-treated nAMD patients.

Methods

This retrospective, observational study analysed 45 eyes (34 treatment-naive, 11 pre-treated) treated with aflibercept 8 mg at a tertiary care centre from May to August 2024. Treatment-naive eyes received three loading doses at 4-week intervals, followed by a treat-and-extend protocol. Pretreated eyes were dose-matched without reloading. Primary outcomes included changes in best recorded visual acuity (BRVA), CST, and fluid resolution rates. Statistical analyses included paired two-tailed t-tests.

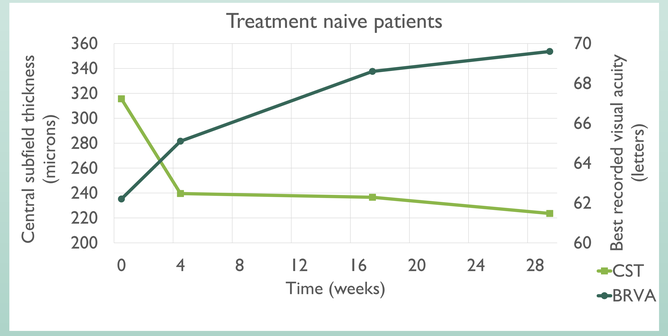
Results

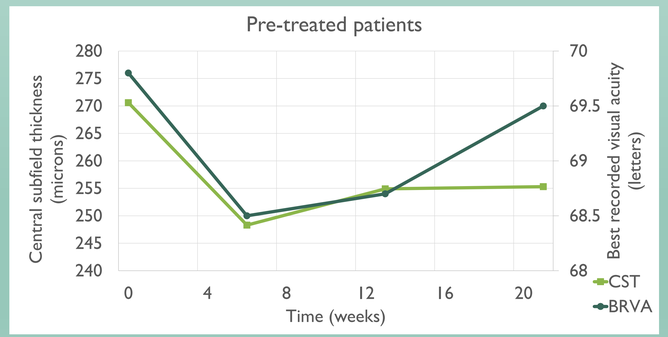
- Treatment-naive eyes demonstrated significant improvements in BRVA (7.4 ± 10.9 letters, $p<0.001$) and CST (-92.0 ± 91.4 µm, $p<0.001$) after three loading doses, with 68% achieving complete fluid resolution.
- Pre-treated eyes maintained BRVA (0.3 ± 7.8 letters, $p=0.910$) and showed non-significant CST reductions (-15.4 ± 42.1 µm, $p=0.254$), with 17% achieving fluid resolution after 21.0 weeks. No ocular or systemic complications were observed in either group.

Conclusion

Aflibercept 8 mg significantly improved visual and anatomical outcomes in treatment-naïve nAMD patients and stabilized outcomes in pre-treated patients with suboptimal prior responses.

Its favourable safety profile and extended dosing intervals highlight its potential to reduce treatment burden and improve real-world outcomes in nAMD management. Further studies are warranted to confirm these findings across diverse healthcare settings.





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Disclosures

Benjamin Scrivens: Commercial Relationship(s); none
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