

COMPARISON OF LANDMARK STUDIES VERSUS REAL-WORLD DATA OF FARICIMAB AND DMO OUTCOMES

INTRODUCTION

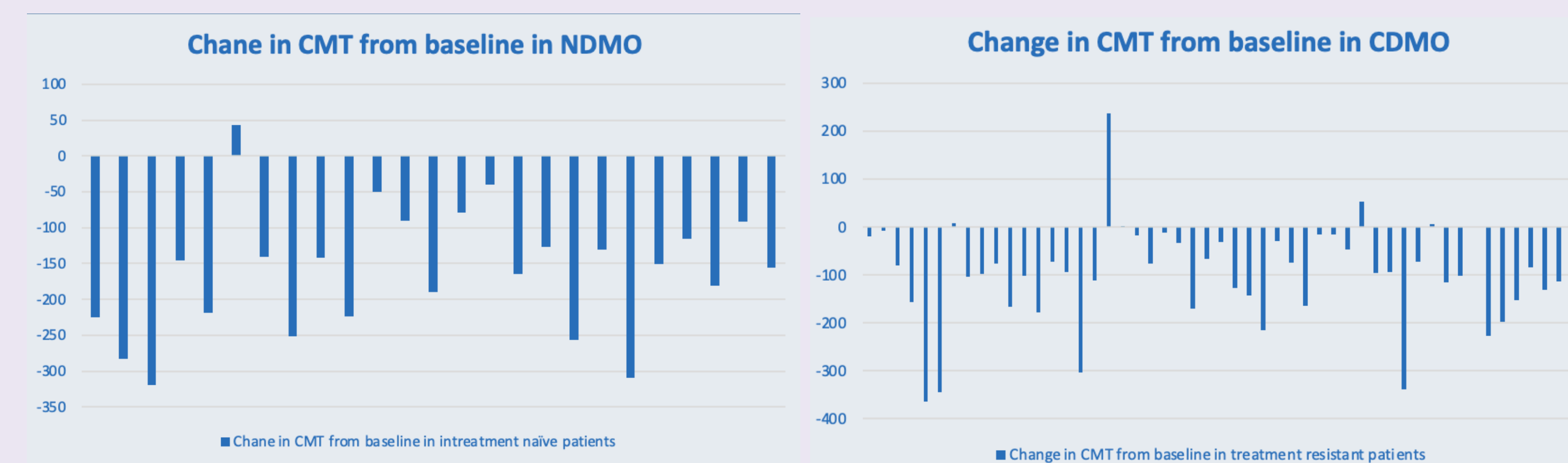
- Faricimab is a novel anti-VEGF medication to treat diabetic macular oedema (DMO).
- Its modified molecular structure has been shown to increase the duration between treatments intervals compared to aflibercept, demonstrated in the Yosemite and Rhine studies.

- Aim: To see if we could replicate the findings of recent landmark studies by collecting real-world data receiving Faricimab for DMO, focusing on visual Acuity, CMT and time between injection intervals**

RESULTS

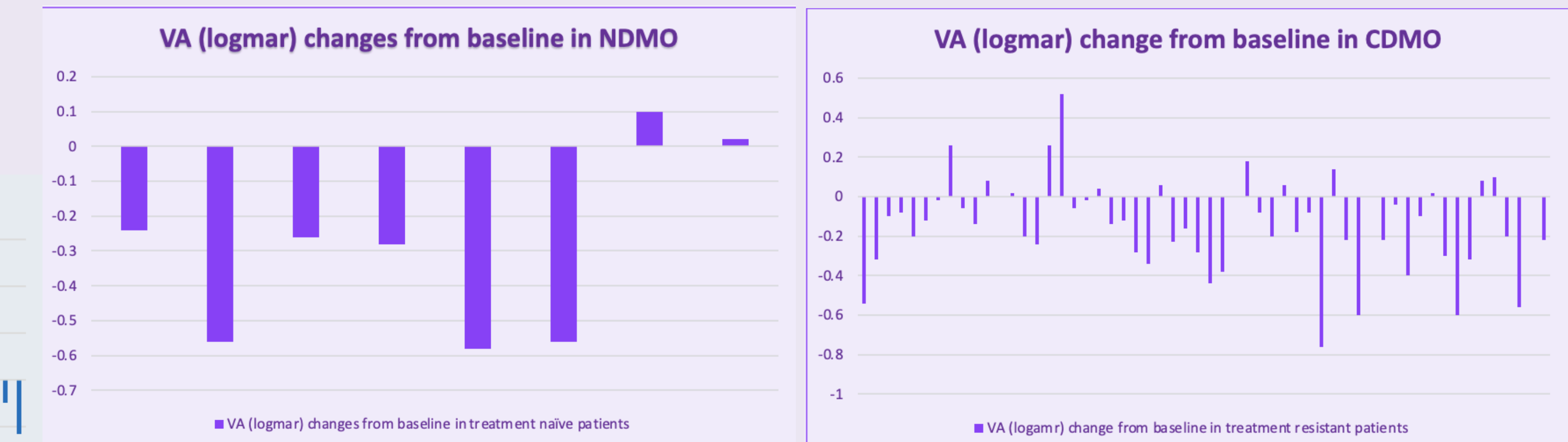
Central macular thickness

Noval finding: Real world data suggests CDMO CMT improves when switched from Eylea → Vabysmo



Visual acuity

Noval finding: Real world data suggests CDMO VA improves when switched from Eylea → Vabysmo



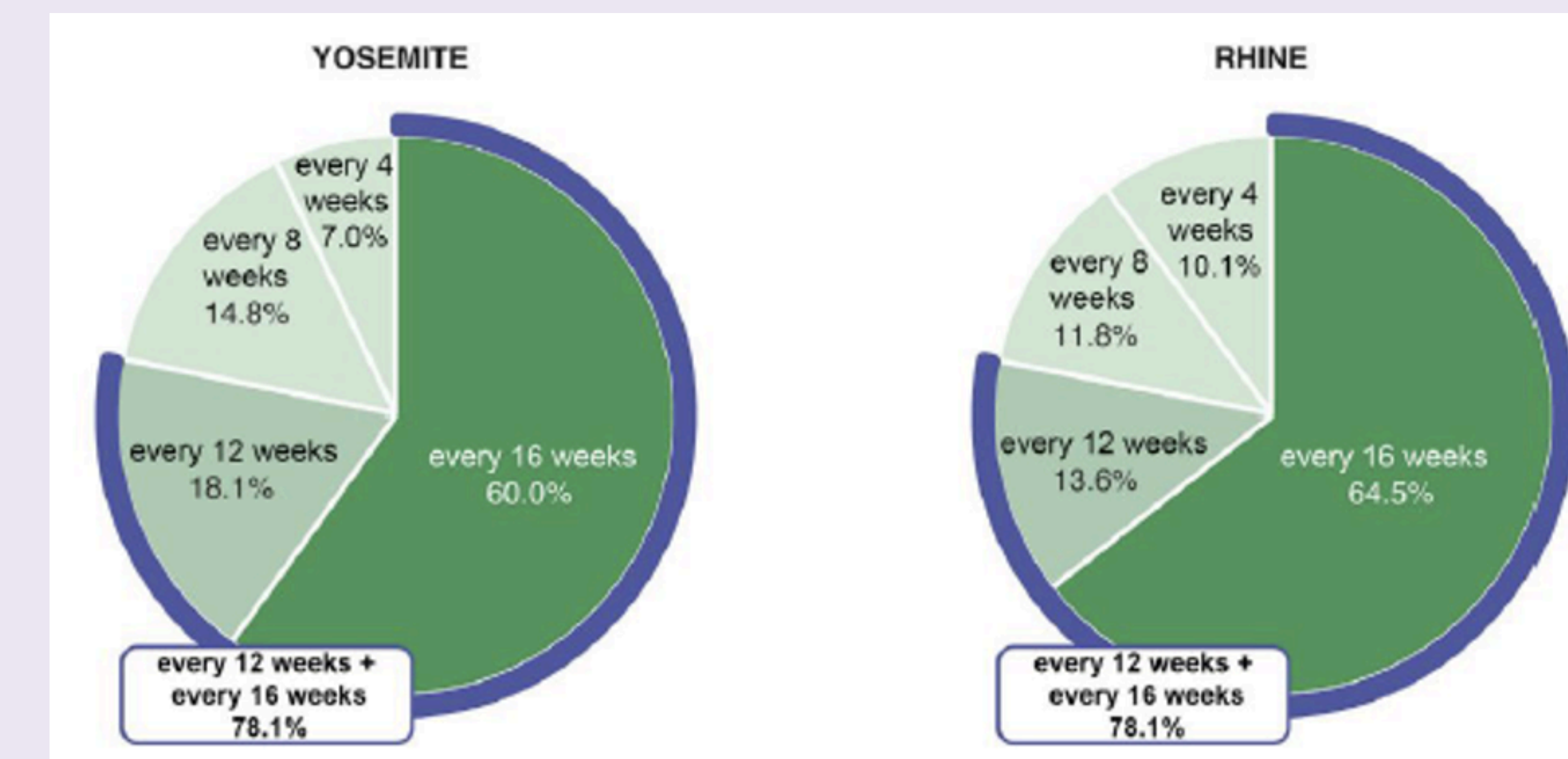
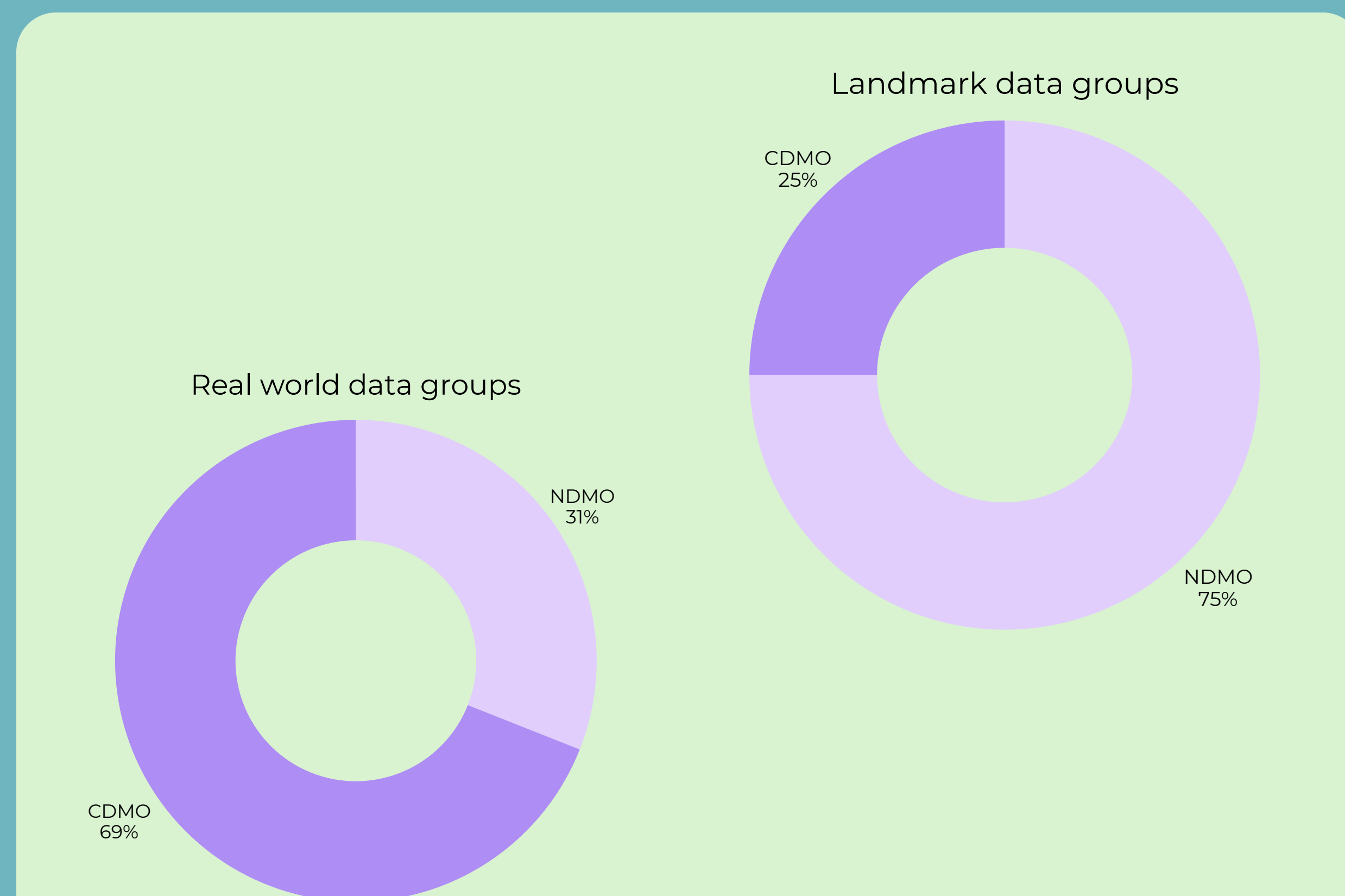
Injection interval

Comparable results: Once we factor in that our NDMO data includes the 4 x4 weekly loading injections

METHODS

- 65 patents and 81 eyes diagnosed with DMO were included in this prospective study over 18 months.
- We recorded; visual acuity (VA), central macular thickness (CMT) and interval between injections.
- Cohort further divided into 'New DMO' (NDMO), (no prior anti-VEGF/Ozurdex) and 'Chronic DMO' (CDMO), (prior anti-VEGF/Ozurdex with suboptimal outcome).

Comparison with landmark study



Real world

NDMO = 13.8 weeks

CDMO = 9.1 weeks

($p < 0.01$)

CONCLUSION

When comparing our real-world data to the landmark studies...

- We observed a similar VA improvement, however CMT improvement was not as large in our study
- CDMO Patients don't do as well in final VA and CMT
- Noval** = CDMO Patients appear to do better when switched from Eylea to Vabysmo
- Real World Data is a lot harder to make conclusive findings due to multiple variables