

Real-world 12 and 18-month outcomes of faricimab in patients previously treated for neovascular age-related macular degeneration

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PURPOSE

To evaluate real-world outcomes of faricimab in patients with neovascular age-related macular degeneration (nAMD) who responded suboptimally to other anti-VEGF treatment.

METHODS

Single-centre retrospective study of nAMD patients switched to faricimab between September and December 2022 with a minimum of 12 months' follow-up. Main outcomes were best-corrected visual acuity (BCVA), central subfield thickness (CST), and treatment intervals at 12 and 18 months.

RESULTS

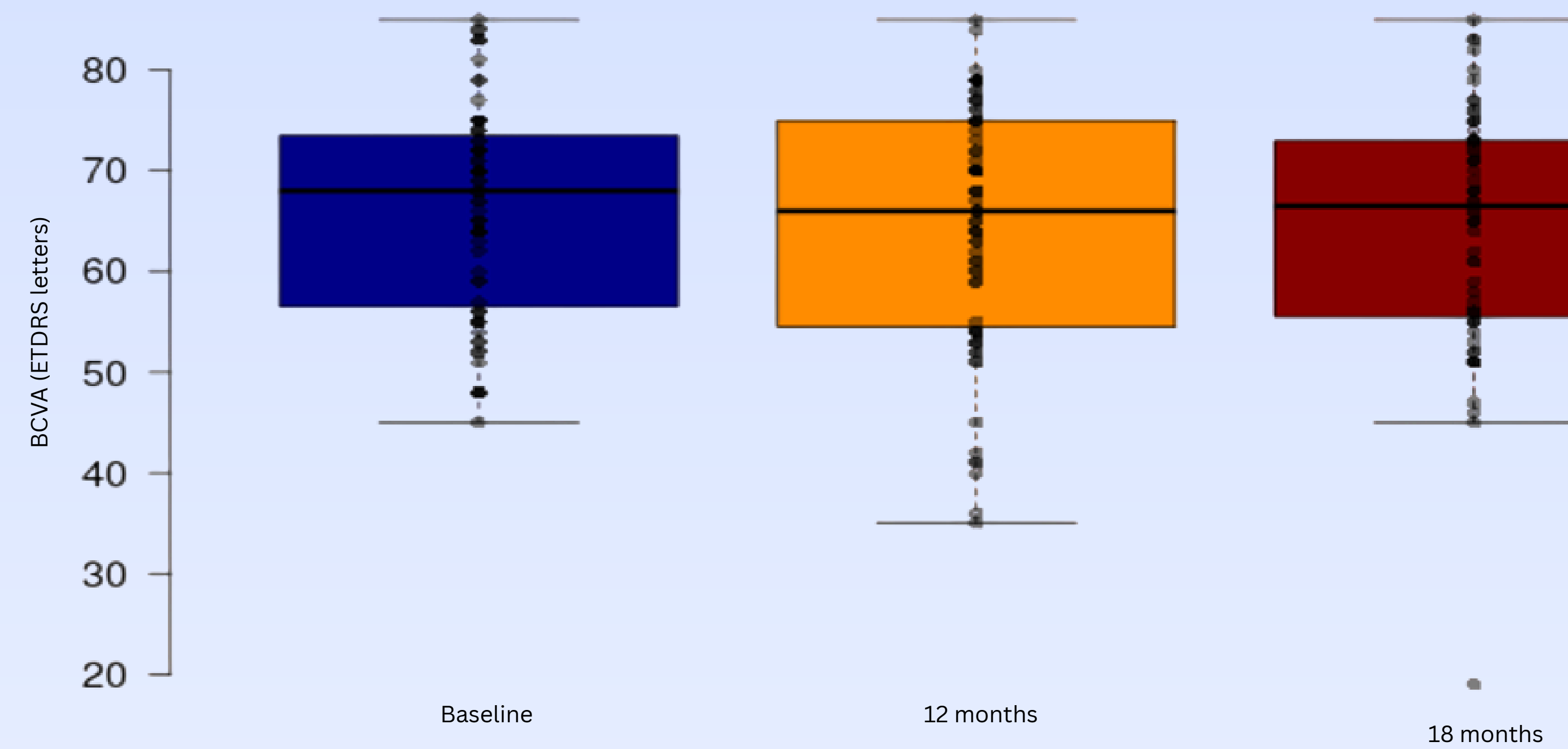
Data from 71 eyes (62 patients) and 60 eyes (54 patients) were analysed at 12 and 18 months, respectively. Mean age at baseline was 82.29 ± 7.04 years (range 65-98 years). 80.1% (50/62) of patients were female and all were Caucasian.

Patient demographics and baseline characteristics		
Number of patients	62	
Number of eyes	71	
Age, mean (SD), years	82.29 (7.04)	
Sex (female), n (%)	50 (80.1%)	
Right eye, n (%)	34 (47.9%)	
Type of anti-VEGF agent prior to switch, n (%)		
Aflibercept 2 mg		
Ranibizumab 0.5 mg		
	Mean (SD)	Median (IQR)
No. of injections of last anti-VEGF agent	23.08 (18.29)	20 (9-33.5)
Treatment interval prior to switch, weeks	5.18 (1.57)	4 (4-6)
BCVA, ETDRS letters	66.2 (10.3)	68 (57-74)
CST, microns	315.04 (79.26)	296 (270-339)

VEGF vascular endothelial growth factor, BCVA best-corrected visual acuity, ETDRS Early Treatment Diabetic Retinopathy Study, CST Central subfield thickness, SD standard deviation, IQR interquartile range.

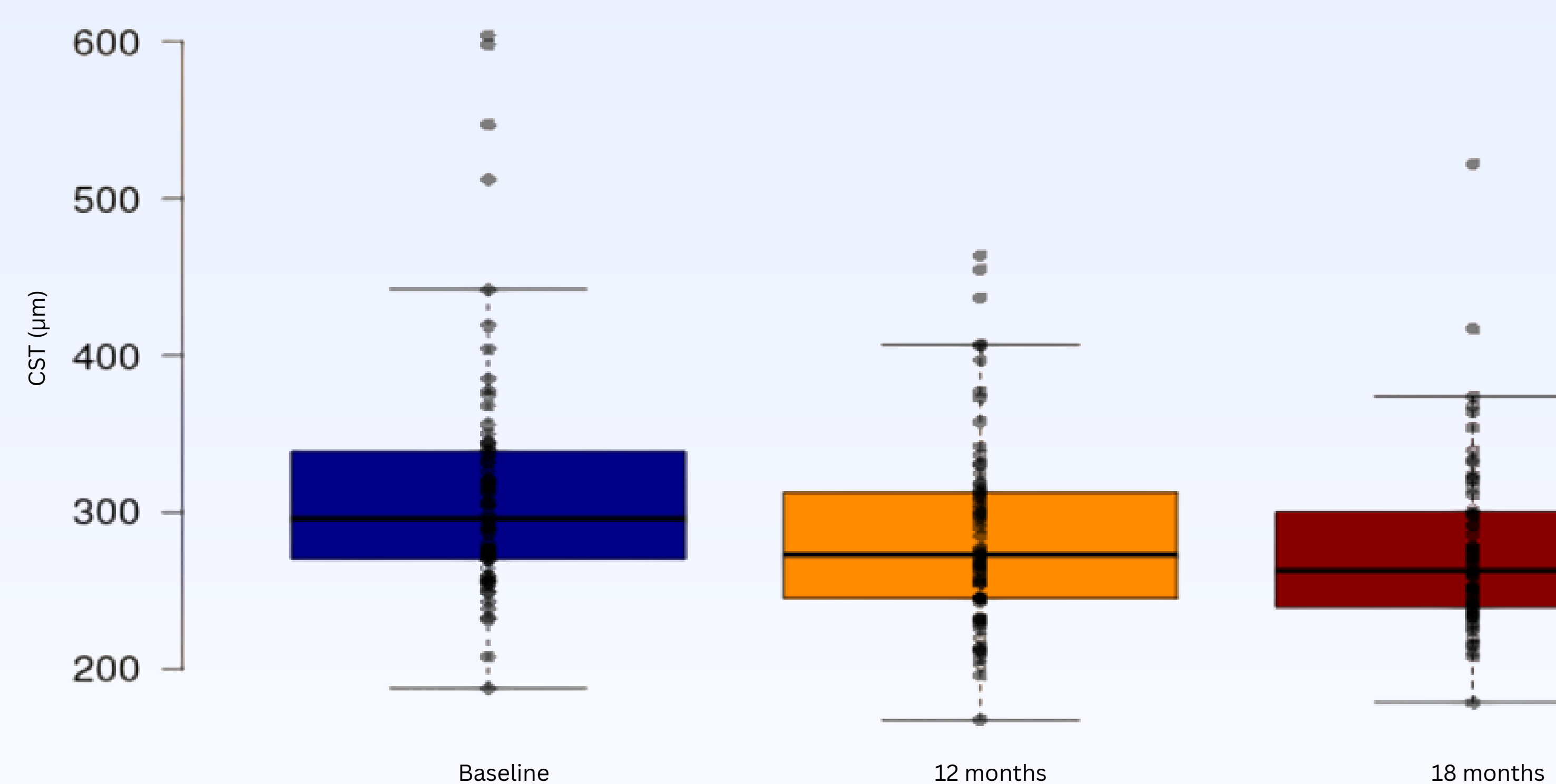
RESULTS

Median BCVA over time



Median BCVA changed from 68 ETDRS letters (IQR 57-74) at baseline to 66 letters (IQR 55-75, $p = 0.119$) and 67 letters (IQR 56-73, $p = 0.009$) at 12 and 18 months, respectively.

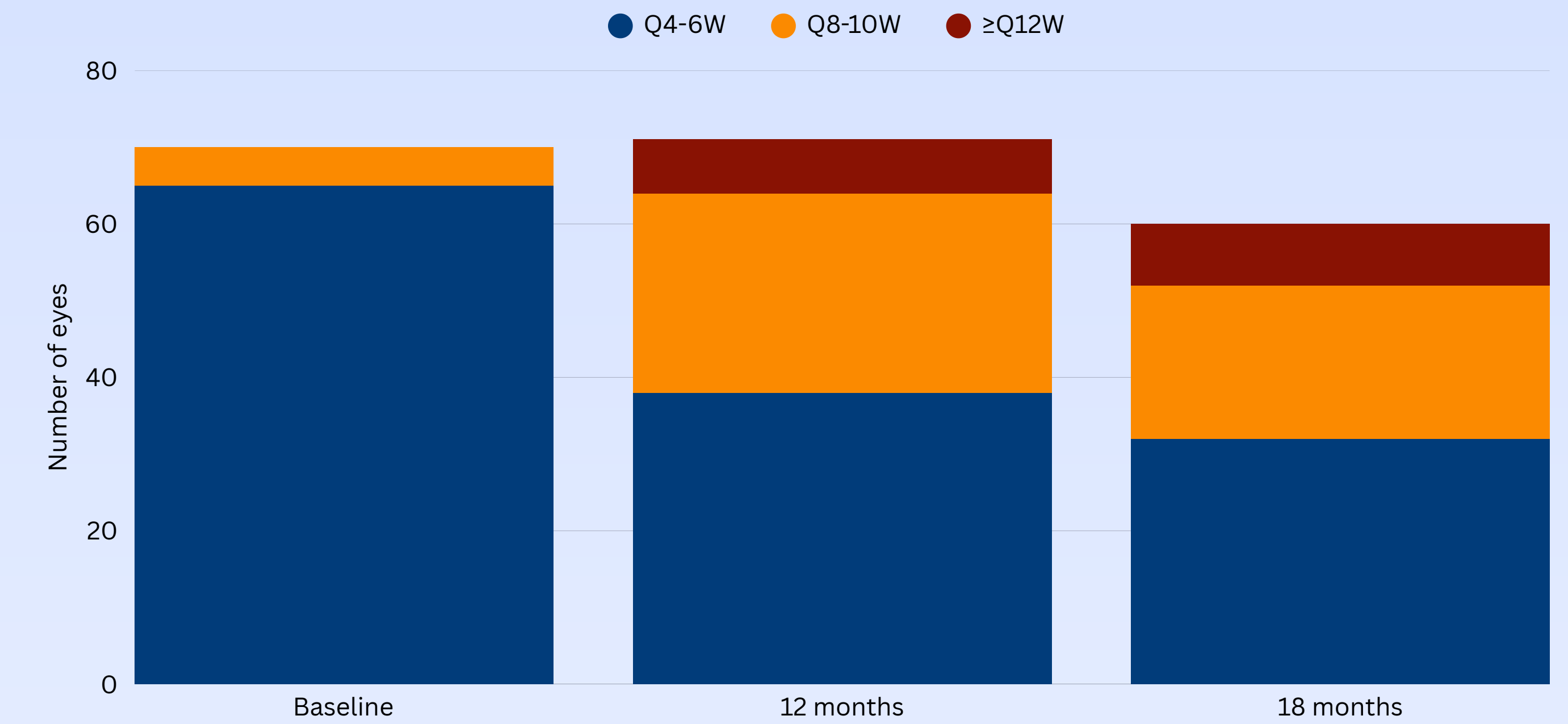
Median CST over time



Median CST changed from 296 µm (IQR 270-339) at baseline to 273 µm (IQR 245-313, $p = 0.0001$) and 263 µm (IQR 240-300, $p < 0.000$) at 12 and 18 months, respectively.

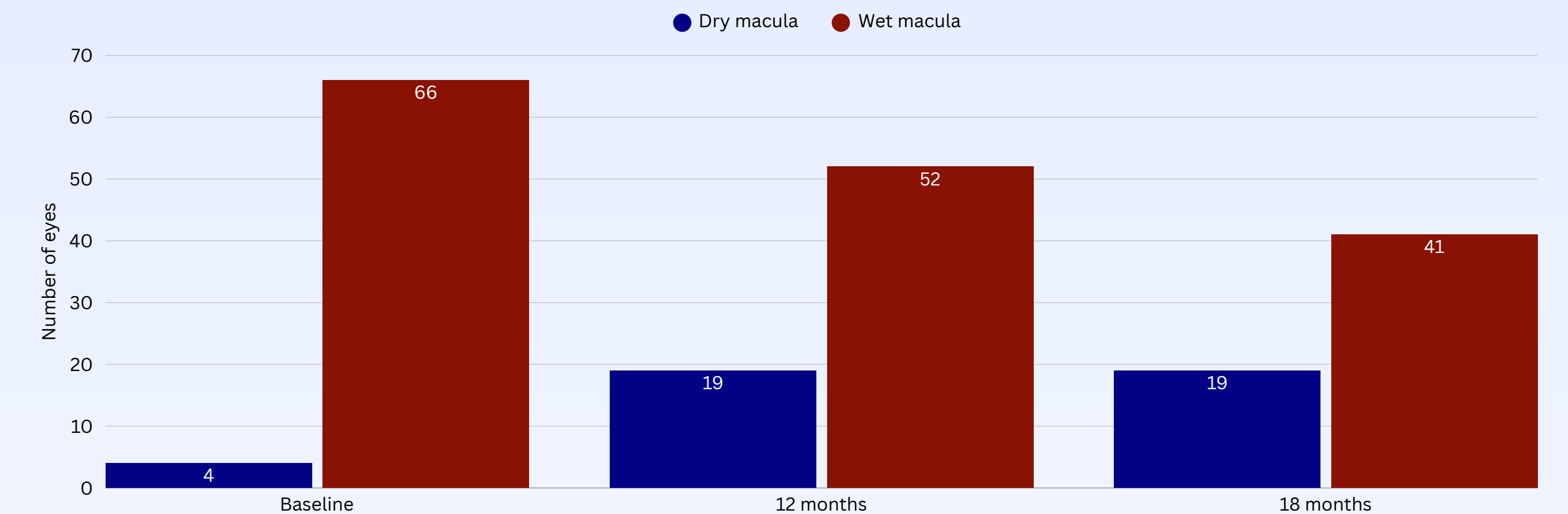
RESULTS

Distribution of treatment intervals



12 months: 28.2% (20/71) ≥4-week extension; 46.5% (33/71) ≥Q8W; 9.9% (7/71) ≥Q12W. 18 months: 36.7% (22/60) ≥4-week extension; 46.7% (28/60) ≥Q8W; 13.3% (8/60) ≥Q12W.

Macular status



SAFETY PROFILE

There were no cases of endophthalmitis, retinal vasculitis, or systemic side effects associated with faricimab after 787 intravitreal injections in 136 eyes receiving at least one injection during the study period. One case each of hypertensive anterior uveitis and post-injection hypotony occurred, both successfully managed with medical therapy.

CONCLUSION

Switching to faricimab for nAMD achieved stable vision, improved anatomical outcomes and extended treatment intervals over 18 months.