

ANTI-ANGIOGEN USE IN A PATIENT WITH OCCULT MEMBRANE AND GOOD VISION- CASE REPORT

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PURPOSE

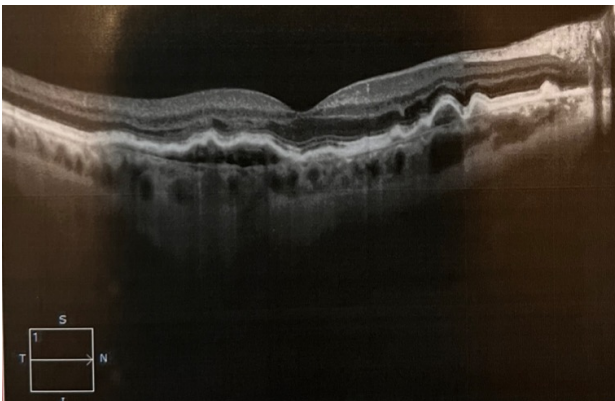
TO DESCRIBE THE CASE OF A DECISION TO USE ANTI-ANGIOGENICS IN A PATIENT WITH AN OCCULT NEOVASCULAR MEMBRANE AND SATISFACTORY VISION

METHODS

V.A.C., 61 years old, sought routine ophthalmic care, referring to the use of lutein due to a previous diagnosis of age-related macular degeneration (AMD). On examination, she had visual acuity according to the Snellen chart with a correction of 20/20 in both eyes. Biomicroscopy and Goldmann's applanation tonometry were normal in both eyes. Retinal mapping showed drusen in the macular region of both eyes.

Macular optical coherence tomography (OCT) in the right eye showed a preserved vitreoretinal interface, foveal thickness of 310 microns, internal layers without changes, junctions of the internal and external segments of the photoreceptors with alterations, detachment of the drusenoid pigment epithelium with an irregular contour suggestive of a neovascular membrane and subretinal fluid, suggestive of exudative AMD. In the left eye; preserved vitreoretinal interface, physiological foveal depression, foveal thickness of 270 microns, junction of the inner and outer segments of the photoreceptors without alterations and detachment of the drusenoid pigment epithelium suggestive of dry AMD.

Optical coherence tomography angiography (OCTA) showed a subretinal neovascular membrane in the right eye. At this point, expectant management and periodic follow-up were indicated due to the patient's satisfactory visual acuity. On her return, six months after, her vision worsened, with visual acuity of 20/25 in the right eye and 20/20 in the left eye.

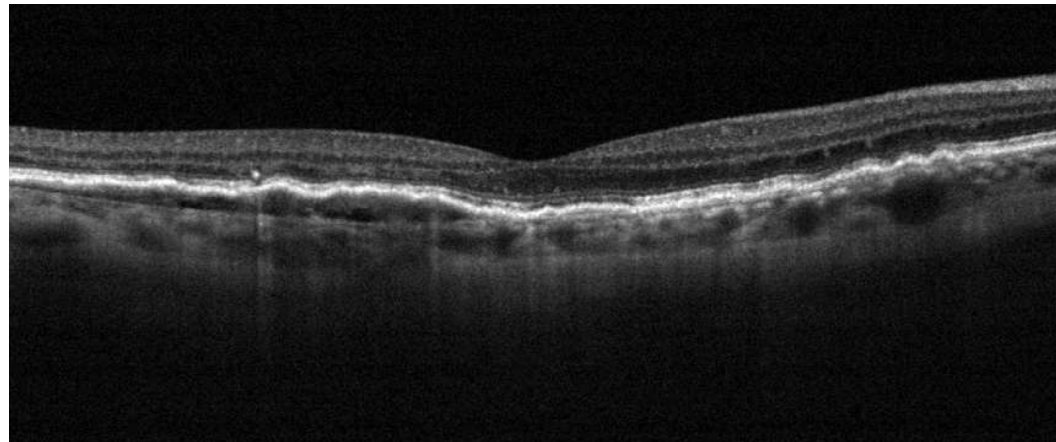


RESULTS

A three-dose cycle of intravitreal injection with anti-angiogen Aflibercept in the right eye was indicated, starting in May 2022. After the three doses, OCT in the right eye showed a preserved vitreoretinal interface, physiological foveal depression, foveal thickness of 250 microns, inner and outer layers with alterations, junctions of the inner and outer segments of the photoreceptors with hyporeflectivity due to subretinal fluid and detachments of the drusenoid and serous pigment epithelium, compatible with exudative AMD in this eye. Examination of the left eye remained identical to that described above.

A further cycle with three intravitreal injections in the right eye was indicated. After the two cycles, visual acuity improved in the right eye, returning to visual acuity of 20/20 in both eyes.

The patient was followed up in the retina department without any complaints, with best corrected vision of 20/20 in both eyes and soft drusen mapping in both eyes. OCT-A in March 2023 showed no choroidal neovascularization in both eyes.



DISCUSSION

The patient under analysis in this case proved to be a challenging case because she was young, asymptomatic and had 0.8 decimal vision. The decision to treat with intravitreal therapy was made due to the decrease in visual acuity over a short period of time. Full vision was restored and anatomical improvement was seen on imaging tests.