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Comparison of the one-year outcomes of conbercept therapy between two different angiographic subtypes of polypoidal choroidal vasculopathy

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Objectives: To compare the outcomes of conbercept therapy between two different angiographic subtypes of polypoidal choroidal vasculopathy (PCV)

Methods: Fifty-eight patients of PCV were classified into two phenotypes according to indocyanine green angiography (ICGA). In type-1, both feeder and draining vessels are visible on ICGA and network vessels are numerous. In type-2, neither feeder nor draining vessels are detectable and the number of network vessels is small. The patients were treated with intravitreal conbercept (IVC) for 3 months. Additional IVC was given at subsequent monthly visits, if needed. The patients were followed-up for 12 months and changes in mean BCVA, central retinal thickness (CRT), serous retinal detachment (SRD), hemorrhage and number of polypoidal lesions were evaluated.

Results: The mean BCVA in type-2 PCV (15.92 ± 9.76 to 14.10 ± 9.07) achieved a significantly greater improvement in than the type-1 (14.10 ± 9.07) at month 12 ($p < 0.01$). And the mean CRT decrease was numerically greater in type-2 (120.44 ± 73.81) compared with type-1 (106.48 ± 72.33) at month 6 ($p < 0.01$) and greater in type-2 (130.21 ± 76.28) compared with type-1 (111.67 ± 79.57) at month 9 ($p < 0.01$). There was no significant difference between the two groups for the decrease in SRF thickness, PED height and regression of polyps from month 3 to 12 ($p > 0.05$).

Conclusions: Classification systems for PCV will show differences in presentation, natural history or response to anti-VEGF treatment and might therefore provide a new key to the choice of treatment of the disease.

Biography

Yong Cheng has completed his MD from Peking University. He specializes in vitreo-retinal disorders that require either medical or surgical treatment. He has taken part in lots of multicenter research and published more than 10 papers in reputed journals.

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