President : Dr Chris Gouws / Secretary : Dr Rian Viljoen / Treasurer : Dr Jaco Maartens
Email: savrssecretary@gmail.com Fax 0866 188 640

26 February 2019

TREATMENT INTERVALS FOR INTRAVITREAL INJECTIONS

It has come to the attention of the Academic Advisory Committee (AAC) of the South African Vitreoretinal Society (SAVRS) that the four week interval between intravitreal injections that is used in the treatment of neovascular age related macular degeneration (AMD) needs clarification.

The treatment protocols are based on the original randomized controlled trials that were performed for the treatment of AMD. These were conducted over two year periods in most instances. In these trials the original study protocol found that the agents worked best with a four week interval. However, it obviously needs to be pointed out that even in these two year trials with a regular four week interval, it was impossible for both the doctor and the patient to be available exactly at this particular time period on every occasion. In these randomized controlled the trials (RCTs), the treatment dates were set up with a window period. That means that within a window period of usually a week at the four week interval, the patient could be treated in the RCTs. This is to allow for the treatment to be as close as possible to the original scientific protocol and for the real world experience of logistical issues, which may include anything from patient illness, to doctor illness, or transport issues etc. These logistical issues are numerous and had to be taken into account in the original RCTs, which are level one evidence for the use of intravitreal anti-VEGF agents in AMD and other conditions requiring these agents (eg. diabetic retinopathy, retinal vein occlusions).

The logistical issues around giving the injections four weeks apart need to be understood by the funders. A simple common sense approach is needed when the exact four week period is not followed.

The discussion, of course, is different after the initial loading dose which starts with a monthly dose repeated over a minimum of three months. The SAVRS advises following a treat and extend regime following a successful loading dose, in order to reduce the number of injections and the treatment load on both the patient and the doctor, and of course the cost.

Yours sincerely

JAMES ACTON
For the AAC of the SAVRS