( ) R1 ( ) R2 ( ) R3 (X) PG0 ( ) PG1 ( ) Estagiário ( ) Tecnólogo ( ) PIBIC

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Photodynamic Therapy (PDT) for Predominantly classic subfoveal Neovascular Membrane in age related macular degeneration.

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Purpose: To evaluate the safety and efficacy of verteporfin in treating classic or predominantly classic subfoveal neovascular membrane in age-related macular degeneration (ARMD).

Material and Methods: Thirty-one eyes of thirty-one patients presenting subfoveal choroidal neovascular membranes (CNV) due to ARMD were screened for the VAM protocol (Verteporfin in Age-related Macular Degeneration) at UNIFESP-EPM. The inclusion criteria were: older than 55 years, visual acuity between or equal to 20/40 and 20/200, size of CNV no greater than 5.4 mm and the CNV should be recent and classic or predominantly classic on fluoresce in angiography, due to ARMD. Exclusion criteria were: patients with porphyries or with Know allergies to porphyries; patients with other ocular conditions that could affect the visual acuity such as esudative diabetic retinopathy, patients with recent (Less than two months) intra ocular surgery y for less than 2 months. Nine eyes from nine patients were excluded because CNV neither were not classic or predominantly classic nor did they have active exudation. Patient's age ranged from 61 to 85 years (median=72.9 yo), eleven were male and eleven were female. Total of 12 OD and 10 OS were included. The initial visual acuity ranged from 20/60 to 20/200 (median=20/1700 and the visual acuity at 3 month follow-up ranged from 20/50 to 10/200 (median=20/195). The dosage of verteporfin (Visudyne Ciba Vision) was 6 mg/m2 of body surface and diode laser at 810 mm (Zeiss Visulink PDT Diode Adapter) was applied 15 minutes after intravenous infusion of verteporfin diluted in 30 ml of dextrose 5%. The duration of application was 83 seconds.

Results: A preliminary results are presented because only 15 patients returned to 3 months follow-up and all of them except one were retreated. Had a stable membrane ad the membrane stable and was scheduled for 6 months follow-up. Of these 15 patients, 7 eyes had their visual acuity improved (46.6%). 2 eyes had the same visual acuity (13.3%) and 6 eyes worsened (40%). The size of CNV lesions ranged from 2.3 to 5.4 mm (median 3.7mm) at the entry of study and size of the active leaking CNV after 3 months ranged from 0.8 mm to 5.3 mm (median=3.2mm). No ocular or months ranged from 0.8mm to 5.3mm

(median=3.2mm). No ocular or systemic adverse reactions were observed and the treatment was well tolerated.

Conclusion: Photodynamic therapy with verteporfin seems to be effective in selected cases of classic or predominantly classic CNV in ARMD and safe in the recommended dosage.