

R1 R2 R3 PG0 PG1 Estagiário Tecnólogo PIBIC

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Service (sector)

Retina and Vitreous

Nº CEP

Clinical and Angiographer Classifications of Choroidal Neovascularizations in Patients Referred to UNIFESP/EPM

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Purpose: A clinical and angiographer classifications of patients referred to UNIFESP with a diagnosis of choroidal neovascularization (CNV).

Methods: The patients were referred to the Vitreous and Retina Section of the Department of Ophthalmology of UNIFESP by general ophthalmologists with a diagnosis of CNV. They were submitted to complete ophthalmologic exam including indirect ophthalmoscope and funds biomicroscopy. Color photographs and fluoresce in angiograms were taken. The classifications were based on Macular Photocoagulation Study (MPS) guidelines for interpreting angiograms.

Results: Fifty eyes of 50 patients with diagnosis of CNV were analyzed. The patients were divided in to 4 groups according to clinical and angiographer patterns of the lesions: Group I – 100% classic (classic) – 3 patients (6%), Group II – 50% < classic < 100% (predominantly classic) – 7 patients (14%), Group III – 0% < classic < 50% (minimally classic) – 11 patients (22%), Group IV – 0% classic (no classic) – 24 patients (48%). The causes of CNV were: Age Related Macular Degenerations (ARMD) in 41 patients; Other Causes (angioid streaks; serpiginous shoroiditis; inflammatory-presumed ocular histoplasmosis) in 5 patients; idiopathic in 4 patients. All the membranes except one were subfoveal.

Conclusion: Since 1989 all angiograms of new enrolled patients in the clinical trials were classified using this same system with minimal modifications. The stand art interpretation of fluoresce in angiograms was created to classify CNV secondary to ARMD but many authors use this method to study CNV in pathologic myopia, ocular histoplasmosis syndrome, angioid streaks and idiopathic causes. Using this system we could classify a great part of patients with CNV and propose to then, in some cases, option for treatment.