

9 months results of intravitreal bevacizumab injection for the treatment of macular edema secondary to branch retinal vein occlusion

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Background:

To evaluate the long-term functional and anatomical effectiveness of intravitreal bevacizumab treatment in eyes with macular edema due to branch retinal vein occlusion (BRVO).

Methods:

In this retrospective interventional case series, 59 consecutive, previously untreated eyes with macular edema were treated with intravitreal bevacizumab (1.25 mg) injections (IVB) and followed for 9 months. The main outcome measures were visual acuity (VA) and central retinal thickness (CRT) by optical coherent tomography (OCT).

Effectiveness / Safety:

The mean corrected visual acuity (MCVA) before IVB was 0.32 and MCVA after IVB was 0.59 from baseline at 9 months. The mean central retinal thickness (MCRT) before IVB was 606 micrometers and the MCRT after IVB was 291 micrometers from baseline at 9 months. The mean number of re-injections was 1.9 during the 9 months of follow-up. Following IVB, VA increased in 51 eyes, decreased in 3 and remained the same in 5 eyes. Epiretinal membrane developed in 4 eyes and pars plana vitrectomy and removal of epiretinal membrane was performed in 2 eyes. Mild anterior uveitis occurred in 3 eyes. Endophthalmitis did not occur in any patient.

Take home message:

Intravitreal bevacizumab injection is a safe and effective treatment in patients with macular edema secondary to BRVO. But the main limitation is a high recurrence rate, so re-injections are necessary to maintain this effect.