

Combination Pegaptanib and Photodynamic Therapy for Subfoveal Choroidal Neovascularization Secondary to Age-related Macular Degeneration

ThucAnh Thi Ho, MD (Chicago, IL), Pauline Townsend Merrill, MD (Chicago, IL)

PURPOSE

To evaluate the role of combined intravitreal pegaptanib and photodynamic therapy with verteporfin (PDT) in the management of subfoveal choroidal neovascularization (CNV) secondary to age-related macular degeneration (AMD).

METHODS

We performed a retrospective review on 11 eyes of 11 patients treated with combined pegaptanib and PDT. Pre-treatment and post-treatment Snellen visual acuity (VA), fluorescein angiography (FA), and optical coherence tomography (OCT) were compared.

RESULTS

Pegaptanib was administered a mean of 8 days prior to PDT. All CNV lesions were subfoveal: 8 classic, 2 occult, and 1 minimally classic. The mean greatest linear diameter was 3 mm. The pre-treatment VA ranged from 20/50 to counting fingers. All but one eye had prior treatment: 5 with PDT alone, 2 with pegaptanib alone, 2 with combination PDT and triamcinolone acetonide, 1 with PDT and pegaptanib given 8 months apart. At the last follow-up visit (mean 11 weeks), all eyes remained within 1 line of pre-treatment VA. The central macular thickness on OCT decreased from a mean of 258 μ m pre-treatment to 203 μ m post-treatment. At last follow-up, only one of the 11 eyes required further treatment: a second combination pegaptanib and PDT application at week 15. Decreased or absence of leakage was observed on FA at last follow-up of the remaining 10 eyes. No ocular or systemic complications were observed post-treatment in any eye.

CONCLUSION

Preliminary results suggest that combination anti-vascular endothelial growth factor therapy and PDT may stabilize subfoveal CNV with fewer treatment applications.