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Consistency of Effect of Ranibizumab at 2 Doses on Contrast Sensitivity in 3 Phase III and IIIB Studies of Patients with CNV Secondary to AMD

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PURPOSE
To examine the consistency of effect of intravitreal ranibizumab on contrast sensitivity in three populations of patients with different subtypes of choroidal neovascular lesions: predominantly classic, minimally classic and occult lesions with no classic component.

METHODS
The efficacy of monthly intravitreal injections of ranibizumab 0.3mg and 0.5mg has been evaluated in two pivotal, Phase III, randomized, multicenter, doublemasked, controlled studies of patients with minimally classic or occult lesions (MARINA study, n=716) and predominantly classic lesions (ANCHOR study, n=423). Efficacy of the same doses of ranibizumab administered quarterly after three initial monthly doses has also been evaluated in one Phase IIIb study in the same populations of patients with different subtypes of choroidal neovascular lesions (PIER study, n=184).

RESULTS
Two year results are available for MARINA, and one-year results are available for ANCHOR. The mean change from baseline in contrast sensitivity at 12 months as measured by the number of letters read correctly on the Pelli-Robson chart was compared between each of the ranibizumab groups and the control group in all 3 studies. At the month-12 timepoint monthly administration of both doses of ranibizumab increased contrast sensitivity by a mean of approximately 2 letters ($p<0.0001$) in the MARINA study and by 3 and 4 letters, respectively (both $p<0.0001$), in the 0.3mg or 0.5mg ranibizumab treatment groups in the ANCHOR study. In striking contrast, contrast sensitivity in the sham group in MARINA and verteporfin PDT group in ANCHOR decreased by a mean of 3 letters at 12 months.

CONCLUSION
Results from these three studies, in a total of 1,323 patients, demonstrate that ranibizumab 0.3mg and 0.5mg significantly improved contrast sensitivity at 12 months in all CNV lesion types when assessed using Pelli-Robson charts. Two-year data from MARINA will be presented.

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