

Abstract 133

FIRST REAL-LIVE DATA ON EFFICACY AND SAFETY OF FARICIMAB IN NEOVASCULAR AGE-RELATED MACULAR DEGENERATION (NAMD) AND DIABETIC MACULAR EDEMA (DME) IN SWITZERLAND

Oral

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Purpose:

To evaluate efficacy and safety of Faricimab (Roche Vabysmo®) under real life conditions in patients with persistent activity of neovascular AMD or DME after switch from anti-VEGF treatment with Aflibercept (Bayer Eylea®) or Ranibizumab (Novartis Lucentis®).

Methods:

Single-center, retrospective, clinical study conducted at the Department of Ophthalmology, University Hospital Zurich. Patients that had been treated with Faricimab from 07/2022 until 09/2022 were enrolled. Inclusion criteria were persistent disease activity under anti-VEGF treatment with Aflibercept or Ranibizumab. The previous treatment interval had to be 6 weeks or shorter. The following parameters were assessed and evaluated at baseline and 4 weeks after the first Faricimab injection: Central subfield thickness (CST) intraretinal and subretinal fluid as recorded by optical coherence tomography (OCT), clinical signs of anterior or posterior segment inflammation or retinal vasculitis and change in best-corrected visual acuity (BCVA).

Results:

16 eyes/patients were included, divided into two groups by diagnosis: AMD (nAMD=10), DME (nDME=6). Mean number of antiVEGF injections at baseline was 36 ± 15 (range:20-60) for AMD and 14 ± 6 (range:8-24) for DME. Mean treatment interval before switch was 5.0 ± 1.2 for AMD and 4.0 ± 0.0 weeks for DME. Mean BCVA change baseline-week4 was $+1.1 \pm 5.2$ for AMD and $+3.2 \pm 4.5$ letters for DME, which was not significant (Wilcoxon: AMD: $p=0.28450$; DME: $p=0.14413$). Mean CST change baseline-week4 was of $-29.6 \pm 40.7 \mu\text{m}$ for AMD and $-33.2 \pm 19.7 \mu\text{m}$ for DME. The CST change was statistically significant (Wilcoxon: AMD: $p=0.04685$; DME: $p=0.04311$). No adverse events related to Faricimab were recorded.

Conclusions:

To our knowledge, we present the first real-live data on intravitreal Faricimab in Switzerland. In our dataset, no complications occurred, CST was significantly reduced, BCVA-change was insignificant at week 4. If Faricimab proves to be significantly more effective in a real-life setting must be subject of subsequent long-term studies.