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ASSESSMENT OF AN ARTERY-VEIN COMPLEX (AVC) IN MYOPIC CHOROIDAL NEOVASCULARIZATION WITH OCT-A. ROLE IN MYOPIC NEOVASCULARIZATION ACTIVITY.

Oral

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Purpose:

Optical coherence tomography angiography (OCTA) study of dilated choroidal veins (DCV) and perforating scleral vessels (PSV) conforming an artery-vein complex (AVC) and their relationship with myopic choroidal neovascularization and its activity (mCNV) in patients with high myopia.

Methods:

Retrospective analysis of patients with high myopia (≥ -6 D or ≥ 26 mm of axial length) using multimodal imaging. The presence of PSVs, DCVs and mCNV was assessed using structural sweep-source optical coherence tomography (SS-OCT) and AOCT images (TRITON, Topcon Corporation, Japan).

Results:

51 eyes of highly myopic patients with mCNV were studied. 39 of 51 (76.5%) showed PSVs under or in contact with the mCNV. 21 out of 51 (41.2%) showed an AVC under the mCNV. The mean number of intravitreal injections (IVI) received was $0,06 \pm 0,05$ along $52,49 \pm 53,24$ (0-161) months of follow-up in the group of patients with AVC. The mean number of relapses was $2,29 \pm 2,69$ and the mean number of relapses/year was $0,506 \pm 0,575$. The eyes with ACV need less injections/year ($p < 0.05$), showed less relapses/year ($p < 0.01$) and less relapses during the first year ($p < 0.05$). Moreover, they have less choroidal thickness than those without the ACV ($p < 0.05$).

Conclusions:

The patients with artery-vein complex formed by the DCV, the PSV and the myopic neovascular membrane are more prone to relapses than those without it.