## E.7.3 Monitoring strategies and tools for people with late age-related macular degeneration (wet active)

RQ23b: What strategies and tools are useful for monitoring for people with late AMD (wet active)?

Bibliographic reference	Coscas Gabriel J; Lupidi Marco ; Coscas Florence ; Cagini Carlo ; Souied Eric H; Optical coherence tomography angiography versus traditional multimodal imaging in assessing the activity of exudative age-related macular degeneration: A New Diagnostic Challenge. Retina 35 (11): 2219-28. 2015				
Country/ies where the study carried out	Paris, France				
Study type	Retrospective cross sectional study				
Aim of the study	To compare optical coherence tomography angiography (OCTA) with traditional multimodal imaging in patients with exudative age-related macular degeneration in terms of guiding the treatment decision.				
Study dates	Patient enrolment between November 2014 and January 2015				
Sources of funding	Not stated				
Number of patients	80 eyes (73 patients)				
Inclusion criteria	Patients were older than 50 years of age with the presence of drusen, CNV established on FA and ICGA and associated with the presence of typical OCT findings (sub/intraretinal fluid, sub-RPE fluid, or pigmented epithelium detachment (PED) and evidence of neovascular network on OCTA.				
Exclusion criteria	Patients were any associated, previous or concomitant ophthalmological condition, such as media opacities that could confound the interpretation of traditional multimodal image or OCTA				
Eligible participants characteristics	80 eyes (73 consecutive patients) were enrolled in the study. Mean age (SD): 74.1 years (8.5) No. of men: 34(46%)				
Type of test	Optical coherence tomography angiography (OCT-A)				
Reference standard	Fluorescein angiography Indocyanine green angiography (ICG) SD- Optical coherence tomography (OCT)				
Prevalence	Presence of leakage Multimodal imaging				

Bibliographic reference	Coscas Gabriel J; L angiography versus degeneration: A New	upidi Marco ; traditional n w Diagnostic	Coscas Florence ; C nultimodal imaging in Challenge. Retina 35	agini Carlo ; Souiec assessing the activ (11): 2219-28. 2015	I Eric H; Optical col vity of exudative age	nerence tomography e-related macular
	OCT-A		Positive	Negative	Total	
		Positive	56	3	59	
		Negative	2	19	21	
		Total	58	22	80	
Sensitivity	OCT-A (multimodal in	maging as refe	erence standard): 96.69	% (95%CI 90.6-99.6%	%)	
Specificity	OCT-A (multimodal imaging as reference standard): 86.4% (95%CI 69.6-97.0%)					
Positive predictive values	OCT-A (multimodal imaging as reference standard): 94.9% (95%CI 88.1-98.9%)					
Negative predictive values	OCT-A (multimodal imaging as reference standard): 90.5% (95%CI 75.1-98.8%)					
Comments	In the traditional multimodal imaging approach, need for treatment was assessed using the presence of at least 2 of the 3 following features:					
	The presence of leakage on FA, evidence of CNV network on ICGA, and presence of subretinal, intraretinal or sub-RPE fluid on SD-OCT					
	Patient selection: a re Index test: evaluation imaged obtained both Reference standard: Flow and timing: each FA, ICGA and SD-OC each patient was sub	etrospective st is were perform from the inde Traditional mu in patient unde CT to establish jected to a sp	udy with a selection of med by 2 retinal specia ex test and reference s iltimodal imaging were rwent a complete bilate the treatment decision ectralis OCTA prototyp	consecutive patients lists who were mask tandards at different used as reference st eral clinical examinat n; on the same day a e treatment;	with a clinical diagno ed to each other and time points and in diff andard, including FA ion and multimodal in s the traditional multi	osis of exudative AMD; independently graded the ferent orders; , ICGA and SD-OCT; naging protocol including modal imaging evaluation,

Bibliographic reference	Eter N ; Spaide R F; Comparison of fluorescein angiography and optical coherence tomography for patients with choroidal neovascularization after photodynamic therapy. Retina 25 (6): 691-6. 2005
Country/ies where the study carried out	USA

Bibliographic reference	Eter N ; Spaide R F; Com choroidal neovasculariza	parison of fluorescein angiography and opt tion after photodynamic therapy. Retina 25	ical coherence tomography for patients with (6): 691-6. 2005	
Study type	Retrospective, non-random	nised study		
Aim of the study	To investigate retinal morp patients who had undergor	hology by means of fluorescein angiography (F ne photodynamic therapy (PDT) with verteporfir	A) and optical coherence tomography (OCT) in a their 3-month-interval examination	
Study dates	Not stated			
Sources of funding	Not stated			
Number of patients	60 eyes (60 patients)			
Inclusion criteria	Patients were with predom according to TAP study pro	inantly classic CNV secondary to age-related n ptocol	nacular degeneration received PDT with verteporfin	
Exclusion criteria	Not stated			
Eligible participants characteristics	60 eyes (60 patients, 30 cc PDT treatment history:	onsecutively evaluated patients) were enrolled i	n the study.	
	No. of PD1	No. of participants		
	1	29		
	2	18		
	3	7		
	4	2		
	6	1		
	9	1		
	Median age: 78 years No. of men: 31(51.7%)			
Type of test	Optical coherence tomography (OCT)			
Reference standard	Fluorescein angiography (F	FA)		
Prevalence	Presence of leakage on FA	and cystoid spaces on OCT		

Diff. If a second data of a second	Eter N;	Spaide R F; Compariso	n of fluorescein angio	ography and optical co	herence tomogra	ohy for patients with
Bibliographic reference	cnoroida	al neovascularization at	$rer photodynamic the \Box_{F\Delta}$	erapy. Retina 25 (6): 69	1-6. 2005	
	ОСТ		Positive (leakage)	Negative (no leakage)	Total	
		Positive (cystoid spaces)	40	2	42	
		Negative (no cystoid spaces	10	8	18	
		Total	50	10	60	
	Presence	e of cystoid spaces on FA	and OCT			
			FA			
	OCT		Positive	Negative	Total	
		Positive	20	22	42	
		Negative	2	16	18	
		Total	22	38	60	
Sensitivity	Presence Presence	e of leakage on FA and c e of cystoid spaces on FA	ystoid spaces on OCT, and OCT, OCT (FA a	OCT (FA as reference s s reference standard): 9	standard): 80% (95 0.9% (95%Cl 76.2-	%CI 68.0-89.9%) 98.8%)
Specificity	Presence Presence	e of leakage on FA and c e of cystoid spaces on FA	ystoid spaces on OCT, and OCT, OCT (FA as	OCT (FA as reference s s reference standard): 4	standard): 80% (95 2.1% (95%CI 27.1-	%CI 51.8-97.2%) ·57.9%)
Positive predictive values	Presence Presence	e of leakage on FA and c e of cystoid spaces on FA	ystoid spaces on OCT, and OCT, OCT (FA a	OCT (FA as reference s s reference standard): 4	standard): 95.2% (9 7.6% (95%Cl 32.9-	95%CI 87.1-99.4%) 62.6%)
Negative predictive values	Presence Presence	e of leakage on FA and c e of cystoid spaces on FA	ystoid spaces on OCT, and OCT, OCT (FA a	OCT (FA as reference s s reference standard): 8	standard): 44.4% (9 8.9% (95%Cl 71.3-	95%CI 23.0-67.1%) 98.5%)
Comments	FA imag spaces in OCT eva	ines were evaluated for s n the macular. Iluated the presence of su	taining of and leakage	from the lesion and also I spaces within the retina	for the presence o	f loculated fluid in cystoid

Bibliographic reference	Eter N ; Spaide R F; Comparison of fluorescein angiography and optical coherence tomography for patients with choroidal neovascularization after photodynamic therapy. Retina 25 (6): 691-6. 2005
	Patient selection: a retrospective study with a selection of consecutive patients with predominantly classic CNV secondary to AMD received PDT. Index test: OCT images were independently reviewed in a masked fashion, but it is unclear whether OCT results were masked to results of reference standard.
	Reference standard: FA results were reviewed in a masked fashion, but ilt is unclear whether FA results were masked to results of OCT Flow and timing: Patients were examined 3 months after PDT, and had both OCT and FA, but time intervals were unclear. All patients included in the analysis.

Bibliographic reference	Giani A ; Luiselli C ; Esmaili D D; Salvetti P ; Cigada M ; Miller J W; Staurenghi G ; Spectral-domain optical coherence tomography as an indicator of fluorescein angiography leakage from choroidal neovascularization. Investigative Ophthalmology & Visual Science 52(8): 5579-86. 2011
Country/ies where the study carried out	Milan, Italy
Study type	Retrospective cross sectional study
Aim of the study	To evaluate spectral-domain optical coherence tomography (SD-OCT) findings that predict angiographic leakage in choroidal neovascularization (CNV)
Study dates	Not stated
Sources of funding	Not stated
Number of patients	93 eyes (93 patients) with CNV from neovascular AMD
Inclusion criteria	Clinical history of AMD and FA diagnosis of subfoveal CNV, FA and SD-OCT were performed; Previous treatment with anti-VEGF (ranibizumab or bevacizumab) for CNV FA and SD-OCT acquired 1 month after any anti-VEGF agent injection, and every 3 months thereafter
Exclusion criteria	Previous laser treatment, photodynamic therapy, or vitreoretinal surgery on the study eye; significant macular haemorrhage that obscured the lesion, and a spherical refractive error >6diopters.

Bibliographic reference	Giani A coherei Investig	; Luiselli C ; Esma nce tomography as gative Ophthalmolo	aili D D; Salvetti P ; Ciga s an indicator of fluoresc ogy & Visual Science 52	da M ; Miller J W; Sta cein angiography lea (8): 5579-86. 2011	aurenghi G ; Spectral-d Ikage from choroidal no	omain optical eovascularizatio
Eligible participants characteristics	93 eyes Mean ag No. of n Mean n	ge (SD): 77.0 years nen: 41(44.1%) o. of anti-VEFG (SD	enrolled in the study. (11.4) ): 6.7 (3.5)			
Type of test	SD-Opti	ical coherence tomo	graphy (OCT)			
Reference standard	Fluores	cein angiography (F	A)			
Prevalence	Parame	ter: fluid (associated	d with FA presence of leak	(age)		
			FA leakage			
	OCT		Positive	Negative	Total	
		Positive	49	30	79	
		Negative	3	11	14	
		Total	52	41	93	
	Parame OCT	ter: PED (pigment e	pithelium detachment) FA leakage Positive	Negative	Total	
		Positive	20	13	33	
		Negative	32	28	60	
		Total	52	41	93	
	Parame	ter: NSD (neurosen	sory retinal detachment)			
	OCT		Positive	Negative	Total	

Bibliographic reference	Giani A cohere Investio	; Luiselli C ; Esmaili D D nce tomography as an in aative Ophthalmology & \	; Salvetti P ; Ciga dicator of fluoreso /isual Science 52(	da M ; Miller J W; Sta cein angiography lea (8): 5579-86, 2011	urenghi G ; Spectral-dom kage from choroidal neova	ain optical ascularization.
		Positive	35	5	40	
		Negative	17	36	53	
		Total	52	41	93	
	Parame	ter: ICS (intraretinal cystic	spaces)			
			FA leakage			
	OCT		Positive	Negative	Total	
		Positive	27	23	50	
		Negative	25	18	43	
		Total	52	41	93	
	Parame	ter: Flecks	FA leakage			
	OCT		Positive	Negative	Total	
		Positive	42	7	49	
		Negative	10	34	44	
		Total	52	41	93	
Sensitivity			Sensitivity (95%0	CI)		
	Fluid		94.2% (86.5-98.8%)			
	Pigme (PED)	nt epithelium detachment	38.5% (25.8-51.9	9%)		
	Neuro: detach	sensory retinal ment (NSD)	67.3% (54.1-79.2	2%)		
	Intraretinal cystic spaces (ICS)		51.9% (38.5-65.2%)			

Bibliographic reference	Giani A ; Luiselli C ; Esmaili D D coherence tomography as an inc Investigative Ophthalmology & V	; Salvetti P ; Cigada M ; Miller J W; Staurenghi G ; Spectral-c dicator of fluorescein angiography leakage from choroidal n /isual Science 52(8): 5579-86. 2011	lomain optical eovascularization.
	Flecks	80.8% (69.1-90.2%)	
Specificity		Specificity (95%CI)	
	Fluid	26.8% (14.6-41.2%)	
	Pigment epithelium detachment (PED)	68.3% (53.5-81.4%)	
	Neurosensory retinal detachment (NDS)	87.8% (76.3-95.8%)	
	Intraretinal cystic spaces (ICS)	43.9% (29.3-59.1%)	
	Flecks	82.9% (70.2-92.7%)	
Positive predictive values		PPV (95%CI)	
	Fluid	62.0% (51.1-72.3%)	
	Pigment epithelium detachment (PED)	60.6% (43.7-76.3%)	
	Neurosensory retinal detachment (NDS)	87.6% (75.8-95.7%)	
	Intraretinal cystic spaces (ICS)	54.0% (40.2-67.5%)	
	Flecks	85.7% (74.8-93.9%)	
Negative predictive values		NPV (95%CI)	
	Fluid	78.6% (54.6-95.0%)	
	Pigment epithelium detachment (PED)	46.7% (34.3-59.2%)	
	Neurosensory retinal detachment (NDS)	67.9% (54.9-79.7%)	
	Intraretinal cystic spaces (ICS)	41.9% (27.7-56.7%)	
	Flecks	77.3% (64.0-88.2%)	

Bibliographic reference	Giani A ; Luiselli C ; Esmaili D D; Salvetti P ; Cigada M ; Miller J W; Staurenghi G ; Spectral-domain optical coherence tomography as an indicator of fluorescein angiography leakage from choroidal neovascularization. Investigative Ophthalmology & Visual Science 52(8): 5579-86. 2011
Comments	The study examined specific patterns of fluid accumulation, which can affect the specificity of SD-OCT evaluation with regard to having an FA leakage, including PED, NSD, ICS, and flecks.
	Fluid was considered present if NSD, PED, or ICS were presented.
	Patient selection: a retrospective study with a selection of consecutive patients with CNV secondary to AMD from neovascular AMD. Patients had previous laser treatment, PDT or vitreoretinal surgery on the study eye were excluded.
	Index test: Examiner were masked from all other patient data including FA images when evaluating SD-OCT.
	Reference standard: Examiner were masked from all other patient data including SD-OCT images when evaluating FA.
	Flow and timing: All SD-OCT and FA were routinely acquired 1 month after any anti-VEGD injection, and every 3 months thereafter, but time intervals were unclear. All patients included in the analysis.

Bibliographic reference	Henschel A ; Spital G ; Lommatzsch A ; Pauleikhoff D ; Optical coherence tomography in neovascular age related macular degeneration compared to fluorescein angiography and visual acuity. European Journal of Ophthalmology 19(5): 831-5. 2009.
Country/ies where the study carried out	Germany
Study type	Prospective cross sectional study
Aim of the study	To assess the sensitivity and specificity of optical coherence tomography (OCT) for monitoring patients with choroidal neovascularization (CNV) after photodynamic therapy (PDT) in comparison to fluorescein angiography (FA).
Study dates	Not stated
Sources of funding	Not stated
Number of patients	14 patients
Inclusion criteria	Patients with different types of CNV
Exclusion criteria	Not stated

Bibliographic reference	Henschel A ; Spital G ; Lommatzsch A ; Pauleikhoff D ; Optical coherence tomography in neovascular age related macular degeneration compared to fluorescein angiography and visual acuity. European Journal of Ophthalmology 19(5): 831-5. 2009.								
Eligible participants characteristics	14 patients. Of 13 patients, OCT and FA were carried out prior to PDT and at 2,6, and 12 weeks after treatment. One patient only completed the 6 week visit.								
Type of test	Optical of	coherence tomograph	y (OCT)						
Reference standard	Fluoreso	cein angiography (FA)							
Prevalence	Parame	ter: intraretinal fluid							
			FA leakage			]			
	OCT		Positive	Negative	Total				
		Positive	28	18	46				
		Negative	3	12	15				
		Total	31	30	61				
	Parameter: subretinal fluid								
			FA leakage			]			
	OCT		Positive	Negative	Total				
		Positive	22	8	30				
		Negative	9	22	31				
		Total	31	30	61				
	Parame	ter: intraretinal or subr	etinal fluid						
			FA leakage						
	OCT		Positive	Negative	Total				
		Positive	30	19	49				

Bibliographic reference	Henschel A ; Spital G ; Lommatzsch A ; Pauleikhoff D ; Optical coherence tomography in neovascular age related macular degeneration compared to fluorescein angiography and visual acuity. European Journal of Ophthalmology 19(5): 831-5. 2009.						
		Negative	1	11		12	
		Total	31	30		61	
Sensitivity			Sensitivity (95%CI)				
	Intrareti	nal fluid	90.3% (77.9-97.9%)				
	Subretin	al fluid	71.0% (54.1-85.3%)				
	Intrareti	nal or subretinal fluid	96.8% (88.4-99.9%)				
Specificity			Specificity (95%CI)				
	Intraretinal fluid		40.0% (23.5-57.7%)				
	Subretinal fluid		73.3% (56.5-87.3%)				
	Intraretinal or subretinal fluid		36.7% (20.7-54.3%)				
Positive predictive values			PPV (95%CI)				
	Intraretinal fluid		60.9% (46.5-74.3%)				
	Subretinal fluid		73.3% (56.5-87.3%)				
	Intraretinal or subretinal fluid		61.2% (47.4-74.2%)				
Negative predictive values			NPV (95%CI)				
	Intraretinal fluid		80.0% (57.2-95.3%)				
	Subretinal fluid		71.0% (54.1-85.3%)				
	Intraretinal or subretinal fluid		91.7% (71.5-99.8%)				
Comments	In FA, lea dye inject All OCT v present if present if epithelium	kage was rated as positi ion. vere assessed for preser loculated hyporeflective a hyporeflective space v n/choriocapilary complex	ive if extravasation of th nce or absence of intrar- cystoid spaces were vis vas definable between t a in one of the OCT scar	e dye etinal sible i the ວບ າຣ.	e was visible outside or subretinal fluid. in one of the acquir uter retinal surface a	e the initial lesion Intraretinal fluid w ed OCT. Subretin and the hyperrefle	boundaries 3 minutes after as considered to be al fluid was rated as ective retinal pigement

Bibliographic reference	Henschel A ; Spital G ; Lommatzsch A ; Pauleikhoff D ; Optical coherence tomography in neovascular age related macular degeneration compared to fluorescein angiography and visual acuity. European Journal of Ophthalmology 19(5): 831-5. 2009.
	A total of 14 patients with CNV. 13 patients had OCT and FA prior to PDT and at 2,6 and 12 weeks after treatment. One patient only completed the 6-week visit. In 3 patients images could be obtained at 24 weeks after treatment additionally.
	Patient selection: a prospective study with a selection of patients with CNV (n=14). In 13 patients, OCT and FA were carried out prior to PDT and at 2, 6, and 12 weeks after treatment. Once patient only completed the 6-week visit. In 3 patients, images could be obtained at 24 weeks after treatment additionally.
	Index test: All acquired OCT were assessed for the presences or absence of intraretinal or subretinal fluid. Images were reviewed in masked fashion.
	Reference standard: In FA, leakage was rated as positive if extravasation of the dye was visible outside the initial lesion boundaries 3 minutes after dye injection. All acquired images were reviewed in a masked fashion. Leakage activities on FA was defined as the gold standard.
	Flow and timing: time intervals were unclear. All patients included in the analysis, but results were not presented at different time points of study follow-up.

Bibliographic reference	Khurana R N; Dupas B ; Bressler N M; Agreement of time-domain and spectral-domain optical coherence tomography with fluorescein leakage from choroidal neovascularization. Ophthalmology 117(7): 1376-80. 2010.
Country/ies where the study carried out	USA
Study type	Retrospective consecutive case series study
Aim of the study	To compare fluorescein leakage from choroidal neovascularization (CNV) with signs of intraretinal or subretinal fluid on time- domain optical coherence tomography (TD-OCT) and spectral-domain optical coherence tomography (SD-OCT) in patients receiving anti-vascular endothelial growth factor (anti-VEGF) therapy for CNV caused by age-related macular degeneration (AMD).
Study dates	All patients with CNV secondary to AMD who were imaged on the same day with FA and TD-OCT and SD-OCT over an 8- month period (November 2007 to June 2008) were reviewed.
Sources of funding	Ronald G Michels Foundation; Foundation Odette et Jean Duranton de Magny, Foundation de France; James P Gills Professionorship and a Wilmer Retina Division Research Fund.

Bibliographic reference	Khurana R N tomography	; Dupas B ; Bress with fluorescein	sler N M; Agreement leakage from choroi	t of time-domain and dal neovascularization	spectral-domain optic on. Ophthalmology 11	al coherence 7(7): 1376-80. 2010		
Number of patients	93 eyes (93 pa	93 eyes (93 patients) with CNV from neovascular AMD						
Inclusion criteria	All patients wi	th CNV secondary	to AMD who were in	naged on the same da	y with FA and TD-OCT	and SD-OCT		
Exclusion criteria	Not stated							
Eligible participants characteristics	59 eyes (56 pa	atients) were enro	lled in the study.					
	Mean age (SE Median no. of	Mean age (SD): 78.0 years (7.8) Median no. of previous anti-VEFG (SD): 4						
Type of test	Optical cohere	Optical coherence tomography (OCT) (both TD-OCT and SD-OCT)						
Reference standard	Fluorescein ar	Fluorescein angiography (FA)						
Prevalence	Parameter: int	Parameter: interstitial fluid						
			FA leakage					
	TD-OCT		Positive	Negative	Total			
		Positive	11	8	19			
		Negative	18	22	40			
		Total	29	30	59			
	SD-OCT	Positive	19	11	30			
		Negative	10	19	29			
		Total	29	30	59			
	Parameter: re	tinal cystoid abnor	malities			1		
			Dopitivo	Nogotivo	Total	-		
		Positivo	10		10(0)			
		Negative	10	0	10			
		Total	20	22	50			
		Negative Total	19 29	22 30	41 59			

Bibliographic reference	Khurana R N; D tomography wi	upas B ; Bressle th fluorescein lea	r N M; Agreement of t kage from choroidal	time-domain and spect neovascularization. Op	ral-domain optical hthalmology 117(7	coherence ′): 1376-80. 20
	SD-OCT	Positive	17	13	30	
		Negative	12	17	29	
		Total	29	30	59	
	Parameter: subr	etinal fluid				
			FA leakage			
	TD-OCT		Positive	Negative	Total	
		Positive	14	5	19	
		Negative	15	25	40	
		Total	29	30	59	
	SD-OCT	Positive	20	7	27	
		Negative	9	23	32	
		Total	29	30	59	
	Parameter: inter	stitial fluid, cystoid	abnormalities or subre FA leakage	tinal fluid		
	TD-OCT		Positive	Negative	Total	
		Positive	17	11	28	
		Negative	12	19	31	
		Total	29	30	59	
	SD-OCT	Positive	26	16	42	
		Negative	3	14	17	
		Total	29	30	59	
Sensitivity	TD-OCT (vs FA)					
			Sensitivity (95%CI)			

Bibliographic reference	Khurana R N; Dupas B; Bressler tomography with fluorescein lea	r N M; Agreement of time-domain and spectral-domain optic kage from choroidal neovascularization. Ophthalmology 117	al coherence ((7): 1376-80, 2010,
	interstitial fluid	37.9% (21.5-55.9%)	
	retinal cystoid abnormalities	34.5% (18.6-52.4%)	
	subretinal fluid	48.3% (30.6-66.1%)	
	interstitial fluid, cystoid abnormalities or subretinal fluid	58.6% (40.6-75.5%)	
	SD-OCT (vs FA)		_
		Sensitivity (95%CI)	
	interstitial fluid	65.5% (47.6-81.4%)	
	retinal cystoid abnormalities	58.6% (40.6-75.5%)	
	subretinal fluid	69.0% (51.3-84.1%)	
		PPV (95%CI)	
Specificity	TD-OCT (vs FA)		_
		Specificity (95%CI)	
	interstitial fluid	73.3% (56.5-87.3%)	
	retinal cystoid abnormalities	73.3% (56.5-87.3%)	
	subretinal fluid	83.3% (68.3-94.2%)	
	interstitial fluid, cystoid abnormalities or subretinal fluid	63.3% (45.7-79.3%)	
	SD-OCT		_
		Specificity (95%CI)	
	interstitial fluid	63.3% (45.7-79.3%)	
	retinal cystoid abnormalities	56.7% (38.9-73.6%)	
	subretinal fluid	76.7% (60.3-89.7%)	

Bibliographic reference	Khurana R N; Dupas B ; Bressler N M; Agreement of time-domain and spectral-domain optical coherence tomography with fluorescein leakage from choroidal neovascularization. Ophthalmology 117(7): 1376-80, 2010.				
	interstitial fluid, cystoid abnormalities or subretinal fluid	46.7% (29.4-64.3%)	(,),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Positive predictive values	TD-OCT				
	interstitial fluid	57.9% (35.7-78.5%)			
	retinal cystoid abnormalities	55.6% (32.9-77.0%)			
	subretinal fluid	73.7% (52.4-90.3%)			
	interstitial fluid, cystoid abnormalities or subretinal fluid	60.7% (42.4-77.6%)			
	SD-OCT				
		PPV (95%CI)			
	interstitial fluid	63.3% (45.7-79.3%)			
	retinal cystoid abnormalities	56.7% (38.9-73.6%)			
	subretinal fluid	74.1 (56.4-88.4%)			
	interstitial fluid, cystoid abnormalities or subretinal fluid	61.9% (46.9-75.8%)			
Negative predictive values	TD-OCT				
		NPV (95%CI)			
	interstitial fluid	55.0% (39.6-69.9%)			
	retinal cystoid abnormalities	53.7% (38.5-68.5%)			
	subretinal fluid	62.5% (47.2-76.6%)			
	interstitial fluid, cystoid abnormalities or subretinal fluid	61.3% (43.9-77.3%)			
	SD-OCT				

Bibliographic reference	Khurana R N; Dupas B ; Bressler tomography with fluorescein lea	r N M; Agreement of time-domain and spectral-domain optic kage from choroidal neovascularization. Ophthalmology 117	al coherence 7(7): 1376-80. 2010.	
		NPV (95%CI)		
	interstitial fluid	65.5% (47.6-81.4%)		
	retinal cystoid abnormalities	58.6% (40.6-75.5%)		
	subretinal fluid	71.9% (55.4-85.8%)		
	interstitial fluid, cystoid abnormalities or subretinal fluid	82.4% (61.7-96.0%)		
COmments	OCT abnormalities were defined as Patient selection: a retrospective st FA, TD-OCT and SD-OCT. Index test: All images were analyse to results of reference standard. Reference standard: All images were were masked to results of index test Flow and timing: inclusion of partic	s the presences of interstitial fluid, retinal cystoid abnormalities, o tudy reviewing the records of all patients with CNV who were ima ed by a trained grader but it was unclear whether the interpretation ere analysed by a trained grader but it was unclear whether the in st. ipants had images on the same day. All participants included in t	or subretinal fluid. aged on the same day with on of results were masked nterpretation of results he analysis.	

Bibliographic reference	Salinas-Alaman A ; Garcia-Layana A ; Maldonado M J; Sainz-Gomez C ; Alvarez-Vidal A ; Using optical coherence tomography to monitor photodynamic therapy in age related macular degeneration. American Journal of Ophthalmology 140 (1): 23-8. 2005.
Country/ies where the study carried out	Spain
Study type	Prospective observational case study
Aim of the study	To evaluate the role of optical coherence tomography (OCT) in determining choroidal neovascularization (CNV) activity before and after photodynamic therapy (PDT) in patients with age-related macular degeneration (ARMD).
Study dates	Not stated
Sources of funding	Not stated

Bibliographic reference	Salinas-Alam tomography Ophthalmolo	Salinas-Alaman A ; Garcia-Layana A ; Maldonado M J; Sainz-Gomez C ; Alvarez-Vidal A ; Using optical coherence tomography to monitor photodynamic therapy in age related macular degeneration. American Journal of Ophthalmology 140 (1): 23-8. 2005.					
Number of patients	62 eyes (53 c	onsecutive patient	s)				
Inclusion criteria	All patients wi	th exudative AMD	with predominantly c	lassic CNV			
Exclusion criteria	Not stated						
Eligible participants characteristics	53 patients we Mean age (SE Mean no, of P	53 patients were included in the study. Mean age (SD): 76.5 years (7.5) Mean no. of PDT treatment: 2.5 (SD 1.2) followed for 6 months: 2.9 (SD 1.1) followed for 12 months					
Type of test	Optical cohere	ence tomography	(OCT)		,		
Reference standard	Fluorescein a	Fluorescein angiography (FA)					
Prevalence	Parameter: interstitial fluid or subretinal fluid						
			FA leakage				
	OCT		Positive	Negative	Total		
		Positive	110	25	135		
		Negative	5	36	41		
		Total	115	61	176		
Sensitivity	Presence of leakage on FA and intraretinal or subretinal fluid on OCT, OCT (FA as reference standard): 95.7% (95%CI 91.7-98.6%)						
Specificity	Presence of leakage on FA and intraretinal or subretinal fluid on OCT, OCT (FA as reference standard): 59.0% (95%CI 46.5-70.9%)						
Positive predictive values	Presence of le 87.5%)	Presence of leakage on FA and intraretinal or subretinal fluid on OCT, OCT (FA as reference standard): 81.5% (95%CI 74.5-87.5%)					
Negative predictive values	Presence of le 95.8%)	Presence of leakage on FA and intraretinal or subretinal fluid on OCT, OCT (FA as reference standard): 87.8% (95%CI 76.3- 95.8%)					

Bibliographic reference	Salinas-Alaman A ; Garcia-Layana A ; Maldonado M J; Sainz-Gomez C ; Alvarez-Vidal A ; Using optical coherence tomography to monitor photodynamic therapy in age related macular degeneration. American Journal of Ophthalmology 140 (1): 23-8. 2005.
Comments	A total of 62 eyes included in the study. After the treatment, 42 eyes were reviewed every 3 months for 12 months (n=168 pair of OCT and FA), and the other 20 eye were reviewed 3-monthly for 6 months (n=40 pairs of OCT and FA). Therefore, by the end of 12 month follow-up, there were a total of 208 sets of FA and OCT were expected, 176 were obtained.
	Patient selection: a prospective study with a selection of consecutive patients with exudative AMD with predominantly classic CNV.
	Index test: experienced technician performed OCT examinations, another independent observer who was masked to the patient status evaluated the OCT on each occasion, but it was unclear whether the results of OCT were masked to results of FA.
	Reference standard: Two independent observers determined the presence or absence of leakage on FA in each case, but it was unclear whether results were masked to OCT results.
	Flow and timing: Time intervals of OCT and FA were unclear. Sets of OCT and FA results were included but sets of OCT and FA results were not presented at different time points of study follow-up.

Bibliographic reference	Van de Moere ; A ; Sandhu S S; Talks S J; Correlation of optical coherence tomography and fundus fluorescein angiography following photodynamic therapy for choroidal neovascular membranes. British Journal of Ophthalmology 90 (3): 304-6. 2006
Country/ies where the study carried out	UK
Study type	Retrospective comparative observational case series
Aim of the study	To assess the correlation between optical coherence tomography (OCT) and leakage on fundus fluorescein angiography (FFA) following photodynamic therapy (PDT) with verteporfin for choroidal neovascularisation (CNV)
Study dates	A review of patients who had received initial PDT with verteporfin between July 2001 and October 2004
Sources of funding	Not stated
Number of patients	121 eyes
Inclusion criteria	All patients who had received initial PDT with verteporfin for a classic or predominantly subfoveal CNV secondary to AMD, to allow at least 3 months of follow-up

Bibliographic reference	Van de Moere ; A ; Sandhu S S; Talks S J; Correlation of optical coherence tomography and fundus fluorescein angiography following photodynamic therapy for choroidal neovascular membranes. British Journal of Ophthalmology 90 (3): 304-6. 2006							
Exclusion criteria	Not stated	Not stated						
Eligible participants characteristics	121 eyes we No. of female Mean age (ra	121 eyes were included in the study. No. of female: 66 (51.2%) Mean age (range): 73.9years (30-94)						
Type of test	Optical cohe	rence tomography	(OCT)					
Reference standard	Fluorescein a	Fluorescein angiography (FA)						
Prevalence	Parameter: p	igment epithelial de	etachment					
			FA leakage					
	OCT		Positive	Negative	Total			
		Positive	4	0	4			
		Negative	66	51	117			
		Total	70	51	121			
	Parameter: subretinal fluid							
			FA leakage					
	ОСТ		Positive	Negative	Total			
		Positive	33	8	41			
		Negative	37	43	80			
		Total	70	51	121			
	Parameter: in	ntraretinal fluid				1		
			FA leakage					
	OCT		Positive	Negative	Total			
		Positive	58	24	82			

	Van de Moe	ere ; A ; Sandhu S	S; Talks S J; Correla	tion of optical coher	ence tomography
Bibliographic reference	angiograph Ophthalmo	y following photod logy 90 (3): 304-6.	dynamic therapy for 2006	choroidal neovascul	ar membranes. Br
		Negative	11	27	39
		Total	70	51	121
	Parameter:	gross cystoid macul	ar oedema		
			FA leakage		
	OCT		Positive	Negative	Total
		Positive	16	1	17
		Negative	54	50	104
		Total	70	51	121
	Parameter:	sponge-like retinal t	hickening FA leakage		
	OCT		Positive	Negative	Total
		Positive	33	10	43
		Negative	37	41	78
		Total	70	51	121
	Parameter:	solitary foveal cyst	EA leakage		
	OCT		Positive	Negative	Total
	001	Positive	9	13	22
		Negative	61	38	90
		Total	70	51	121
		TULAI	70	51	121

Bibliographic reference	Van de Moere ; A ; Sandhu S S; Talks S J; Correlation of optical coherence tomography and fundus fluorescein angiography following photodynamic therapy for choroidal neovascular membranes. British Journal of Ophthalmology 90 (3): 304-6. 2006					
	Parameter: absence of foveal depression					
			FA leakage			
	OCT		Positive	Negative	Total	
		Positive	38	18	56	
		Negative	32	33	65	
		Total	70	51	121	
	Parameter: r					
			FA leakage			
	OCT		Positive	Negative	Total	
		Positive	44	9	53	
		Negative	26	42	68	
		Total	70	51	121	
Sensitivity			Sensitivity (95%CI)	)		
	Subretinal fluid		47.1% (35.6-58.8%)			
	Intraretinal fluid		82.9% (73.3-90.7%)			
	Gross cystoid macular oedema		22.9% (13.9-33.3%)			
	Sponge-like retinal thickening		47.1% (35.6-58.8%)			
	Solitary foveal cyst		12.9% (6.0-21.6%)			
	Retinal thickness>350µm		62.9% (51.3-73.7%)			
	Absence of foveal depression		54.3% (42.6-65.7%)			
Specificity			Specificity (95%CI)			
	Subretinal fluid		84.3% (73.3-92.8%)			

Bibliographic reference	Van de Moere ; A ; Sandhu S S; Talks S J; Correlation of optical coherence tomography and fundus fluorescein angiography following photodynamic therapy for choroidal neovascular membranes. British Journal of Ophthalmology 90 (3): 304-6. 2006					
	Intraretinal fluid	52.9% (39.3-66.3%)				
	Gross cystoid macular oedema	98.0% (92.9-99.9%)				
	Sponge-like retinal thickening	80.4% (68.6-90.0%)				
	Solitary foveal cyst	74.5% (61.8-85.4%)				
	Retinal thickness>350µm	82.4% (70.9-91.4%)				
	Absence of foveal depression	64.7% (51.2-77.1%)				
Positive predictive values		Positive predictive value(95%CI)				
	Subretinal fluid	80.5% (62.7-90.9%)				
	Intraretinal fluid	70.7% (60.5-80.0%)				
	Gross cystoid macular oedema	94.1% (79.4-99.8%)				
	Sponge-like retinal thickening	76.7% (63.2-87.9%)				
	Solitary foveal cyst	40.9% (21.8-61.6%)				
	Retinal thickness>350µm	83.0% (71.9-91.8%)				
	Absence of foveal depression	67.9% (55.2-79.3%)				
Negative predictive values		Negative predictive value(95%CI)				
	Subretinal fluid	53.8% (42.8-64.5%)				
	Intraretinal fluid	69.2% (54.1-82.5%)				
	Gross cystoid macular oedema	48.1% (38.6-57.6%)				
	Sponge-like retinal thickening	52.6% (41.5-63.5%)				
	Solitary foveal cyst	38.4% (29.1-48.1%)				
	Retinal thickness>350µm	61.8% (50.0-72.9%)				
	Absence of foveal depression	50.8% (38.7-62.8%)				
Comments	Patient selection: a retrospective s classic subfoveal CNV secondary	tudy with a selection of patients who all had received PDT for a c to AMD.	lassic or predominantly			

Bibliographic reference	Van de Moere ; A ; Sandhu S S; Talks S J; Correlation of optical coherence tomography and fundus fluorescein angiography following photodynamic therapy for choroidal neovascular membranes. British Journal of Ophthalmology 90 (3): 304-6. 2006
	Index test: The accredited ophthalmic photographer performed OCT. Each OCT image was evaluated independently by one of investigators, who were masked to the treatment course, number of treatment, and whether treatment was given or not at that visit. It was unclear whether results of OCT were masked to FA results.
	Reference standard: The same accredited ophthalmic photographer performed FFA. Each FFA image was evaluated independently by one of investigators, who were masked to the treatment course, number of treatment, and whether treatment was given or not at that visit. It was unclear whether results of OCT were masked to FA results. (different investigators evaluated FFA and OCT) Flow and timing: The OCT and FA from the same visit were analysed. All patients included in the analysis.

Bibliographic reference	van Velthoven ; M E ; de Smet ; M D ; Schlingemann R O; Magnani M ; Verbraak F D; Added value of OCT in evaluating the presence of leakage in patients with age-related macular degeneration treated with PDT. Graefes Archive for Clinical & Experimental Ophthalmology 244 (9): 1119-23. 2006.
Country/ies where the study carried out	Amsterdam, Netherlands
Study type	Prospective observational case series
Aim of the study	To evaluate the presence of leakage on fluorescein angiography (FA) in patients with age-related macular degeneration (AMD) retreated with photodynamic therapy (PDT) can be difficult. New diagnostic tools such as optical coherence tomography (OCT) might help to optimize PDT management.
Study dates	Patient recruitment between July and October 2003
Sources of funding	There was no financial support for this study
Number of patients	30 eyes (30 consecutive patients)
Inclusion criteria	All patients who had received at least one prior PDT treatment, and were scheduled for their regular 3-monthly FA.
Exclusion criteria	Not stated
Eligible participants characteristics	30 patients were included in the study. Mean age (MD): 75.5years (9.0) No. of prior PDT treatment range from 1 to 12 (median 2.5)

Bibliographic reference	van Velthoven ; M E ; de Smet ; M D ; Schlingemann R O; Magnani M ; Verbraak F D; Added value of OCT in evaluating the presence of leakage in patients with age-related macular degeneration treated with PDT. Graefes Archive for Clinical & Experimental Ophthalmology 244 (9): 1119-23. 2006.						
Type of test	Time domain opti	cal coherence tor	mography (OCT) (strat	us OCT)			
Reference standard	Fluorescein angio	graphy (FA)					
Prevalence	Parameter: leaka	ge					
			FA leakage				
	OCT		Positive	Negative	Total		
		Positive	15	4	19		
		Negative	8	3	11		
		Total	23	7	30		
Sensitivity	OCT (FA as reference standard): 65.2% (95%CI 45.1-82.8%)						
Specificity	OCT (FA as reference standard): 42.9% (95%CI 11.8-77.7%)						
Positive predictive values	OCT (FA as reference standard): 78.9% (95%CI 58.6-93.6%)						
Negative predictive values	OCT (FA as reference standard): 27.3% (95%CI 6.7-55.6%)						
Comments	OCT (FA as reference standard): 27.3% (95%CI 6.7-55.6%) Patient selection: a prospective study with a selection of consecutive patients with AMD and subfoveal CNV who had received at least one prior PDT treatment and were scheduled for regular 3-monthly FA. Index test: The OCT from all patients were evaluated by two different investigator for the presence of signs of leakage but it was unclear whether OCT results were masked to FA results. Reference standard: The FA results were evaluated by two experienced investigator independently for the presence of signs of leakage, and the observers were masked for any relevant clinical data such as VA, number of prior treatment or previous FAs but it was unclear whether FA results were masked to OCT results. Flow and timing: All patients had their regular 3-monthly FA, and were also had OCT but time intervals were unclear. All patients were included in the analysis.						