

On Some Information about the Treatment of Retinal Veins Occlusion with Travitreal Injection of Ranibizumab (Lucentas)



Healthcare

Keywords: retinal central vein blocking, injections with ranibizumab, travitreal, anesthesia, vizus, patient, etc.

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Abstract

Aim: To demonstrate the efficacy of intravitreal injection of ranibizumab in the treatment of patients with central retinal occlusion. **Material and methods:** For this material there were taken to be studied 11 patients for the period from January 2012 to June 2013 who were with the retinal central vein blocking and were treated with intravitreal injection of ranibizumab with the dose form 0.5 mg. this was done in order to see how it reacted the macular edema after injections with ranibizumab and because of this it was measured vizus in the first week, first month, second month, third month, then every three months, and then until a full year. Patients taken for this study were selected from over 55 years, where the process of blocking of the central vein has happened at least three months in advance. **Results:** From our observations resulted that the growth of vezus was important and was reflected especially in the first week. Seven out of 11 patients felt improved the day after the examination, continuing to improve the positivity until the end of the first week and in the seventh week until the end of the second month. The improvement of vizus for the 11 cases was accidentally with an average of 4-5/10 N. This expressed in their final outcome after 12 months observation. **Conclusions:** The ranibizumab intravitreal application in the treatment of patients with central retinal occlusion turns to be an efficient method. Intravitreal application of ranibizumab (lucentis) turns out to be positive and for the consequences of blocking the VCR since in all applicable cases there is no result of an increased ocular tension. Study notes turbulence of vitreal improvement or macular degenerations or in cases in which patients except the blocking of the vein had these other issues, too.

Aim of the Study

The aim of this study is to demonstrate and evaluate the efficacy of intravitreal injection of ranibizumab treatment of patients with central retinal occlusion.

In this paper we present our cases for the period from January 2012 to June 2013 for the treatment of the retinal central vein blocking with intravitreal injection of ranibizumab with the dose form 0.5 mg.

For these patients we have measured the correction for far and near, light sensitivity (contrast), have taken recent photos of the eye and angiography with flurosein as well as we have estimated the flow (leakage). All cases were followed for a period of 12 months.

Material and methods

In a manner referred to above, 11 eyes were studied of 11 patients with blockage of central retinal vein who were treated with travitreal injections of ranibizumab, this was done in order to see how it reacted the macular edema after injections of ranibizumab. We measured vizus in the first week, first month, second month, third month, then every three months, and then until a full year.

So we made 7 measurements at different times for each patient. We measured this view as for a large and close watching. For five of the patients we used OCT, but this examination is not carried out by us, because there is no such apparatus here. Patients were examined and marked as biomicroscope examinations (Slit-lamp), with the aplanacion Goldman tonometer.

Patients taken for this study were selected from over 55 years, where the process of blocking of the central vein has happened at least three months in advance and when the decline of vezus was to 1/10 of it. Also we have marked macular edema, diabetic retinopathy, the patients had or not cataract, glaucoma, have been

operated (surgery) or not, have had iris vascularization or not and the same notes were redrawn after three months from the first examination. The importance was paid to the use of drugs, before, during and after this episode. To our patients whose first injection is performed was also taken the first sidita, and other injections were listed according to the time in which they were conducted. In the following day, patients were asked for their sense of improving the visibility and pain.

Procedure

Local anesthesia with *dicain*, the preparations of the field with *betadine*, a drop of *vigamox*, 0.5mg/ml intravitreal injection of ranibizumab in terms of the pars plana inferior quadrant temporal 3.5-4mm from limbus. After injection we have reused two drops *vogamox* and we had given as a treatment *tobradex* 4 times a day of 1 drop after injection. These injections were repeated when we had a persistence of macular edema or worsening of the *vezus*, these patients were subsequently treated according to the protocol.

Results

Number of patients	11
Age	65 +_10
Sex (Female/Male)	5/6
The period from the beginning of the treatment of the vascular accident	Min 3 month
HTA	7
Hypercholesterolaemia	7
Diabetes	5
Glaucoma	2
Vizus	1/10 normal

From our observations resulted that the growth of *vezus* was important and was reflected especially in the first week. Seven out of 11 patients felt improved the day after the examination, continuing to improve the positivity until the end of the first week and in the seventh week until the end of the second month. The improvement of *vizus* for the 11 cases was accidentally with an average of 4-5/10 N. This expressed in their final outcome after 12 months observation. Below we present a graphical distribution of cases treated.

Table of data (measurements performed after any given period)

Rastet/Vizusi	Dita e parë	Pas injeksionit	Javën e parë	Muaji 3	Muaji 6	Muaji 9	Muaji 12
1 (Moshë 63)	0.08 N	2/10 N	4/10 N	2/10 N	3/10 N	4/10 N	5/10 N
2 (Moshë 57)	0.05 N	3/10 N	3/10 N	3/10 N	4/10 N	3/10 N	3/10 N
3 (Moshë 60)	0.02 N	2/10 N	3/10 N	3/10 N	3-4/10 N	4/10 N	3-4/10 N
4 (Moshë 62)	0.04 N	1/10 N	1/10 N	2/10 N	1/10 N	2/10 N	2/10 N
5 (Moshë 65)	0.07 N	2/10 N	3/10 N	4/10 N	4/10 N	4/10 N	4/10 N
6 (Moshë 59)	0.08 N	3/10 N	2/10 N	3/10 N	3/10 N	3-4/10 N	3-4/10 N
7 (Moshë 67)	0.05 N	3/10 N	2/10 N	2/10 N	3/10 N	4/10 N	4/10 N
8 (Moshë 60)	0.03 N	2/10 N	1/10 N	2/10 N	2/10 N	3/10 N	3/10 N
9 (Moshë 62)	0.06 N	3/10 N	4/10 N	3/10 N	3/10 N	4/10 N	4/10 N
10 (Moshë 55)	0.04 N	1/10 N	2/10 N	2/10 N	4/10 N	3/10 N	3/10 N
11 (Moshë 66)	0.02 N	3/10 N	3/10 N	2/10 N	2/10 N	2/10 N	2/10 N

Conclusions

1. The ranibizuma intravitreal application in the treatment of patients with central retinal okuzion turns to be an efficient method.
2. Intravitreal application of ranibizumabes (lucentis) turns out to be positive and for the consequences of blocking the VCR since in all applicable cases there is no result of an increased ocular tension.
3. Study notes turbulence of vitreal improvement or macular degenerations or in cases in which patients except the blocking of the vein had these other issues.

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