Topical dorzolamide-timolol beneficial in neovascular AMD

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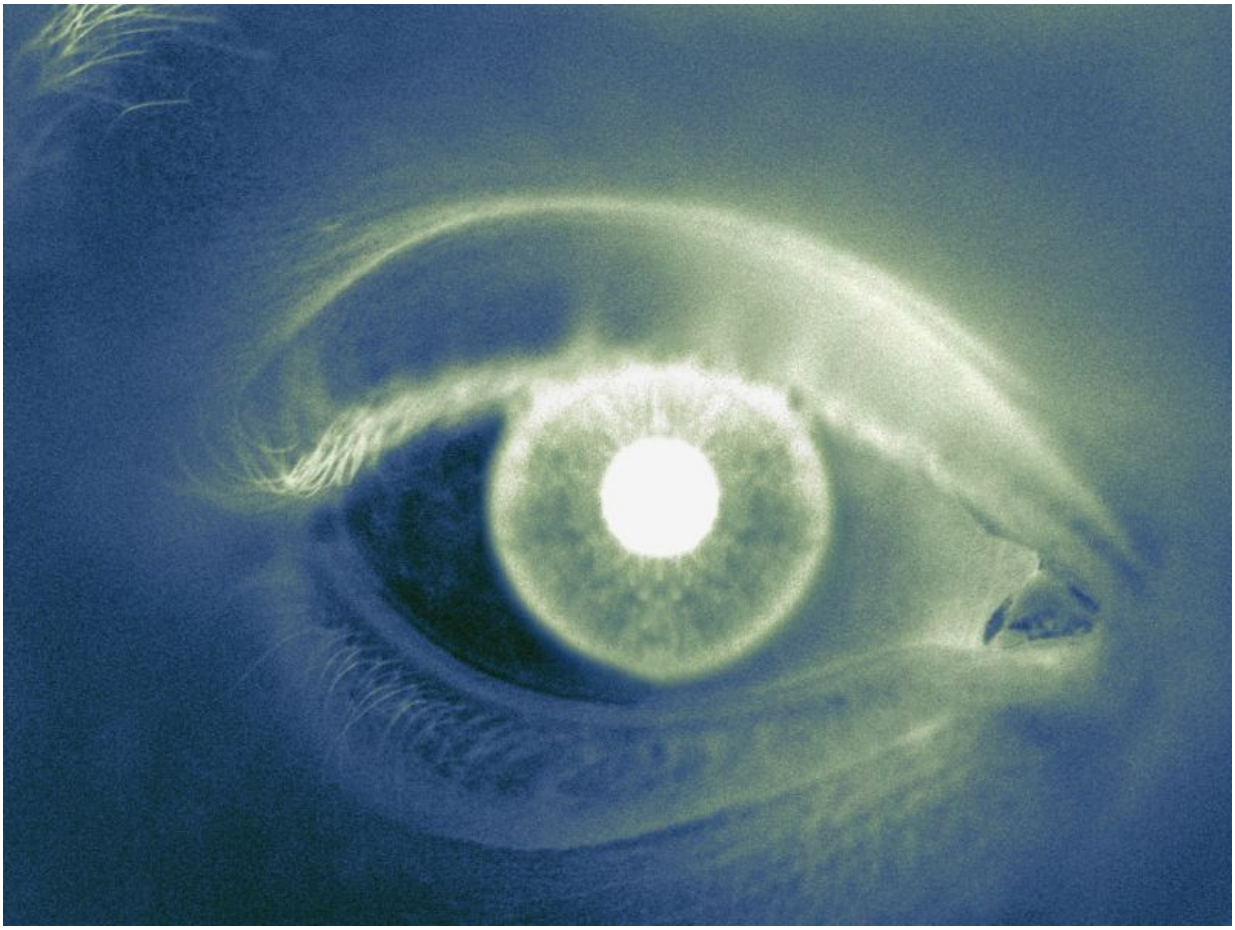

(HealthDay)—Topical dorzolamide hydrochloride-timolol appears to

reduce central subfield thickness and subretinal fluid in eyes of patients with neovascular age-related macular degeneration (AMD) and incomplete response to anti-vascular endothelial growth factor (VEGF) therapy, according to a study published online Feb. 25 in *JAMA Ophthalmology*.

Jayanth Sridhar, M.D., from the Thomas Jefferson University in Philadelphia, and colleagues conducted a prospective single-arm interventional study involving patients with neovascular AMD and persistent macular edema despite fixed-interval intravitreous anti-VEGF therapy. Ten patients (mean age, 78.2 years) with 10 affected eyes received a regimen of topical dorzolamide-timolol twice daily and the same intravitreous anti-VEGF therapy, administered at the same interval as before enrollment. Eight patients received intravitreous aflibercept and two received intravitreous ranibizumab.

The researchers observed a decrease in mean central subfield thickness from 419.7 µm at enrollment to 334.1 µm at the final visit (P = 0.01). From enrollment to the last visit there was also a decrease in mean maximum subretinal fluid height (from 126.6 to 49.5 µm; P = 0.02). From enrollment to the final visit there were nonsignificant decreases in the mean maximum pigment epithelial detachment height (P = 0.12) and the mean logMAR visual acuity (P = 0.60).

"These data suggest that topical dorzolamide-timolol may reduce central subfield thickness and subretinal fluid in eyes with persistent exudation despite consistent, fixed-interval intravitreous anti-VEGF treatment for neovascular AMD," the authors write.

More information: Abstract
Full Text (subscription or payment may be required)