

## Simposio GOAL

**Coordinatore e moderatore: D. Mazzacane Presidente: L. Rossetti** 



## L'avanzamento della diagnosi strutturale nel glaucoma: ruolo dell'angio-OCT



www.amedeolucente.it

# Disclosure

## **Consulting Free**

- Carl Zeiss Meditec
- Alfa Intes

1. Spaide RF, Klancnik JM, Cooney MJ. Retinal Vascular Layers Imaged by Fluorescein Angiography and Optical Coherence Tomography Angiography. JAMA Ophthalmol 2015;133:45-50.

2. Ghasemi Falavarjani K, Tian JJ, Akil H, Garcia GA, Sadda SR, Sadun AA. Swept source optical coherence tomography angiography of the optic disk in optic neuropathy. Retina 2016; 36 Suppl 1:S168-77.

3. Mase T, Ishibazawa A, Nagaoka T, Yokota H, Yoshida A. Radial Peripapillary Capillary Network Visualized Using Wide-Field Montage Optical Coherence Tomography Angiography. Invest Ophthalmol Vis Sci 2016;57:504-510.

4. Chen C, Bojikian KD, Xin C, Wen JC, Gupta D, Zhang Q, et al. Repeatability and reproducibility of optic nerve head perfusion measurements using optical coherence tomography angiography. J Biomed Opt 2016;21:65002.

5. Jia Y, Wei E, Wang X, Zhang X, Morrison JC, Parikh M, et al. Optical Coherence Tomography Angiography of Optic Disc Perfusion in Glaucoma. Ophthalmology 2014;121:1322-1332.

6. Akagi T, Nakanishi H, Tereda N, Morooka S, Yamada H, Hasegawa T, et al. Microvascular Density in Glaucomatous Eyes with Hemifield Visual Field Defects: An Optical Coherence Tomography Angiography Study. Am J Ophthalmol 2016;168:237-249.

7. Lévêque PM, Zéboulon P, Brasnu E, Baudouin C, Labbé A. Optic Disc Vascularization in Glaucoma: Value of Spectral-Domain Optical Coherence Tomography Angiography. J Ophthalmol 2016;2016:6956717.

8. Liu L, Jia Y, Takusagawa HL, Pechauer AD, Edmunds B, Lombardi L, et al. Optical Coherence Tomography Angiography of the Peripapillary Retina in Glaucoma. JAMA Ophthalmol 2015;133:1045-1052.

9. Wang X, Jiang C, Ko T, Kong X, Yu X, Min W, et al. Correlation between optic disc perfusion and glaucomatous severity in patients with open-angle glaucoma: An optical coherence tomography angiography study. Graefes Arch Clin Exp Ophthalmol 2015:253:1557-1564.

10. Yarmohammadi A, Zangwill LM, Diniz-Filho A, Suh MH, Manalastas PI, Fatehee N, et al. Optical Coherence Tomography Angiography Vessel Density in Healthy, Glaucoma Suspect, and Glaucoma Eyes. Invest Ophthalmol Vis Sci 2016;57:451-459.

11. Yarmohammadi A, Zangwill LM, Diniz-Filho A, Suh MH, Yousefi S, Saunders LJ, et al. Relationship between optical coherence tomography angiography vessel density and severity of visual field loss in glaucoma. Ophthalmology 2016;123:2498-2508.

12. Suh MH, Zangwill LM, Manalastas PIC, Belghith A, Yarmohammadi A, Medeiros FA, et al. Optical Coherence

Tomography Angiography Vessel Density in Glaucomatous Eyes with Focal Lamina Cribrosa Defects. Ophthalmology 2016;123:2309-2317.

13. Rao HL, Kadambi SV, Weinreb RN, Puttaiah NK, Pradhan ZS, Rao DA, et al. Diagnostic ability of peripapillary vessel density measurements of optical coherence tomography angiography in primary open-angle and angle-closure glaucoma. Br J Ophthalmol 2016 [Epub ahead of print].

14. Lee EJ, Lee KM, Lee SH, Kim TW. OCT Angiography of the peripapillary retina in primary open angle glaucoma. Invest Ophthalmol Vis Sci 2016;57:6265-6270.

15. Scripsema NK, Garcia PM, Bavier RD, Chui TY, Krawitz BD, Mo S, et al. Optical Coherence Tomography Angiography analysis of perfused peripapillary capillaries in primary open-angle glaucoma and normal tension glaucoma. Invest Ophthalmol Vis Sci 2016;57:OCT611-OCT620.

16. Ghasemi Falavarjani K, Tian JJ, Akil H, Garcia GA, Sadda SR, Sadun AA. Swept source optical coherence tomography angiography of the optic disk in optic neuropathy. Retina 2016; 36 Suppl 1:S168-S177.

17. Jia Y, Morrison JC, Tokayer J, Tan O, Lombardi L, Baumann B, et al. Quantitative OCT angiography of optic nerve head blood flow. Biomed Opt Express 2012;3:3127-3137.



Relationship between **visual field loss** and **RGC numbers.** A normal visual field in a healthy individual has approximately **1 million RGCs**. At a **mean deviation of -2** *dB*, which equates to an **early field defect**, **RGC number** has decreased by around **350,000 cells**. At **-10** *dB*, a field defect that can result **in functional impairment** and **quality of life decline**, **RGC number** has **decreased** by **a further 250,000 cells from the RGC number at -2** *dB* 

Optical coherence angiography of the **optic nerve head** of a **glaucomatous disc (left)** and a **healthy disc (right)**. In addition to the general reduction in the visibility of the disc and peripapillary microvasculature in the glaucomatous disc, **focal areas** of vascular **attenuation** are visible **(arrows). OCTA images can help our understanding of the pathogenesis of ONH diseases.** 



by: Handan Akil © 2017 Journal of Ophthalmic and Vision Research; date of Web Publication 15-Feb-2017



- A) An example of highlighted prelaminar vessels in a normal eye. The vascular flow index of the prelaminar area is calculated by measuring the mean decorrelation in the column between 50 and 250 μm deep within Elschnig's scleral ring.
- B) In the sagittal section image of the same optic nerve head, a large part of the prelaminar region is included between the two red lines 50 and 250 μm from the disc surface (size, 3x3mm)

by: Etsuo Chihara et al. http://arvojournals.org/ on 06/04/2017





## 50 glaucoma patients and 30 normal subjects

In the glaucoma group

total ONH vessel density
 were reduced by
 24.7% (0.412 versus 0.547; p < 0.0001)</li>

temporal ONH vessel
density were reduced by
22.88% (0.364 versus 0.472; p = 0.001).

Significant correlations were found between temporal and total ONH vessel density and

- RNFL
- GCC
- VF MD mean deviation -
- Visual field index.

Total **(a)** and temporal **(b)** ONH acquisition in a **normal** patient. Total **(c)** and temporal **(d)** ONH acquisition in a **glaucoma** patient by: Pierre-Maxime Lévêque et al. Journal of Ophthalmology 2016



(A) The highlighted RPC (Radial Peripapillary Capillary) of the superficial retina (B) En face image of the retinal nerve fiber layer defects (between arrows) in an eye With POAG.

In this image, there is a **defective RPC** between the arrows and a **corresponding** retinal nerve fiber layer defect between the arrows. In this case, the tissue depth is between **0 and 80 \mum**, and the highlighted **area is 700 \mum from the disc margin** (size, 4.5mm x4.5 mm)

by: Etsuo Chihara et al. http://arvojournals.org/ on 06/04/2017

In summary, the PLFI/UA (prelaminar flow index of the optic disc unit area PLFI/UA), and VD (peripapillary vessel density of the superficial retina) decreased in glaucomatous eyes. The discriminatory power of the PLFI/UA and VD to differentiate POAG from normal eyes was less than that of the structural parameters; that is, the GLV (global loss volume of the ganglion cell complex) and CP NFLT(circumpapillary retinal nerve fiber layer thickness)

#### by: Etsuo Chihara et al. http://arvojournals.org/ on 06/04/2017

#### Glaucoma

#### Discriminatory Power of Superficial Vessel Density and Prelaminar Vascular Flow Index in Eyes With Glaucoma and Ocular Hypertension and Normal Eyes

Etsuo Chihara,1 Galina Dimitrova,2 Hiroyuki Amano,1 and Tomoyuki Chihara3

<sup>1</sup>Sensho-kai Eye Institute, Iseda Uji, Kyoto, Japan

<sup>2</sup>City General Hospital "8<sup>th</sup> September," Department of Ophthalmology, Skopje, Macedonia <sup>3</sup>Department of Ophthalmology, Kansai Medical University, Hirakata, Osaka, Japan

Correspondence: Etsuo Chihara, Senshokai Eye Institute, Minamiyama 50-1, Iseda Uji, Kyoto, 611-0043, Japan; chihara-oph@umin.net.

Submitted: September 7, 2016 Accepted: December 19, 2016

8

Citation: Chihara E, Dimitrova G, Amano H, Chihara T. Discriminatory power of superficial vessel density and prelaminar vascular flow index in eyes with glaucoma and ocular hypertension and normal eyes. *Invest Opbtbalmol Vis Sci.* 2017;58:690–697. DOI:10.1167/iovs.16-20709 PURPOSE. We evaluate the ability of optical coherence tomography angiography parameters, such as the peripapillary vessel density of the superficial retina and prelaminar flow index of the optic disc (PLFI), to differentiate primary open-angle glaucoma (POAG) and ocular hypertension (OH) from normal eyes.

**METHODS.** The vessel density, PLFI, mean deviation of the visual field, circumpapillary retinal nerve fiber layer thickness (cpNFIT), and global loss volume of the ganglion cell complex were evaluated in one eye of 105 subjects with POAG and OH and normal eyes. The discriminatory powers of these parameters were evaluated based on the area under the curve (AUC) of the receiver operation characteristic curve and multiple comparisons.

RESULTS. The vessel density (P < 0.001) and PLFI/unit area (PLFI/UA; P = 0.020) in eyes with POAG were significantly less than in normal eyes. The vessel density in eyes with OH was significantly (P = 0.018) reduced, whereas the PLFI/UA, global loss volume and cpNFLT were unaffected. The AUCs of the vessel density to discriminate glaucoma and OH from normal eyes were 0.832 and 0.724, respectively, and were significantly better than the PLFI/UA, in which the AUCs were 0.662 (P = 0.002) and 0.569 (P = 0.038), respectively. The powers of the vessel density and PLFI/UA to discriminate POAG from normal eyes were inferior to the global loss volume (P = 0.006 and <0.0001) and cpNFLT (P = 0.055 and P < 0.0001, respectively).

CONCLUSIONS. The vessel density and PLFI/UA decreased significantly in glaucomatous eyes. The vessel density was more efficient than the PLFI/UA for differentiating glaucoma and OH from normal eyes.

Keywords: OCT angiography, vessel density, vascular flow index, glaucomatous optic neuropathy, autoregulation



Retinal nerve fiber layer thickness map, GCC map, VF pattern deviation map, structural OCT image, original OCTA of RPC layer, and the corresponding contour map derived from OCTA of:

(A) preperimetric, (B) early, (C) moderate, and (D) severe glaucomatous eye

by: Rajesh S. Kumar et al. IOVS j November 2016 j Vol. 57 j No. 14 j 6080



(A) En face OCTA image of the optic disc (B) structural OCT (image), (C) RNFL thickness map, (D) VF pattern deviation map, (E) GCC map, and (F) the corresponding contour map derived from OCTA of RPC layer of a severe glaucomatous eye with the affected/damaged regions shown in red (C-F)

by: Rajesh S. Kumar et al. IOVS j November 2016 j Vol. 57 j No. 14 j 6080

# CONCLUSIONS. Vascular parameters could be a useful adjunct tool to evaluate/diagnose glaucoma. Longitudinal studies are needed to determine their use in early detection and prognostication

by: Rajesh S. Kumar et al. IOVS j November 2016 j Vol. 57 j No. 14 j 6080

Multidisciplinary Ophthalmic Imaging

#### Discriminant Function of Optical Coherence Tomography Angiography to Determine Disease Severity in Glaucoma

Rajesh S. Kumar,<sup>\*,1</sup> Neha Anegondi,<sup>2</sup> Rachana S. Chandapura,<sup>2</sup> Suria Sudhakaran,<sup>1</sup> Sujatha V. Kadambi,<sup>1</sup> Harsha L. Rao,<sup>1</sup> Tin Aung,<sup>3,4</sup> and Abhijit Sinha Roy<sup>2</sup>

<sup>1</sup>Narayana Nethralaya Eye Hospital, Bangalore, India

<sup>2</sup>Imaging, Biomechanics and Mathematical Modeling Solutions, Narayana Nethralaya Foundation, Bangalore, India

<sup>3</sup>Singapore Eye Research Institute and Singapore National Eye Center, Singapore

<sup>4</sup>Yong Loo Lin School of Medicine, National University of Singapore, Singapore

Correspondence: Rajesh S. Kumar, Glaucoma Services, Narayana Nethralaya, 121/C, Chord Road, 1 'R' Block, Rajajinagar, Bangalore 560 010, Karnataka, India; raj\_skumar@yahoo.com.

Current affiliation: \*Cleveland Clinic Eye Institute, Abu Dhabi, UAE.

Submitted: May 24, 2016 Accepted: October 9, 2016

Citation: Kumar RS, Anegondi N, Chandapura RS, et al. Discriminant function of optical coherence tomography angiography to determine disease severity in glaucoma. *Invest Ophtbalmol Vis Sci.* 2016;57:6079– 6088. DOI:10.1167/iovs.1619984 PURPOSE. To determine the discriminant function of optical coherence tomography angiography (OCTA) by disease severity in glaucoma.

METHODS. In this prospective, observational cross-sectional study, all subjects underwent visual fields, retinal nerve fiber layer (RNFL) measurements, and OCTA imaging. Local fractal analysis was applied to OCTA images (radial peripapillary capillaries [RPC] layer). Vessel density en face and inside the disc and spacing between large and small vessels were quantified. Stepwise logistic regression was performed and a glaucoma severity score (range, 0-1: 0, normal; 1, severe glaucoma) was developed by using global and regional (superotemporal [ST], inferotemporal [IT], temporal, superonasal [SN], inferonasal, and nasal) vascular parameters. Glaucoma severity score was compared with visual field and RNFL indices.

**RESULTS.** One hundred ninety-nine eyes (112 subjects) with glaucoma (28 eyes preperimetric; 83 early, 43 moderate, and 45 severe glaucoma) and 74 normal (54 subjects) eyes were enrolled. Preperimetric and glaucomatous eyes had significantly altered (P < 0.001) global vascular parameters as compared to normal; regionally, ST, then SN and IT sectors (in that order) showed more change in glaucomatous eyes. Vascular parameters showed better discriminant ability (area under the curve [AUC], sensitivity, and specificity of 0.70, 69.2%, and 72.9%, respectively) than structural parameters between normal and preperimetric glaucomatous eyes. Vascular parameters had comparable AUC (P > 0.05) to visual fields for perimetric glaucoma. Glaucoma severity score identified preperimetric glaucoma and early glaucoma better than did visual fields.

Conclusions. Vascular parameters could be a useful adjunct tool to evaluate/diagnose glaucoma. Longitudinal studies are needed to determine their use in early detection and prognostication.

Keywords: optical coherence tomography, glaucoma, visual field, angiography



# Henry Ford 1863-1947

C'è vero progresso solo quando i vantaggi di una nuova tecnologia diventano per tutti



### Simposio GOAL Moderatore: Danilo Mazzacane

## Thank you for your kind attention!



www.amedeolucente.it