

7th SAN RAFFAELE OCT & RETINA FORUM

23 – 24 March 2023

Milan – Nhow Hotel

SCIENTIFIC PROGRAMME

THURSDAY- MARCH 23rd

08:00 – REGISTRATION

08.30 - 09.00 - INTRODUCTION

F. Bandello (Milan, Italy), G. Querques (Milan, Italy)

09.00 - 10.00 - RETINAL VASCULAR DISEASES PART 1 & VR

Chairmen: *J. Cunha Vaz (Coimbra, Portugal), A. Loewenstein (Tel Aviv, Israel), E. Midena (Padua, Italy), U. Schmidt (Wien, Austria)*

09.00 - 09.10 - Retinal Vasculopathies: how we manage ischemia
R. Lattanzio (Milan, Italy)

09.10 - 09.20 - Macula versus Periphery in Diabetic Retinopathy: OCT-Angiography and Ultrawide Field Fluorescein Angiography Imaging of retinal non-perfusion
S. Vujosevic (Milan, Italy)

09.20 - 09.30 - Diabetic Macular Edema in daily practice: Data from the Fight Retinal Blindness! Registry
F. Viola (Milan, Italy)

09.30 - 09.40 - Swept-Source OCTA vessel density metrics discriminates severity staging of nonproliferative diabetic retinopathy
J. Cunha vaz (Coimbra, Portugal)

09.40 - 09.50 - Enhanced visualization using the Beyeonics One™ Augmented Reality surgical headset in PPV ERM peeling
A. Loewenstein (Tel Aviv, Israel)

09.50 - 10.00 - Multimodal imaging of retinal detachment
S. Rizzo (Rome, Italy)

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Professor & Chairman

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10.00 - 11.00 - RETINAL VASCULAR DISEASES PART 2

Chairmen: *F. Bandello (Milan, Italy), U. Chakravatry (Belfast, USA), J. Pulido (Philadelphia, USA), M. Zarbin (Newark, USA)*

10.00 - 10.10 - Clinical Outcomes of Diabetic Macular Edema Patients Treated with Faricimab and Aflibercept: A Subcohort Analysis of Patients with 20/50 or Worse Vision Across Faricimab Phase 3 Clinical Trials

M. Zarbin (Newark, USA)

10.10-10.20 - Longitudinal evaluation of retinal photoreceptor and microvascular changes in type 1 diabetes

M.C. Parravano (Rome, Italy)

10.20 - 10.30 - Management of moderate to severe diabetic retinopathy. The 4 year protocol W results *L.M. Jampol (Chicago, USA)*

10.30 - 10.40 - Peripapillary collateral circles in venous occlusion (OVCR): OCT-A characterization and role of lamina cribrosa

L. Pierro (Milano, Italy)

10.40 - 10.50 - A new therapeutic opportunity in the treatment of diabetic macular edema: Brolucizumab

F. Boscia (Bari, Italy)

10.50 - 11.00 – Discussion on the topics above mentioned of the faculty involved

11.00 -11.30 COFFEE BREAK AND POSTER EXHIBITION - VISIT THE EXHIBITION AREA

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11.30 -13.00 - AMD

Chairmen: *P. Rosenfeld (remote) (Miami, USA), S. Sadda (Los Angeles, USA), D. Sarraf (Los Angeles, USA), G. Querques (Milan, Italy)*

11.30 - 11.40 - The onset and progression of persistent hypertransmission defects in intermediate AMD: A novel clinical trial endpoint

P. Rosenfeld (remote) (Miami, USA)

11.40 - 11.50 - Color fundus photography, infrared reflectance or OCT to detect fibrosis

U. Chakravarthy (Belfast, USA)

11.50 - 12.00 - High Resolution OCT in geographic atrophy

G. Staurenghi (Milan, Italy)

12.00- 12.10 - AI-based management of GA

U. Schmidt (Wien, Austria)

12.10 -12.20 - Nascent geographic atrophy as an OCT biomarker of type 3 MNV development

R. Sacconi (Milan, Italy)

12.20 -12.30 - The Apex of Drusen: why is this a critical PathoAnatomical Location in AMD?

D. Sarraf (Los Angeles, USA)

12.30 -12.40 - OCT risk factors for progression from intermediate AMD to macular neovascularization

S. Sadda (Los Angeles, USA)

12.40 -12.50 - Centenarian patients with wet AMD

V. Capuano (Paris, France)

12.50 - 13.00 – Discussion on the topics above mentioned of the faculty involved

13.00 -14.30 - PARALLEL SESSION

LUNCH SESSION – LUNCH BREAK AND POSTER EXHIBITION -- VISIT THE EXHIBITION ACTIVITIES IN THE OCT LOUNGE ROOMS - **with the unrestricted educational grant of Zeiss**

OCT and OCTA Biomarkers: Advancing diagnosis and management

Chairman: *Francesco Bandello (Milan, Italy)*

F. Bandello (Milan, Italy), E. Borrelli (Milan, Italy), S. Vujosevic (Milan, Italy)

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13.00 -14.30 – PARALLEL SESSION

LUNCH SESSION – LUNCH BREAK AND POSTER EXHIBITION -- VISIT THE EXHIBITION ACTIVITIES IN THE OCT LOUNGE ROOMS – *with the unrestricted educational grant of Roche*

Faricimab: the evolution in the treatment of retinal diseases is now available

Chairmen: G. Querques (Milan, Italy), U. Chakravarthy (Belfast, USA)

How faricimab is changing the clinical practice: real life cases confirm pivotal trial results –
U. Chakravarthy (Belfast, USA), F. Viola (Milan, Italy) Dr G. Grimaldi (Switzerland)

14.30 -18.00 – SESSION III - ROSARIO BRANCATO RETINA AWARD

Chairmen: J. Pulido (Philadelphia, USA), L.M. Jampol (Chicago, USA), S. Sadda (Los Angeles, USA), U. Chakravarthy (Belfast, USA), D. Sarraf (Los Angeles), USA M. Zarbin (Newark, USA), J. Cunha Vaz (Coimbra, Portugal)

14.30 -14.45 - ROSARIO BRANCATO RETINA AWARD – presentation award ceremony -

Chairman: F. Bandello (Milan, Italy)

Presentation of the case by the winner

14.45 -16.30 CASE STUDIES

Chairmen: F. Bandello (Milan, Italy), G. Querques, (Milan, Italy)

15:00-15:06

A Unique Presentation Of Bilateral Chorioretinal Atrophy

We report on the unique retinal phenotype of a young patient with a history of chemotherapy and Cisplatin overdose. At 10 years of age, she underwent 17 cycles of chemotherapy involving adriamycin, cyclophosphamide, methotrexate, and cisplatin for osteosarcoma of the femur. During the first cycle, the patient was admitted to intensive care due to an unintentional cisplatin overdose.

Andrea Grosso, San Mauro Torinese (Italy)

15:06-15:12

The Subretinal Fluid Tolerance Post Faricimab Injection Short Case Review Study

We retrospectively reviewed a 64-year-old female Caucasian single eye patient, presented to our clinic on September 2019 with (wet AMD) in the right eye & advanced wet AMD with fibrosis and scar in the left eye. The patient has received initially 3 loading doses of aflibercept (40 mg/ml) and then was placed on treat and extend regimen (T&E). The best corrected vision (BCA) has been improved from 0.5 to 0.8 with persistence of subretinal fluid during the treatment period. On her last visit, the patient then shifted to Faricimab.

Fawwaz F Almamoori, Amman (Jordan)

15:12-15:18

Efficacy And Safety Of Brolucizumab For Serous Drusenoid Pigment Epithelium Detachment Non-Responder To Bevacizumab And Aflibercept

A 56-year-old woman with mixed DPED and overlying subretinal fluid in her right eye was initially treated with three consecutive monthly intravitreal injections of bevacizumab and three consecutive monthly intravitreal injections of aflibercept with no visual and anatomical improvement. Switching to intravitreal injection of brolucizumab was performed.

Andrea Saitta, Ravenna (Italy)

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- 15:18-15:24 **Brolucizumab Immunological Phenomena- Real World Vs Randomized Studies**
A retrospective case series of patients with at-least one intravitreal brolucizumab injection for nAMD as switch therapy or course for treatment naïve. Visual acuity, Macular Optical coherence tomography (OCT), number of injections and side effects were analysed. Bilateral therapy and one-eyed patient were excluded.
Mahmoud Elbalawi, Blackburn (United Kingdom)
- 15:24-15:30 **Central Serous Chorioretinopathy By Retromode Imaging**
The study was conducted at Fondazione Policlinico Universitario A. Gemelli, IRCCS, Rome, Italy, between September and December 2022. Each enrolled patient underwent a complete ophthalmological examination, which included best corrected visual acuity (BCVA), slit-lamp examination, dilated fundus evaluation, optical coherence tomography (OCT) B-scan, AF, and RM. We evaluated the presence of the serous retinal detachment and the area of its extension through the different techniques. Moreover, whereas it could be possible, we performed an enface exam, in order to analyze the extension of the serous detachment. Retinal pigmented epithelium (RPE) dystrophy was evaluated as well on AF and RM.
Claudia Fossataro, Rome (Italy)
- 15:30-15:36 **Peripapillary Pachychoroid Syndrome Incidentally Treated With Dexamethasone Implant: Natural History, A Case Report**
This is a case report. The patient, a 77-years old male with type-two diabetes, underwent a complete ophthalmological examination at baseline and at each follow-up visit, including fundus autofluorescence and optical coherence tomography (OCT). Fundus fluorescein angiography (FFA), and indocyanine green angiography (ICGA) were also performed to confirm the diagnosis.
Alessandro Feo, Turin (Italy)
- 15:36-15:42 **Clinical Case: Azoor**
A healthy 15-year-old myopic woman presented at ophthalmic emergency room complaining visual acuity (VA) loss in the left eye. Visual acuity of left eye was motu manu, while VA of right eye was 20/20. The anterior segments were normal. A relative afferent pupillary defect was detectable, but no lesion was found in the posterior pole but two extrafoveal spots of chorioretinal atrophy. There was no family history of retinal or autoimmune diseases, all serological tests were negative, head and orbital magnetic resonance imaging (MRI) was negative. OCT was performed and retinal pigmented epithelium (RPE) abnormality was found, but it was thought no to be a proper explanation of a sudden visual loss. The patient was firstly diagnosed with retrobulbar optic neuritis and underwent a corticosteroid therapy without VA improvement. Thereafter, the patients came to our attention. We reviewed the SD-OCT scans and FAF images finding an absence of inner and outer photoreceptor segment (IS/OS) layer and punctuate hyper-autofluorescence (hyper-AF) colocalized in the posterior pole, where only the peripapillary retina was preserved. After that, we performed electrophysiological tests, which highlighted alterations in visual evoked potentials (VEPs) pattern and multifocal electroretinogram (mERG), and fluorescein angiography/indocyanine angiography (FA/ICG), which displayed an extrafoveal scar lesion with fine granularity at the posterior pole. These findings were suggestive of AZOOR. Inquiring into any possible trigger, we discover the patient got a double vaccination (papilloma virus and meningococcal) shortly before the pathology onset.
Matteo Belletti, Bologna (Italy)

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15:42-15:48 **Neovascular Glaucoma Post Retinal Vasculitis With Vascular Occlusion Management With Preserflo Microshunt And Panretinal Photocoagulation**

A 77-year female Caucasian was diagnosed left wet age related macular degeneration (AMD) (Figure 1,2). The visual acuity was 6/6 right & 6/12 (69 letters) left. She had background history of right phacotrab and left phaco with goniosynechiolysis for primary open angle glaucoma. She was hypertensive. 2 weeks post second intravitreal Brolucizumab injection she presented with pain, redness, floaters and diagnosed intraocular inflammation (IOI) with retinal vasculitis (Optos Figure 3, 4). She was started on oral prednisolone 60 mg/day and one-week later vision dropped to counting fingers. FFA confirmed retinal vasculitis (RV) with vascular occlusion (RO) (Figure 5,6). She had 3 doses of one gram intravenous methylprednisolone daily. Vision remained poor and orbital floor triamcinolone 40 mg/ml steroid was given. Vision improved to 6/75 (32 letters). Inflammation settled and vision remained poor and stable due to atrophic changes. 10 months later patient developed left neovascular glaucoma with significant rubeosis, corneal oedema and closed angle (Figure 7). Patient was given intravitreal Ranibizumab and PRP (Figure 8) was performed followed by left Preserflo shunt with MMC within 2 weeks. Intraocular pressure remains under control with comfortable eye post treatment with poor visual outcome.

Shafiulla Khaji, Blackburn (United Kingdom)

15:48-15:54 **Chorioretinitis In Human Immunodeficiency Virus-Infected Patient**

A male patient T. M., born in 1978, came to the Center with the blurred vision with floaters. According to the patient words, initial sign was a blurry vision in the left eye, which was a five month ago. The patient underwent standard ophthalmic and specific research methods, which consists Blood Test, TORCH screen, HIV testing.

Dilbar Makhkamova, Tashkent (Uzbekistan)

15:54-16:00 **Choroidal Involvement In Rosai-Dorfman Disease Successfully Treated With Mek Inhibitor**

To describe the case of a 64-year-old male diagnosed with Rosai Dorfman Disease (RDD) by means of choroidal biopsy, and successfully treated with Cobimetinib, a MEK inhibitor. The anatomical and functional results are described over a five-year follow-up.

Chiara Giuffrè, Palermo (Italy)

16:00-16:06 **Optical Coherence Tomography Angiography Of The Choriocapillaris In Subclinical Toxoplasmosis Chorioretinitis: A Case Report**

Close follow-ups and serial OCTA images of a 9-year-old girl known case of juvenile Idiopathic Arthritis and ocular toxoplasmosis due to the re-activation of the ocular disease (figure 1).

Ahmed Alsatrawi, Manama (Bahrain)

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- 16:06-16:12 **Novel Impg2 Mutation Causing Adult Macular Vitelliform Dystrophy: A Case Report**
A 47-year-old woman complaining of wavy vision was referred to our clinic. Her past medical history and family history did not reveal any ocular disease. Visual acuity was 20/20, anterior segment examination and intraocular pressure were within normal limits. Funduscopic examination revealed a round vitelliform lesion in both eyes, which on short-wave fundus autofluorescence appeared as hyperautofluorescent. OCT showed mixed hypo/hyperreflective vitelliform material deposition along with retinal pigment epithelium and ellipsoid zone disruption. Choroidal neovascularization was excluded. Genetic analysis revealed a novel single, plausibly pathogenetic, mutation in the IMPG2 gene. The previously unreported mutation p.Glu160Ter (c.478G>T) causes a shorter truncated version of the original IMPG2 protein to be produced.
Nicolò Ribarich, Milan (Italy)
- 16:12-16:18 **Cilioretinal Artery Occlusion In A Young Woman**
To analyze the diagnosis and treatment of cilioretinal artery occlusion in a young pregnancy woman. A woman K. A., born in 1999 y (23 years old) with a gestational age of 11 weeks, came to our center with complaints of a sharp decrease in vision and the appearance of spots in front of the left eye. According to the patient, notes a decrease in vision for 1 day. The patient underwent standard ophthalmic and special research methods.
Dilbar Makhkamova, Tashkent (Uzbekistan)
- 16:18-16:24 **Lurbinectedin Improves Macular Edema In A Case Of Central Retinal Vein Occlusion**
To evaluate the response to lurbinectedin in a case of macular edema (ME), secondary to central retinal vein occlusion (CRVO). Serial spectral domain optical coherence tomography (SD-OCT) scans were taken in a 70-year-old man with a 24-month history of ME secondary to CRVO in the right eye. The patient underwent 5 cycles of chemotherapy with lurbinectedin between October 2018 and May 2019. Central macular thickness (CMT) before and after each chemotherapy cycle was measured together with progression analysis.
Filippo Simona, Muralto (Sweden)
- 16:24-16:30 **Retinal Vein Occlusion In A Young With Covid-19: A Case-Report**
Description of a case-report of Retinal vein occlusion in a young girl aged 15 affected by Covid-19. Methods. The patient has undergone a complete eye examination: natural and correct examination of the visus, measurement of eye pressure, anterior segment examination with slit lamp, orthoptic evaluation, fundus examination, OCT examination and fluorangiography.
Angela Turtoro, Catanzaro (Italy)

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16:30- 17.00 BEST POSTER SESSION

- 16:30-16:36 Resistive Index of Central Retinal Artery, Aortic Arterial Stiffness and Octa Correlated Parameters in the early Stage of Fabry Disease
Flavia Chiosi, Naples (Italy)
- 16:36-16:42 Microvascular Changes in Treatment Naïve Quiescent Macular Neovascularizations Complicated By Exudation
Emanuele Crincoli, Créteil (France)
- 16:42- 16:48 Efficacy And Safety Of Intravitreal Pegcetacoplan In Geographic Atrophy: 24-Month Results From The Phase 3 Oaks And Derby Trials
G. Staurenghi, Milan (Italy)
- 16:48-17:00 Discussion (on the topics above mentioned)

17.00- 17.45 – PARALLEL SESSION -With the unrestricted educational grant of Novartis

Brolucizumab dal lancio ad oggi: una storia di fluido ed efficacia

Chairman: G. Querques (Milan, Italy)

Tutti i fluidi sono patologici: l'importanza di mantenere la retina asciutta - *F. Boscia (Bari, Italy)*

La gestione del paziente: 2 anni di esperienza con Brolucizumab - *A. Invernizzi (Milan, Italy)*

Brolucizumab: una storia di efficacia lunga 2 anni e oltre - *S. Vujosevic (Milan, Italy)*

18.00 WALKING POSTER DISCUSSION WITH THE POSTER'S AUTHORS

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FRIDAY- MARCH 24th

08:30 REGISTRATION

08.15 - 09.00 – PARALLEL SESSION - Breakfast Meeting: meet the expert – with the unrestricted educational grant of DOC

Complementi nella gestione delle retinopatie: oltre la nutraceutica

Chairman: G. Querques (Milan, Italy)

Case History :

La nutraceutica è una nuova disciplina in grande sviluppo a livello mondiale e studia gli estratti di piante, animali, minerali e microrganismi, impiegati come nutrienti isolati, supplementi o diete specifiche. Un nutraceutico può essere definito come un alimento che fornisce benefici salutistici oltre al proprio contenuto nutrizionale

Nuovi studi confermano che alcune sostanze nutritive, tra le quali la Diosmina, sono molto efficaci per prevenire le complicanze della degenerazione maculare, malattia che costituisce una delle cause più frequenti di cecità legale.

I nutraceutici hanno un ruolo benefico sulla salute, in particolare per la prevenzione e il trattamento di alcune patologie croniche oculari. Il corso si propone di approfondire il beneficio alimentare con illustri esperti di Retina.

08.15 – 09.00 – PARALLEL SESSION - Breakfast & Cases – with the unrestricted educational grant of Abbvie

Inflammation and DEX-I efficacy in retinopathies: beyond VEGF

Practical consideration: how to manage patient with suboptimal response to a-VEGF – *R. Lattanzio (Milan, Italy)*

OCT and OCT-A biomarkers: how to predict the treatment outcomes - *S. Vujosevic (Milan, Italy)*

The inflammatory rationale behind DME: the role of AI - *L. Toto (Chieti, Italy)*

RVO: how to be fast and effective - *F. Bandello (Milan, Italy)*

09.00 -11.00 – VR & Other Retinal Diseases & Investigations - Part 1

Chairmen: F. D'Esposito (Naples, Italy), L.M. Jampol (Chicago, USA), J. Pulido (Philadelphia, USA)

09.00 - 09.10 - Clinical challenges dealing with retinal inflammation
V. Cicinelli (Milan, Italy)

09.10 - 09.20 - Vitreoretinal Lymphoma: a diagnostic challenge for retina specialists
E. Miserocchi (Milan, Italy)

09.20 - 09.30 - Perifoveal Vascular Anomalous Complex and the spectrum of degenerative microvascular macular diseases
I. Zucchiatti (Milan, Italy)

09.30 - 09.40 - Oct image teleacquisition. A remote based approach to manage macular disease
M. Nicolò (Genoa, Italy)

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09.40 - 09.50 - Microstructural assessment of subthreshold laser impact on outer retinal layers

M. Lupidi (Ancona, Italy)

09.50 - 10.00 - Inflammation and artificial intelligence

E. Midena (Padua, Italy)

10.00 - 10.10 - Moving towards the distinction of multiple flow signals by optical coherence tomography angiography

A. Arrigo (Milan, Italy)

10.10 - 10.20 - Imaging features associated with biocycle

U. Introini (Milan, Italy)

10.20 - 10.30 - OCT biomarkers predicting reading performance in patients with neovascular AMD

E. Borrelli (Milan, Italy)

10.30 - 10.40 - Treatment-naive quiescent macular neovascularization: AMD versus pachychoroid

A. Carnevali (Catanzaro, Italy)

10.40 - 10.50 - Choroidal Neovascularization in Macular Dystrophies

M. Battaglia Parodi (Milan, Italy)

10.50 - 11.00 - Discussion on the topics above mentioned of the faculty involved

11.00-11.30 - COFFEE BREAK & POSTER EXHIBITION VISIT - THE EXHIBITION AREA

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11.30 -13.00 – VR & Other Retinal Diseases & Investigations - Part 2

Chairmen: T. Avitabile (Catania, Italy), F. Boscia (Bari, Italy), P. Lanzetta (Udine, Italy), M. Rispoli (Rome, Italy)

11.30 - 11.40 - RPE replacement therapy project with subretinal injection of iPSC-RPE
M. Romano (Milan, Italy)

11.40 -11.50 - Correlation between vitreous miRNA levels and retinal perfusion changes in vitreoretinal surgery
R. Mastropasqua (Pescara, Italy)

11.50 -12.00 - Full thickness macular hole: Are supra-RPE granular deposits remnants of photoreceptors outer segments? Clinical implications
A. Govetto (Varese, Italy)

12.00- 12.10 - Early DME as negative prognostic factor after cataract surgery
G. Panozzo (Bussolengo, VR, Italy)

12.10 -12.20 - Long-term outcomes of anti-VEGF therapy for myopic choroidal neovascularization
P. Lanzetta (Udine, Italy)

12.20 -12.30 - Combining sound and oct for noninvasive stiffness measurements of ocular tissues
J. Pulido (Philadelphia, USA)

12.30 -12.40 - Advanced in OCT Angiography and exudative AMD
M.C. Savastano (Rome, Italy)

12.40 -12.50 - Vitrectomy with vs. without ILM peeling for small macular holes: clinical and imaging factors associate with better outcomes
M. Reibaldi (Turin, Italy)

12.50 - 13.00 Final Discussion & TAKE HOME MESSAGE

F. Bandello - G. Querques "See You next year"

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POSTER SESSION:

Age-Related Macular Degeneration

- P.01 **VITELLIFORM LESIONS ASSOCIATED WITH LEPTOCHOROID AND PSEUDODRUSEN**
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