

Early Fluid Resolution Association with Treatment Interval Maintenance at Week 48 in Patients with Treatment-Naïve Neovascular Age-Related Macular Degeneration Receiving Aflibercept 8 mg: Post Hoc Analysis of the Phase 3 PULSAR Trial

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Disclosures



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PULSAR Study Design and Dosing Schedule



96-week, multicenter, randomized, double-masked study in patients with treatment-naïve nAMD Randomized at baseline 1 (2q8) : 1 (8q12) : 1 (8q16)

Key secondary endpoint:

Proportion of patients without IRF and SRF in the central subfield

Primary endpoint: Mean change in BCVA (non-inferiority)

	Day 1	Wk 4	Wk 8	Wk 12	Wk 16	Wk 20	Wk 24	Wk 28	Wk 32	Wk 36	Wk 40	Wk 44	Wk 48
2q8 (n=336)	X	Х	X		X	0	X	0	X	0	X	0	Х
8q12 (n=335)	X	Х	Х		0	X	0	0	Х	O	0	Х	0
8q16 (n=338)	Х	X	X		0	0	Х	0	0	0	X	0	0

DRM Criteria for Shortening Dosing Interval

 >5-letter loss in BCVA compared with Week 12, due to persistent or worsening nAMD

AND

 >25 µm increase in CST compared with Week 12, or new-onset foveal neovascularization, or foveal hemorrhage

DRM in Year 1

Intervals can only be shortened

Multiple opportunities to shorten interval

Minimum interval for all patients was Q8

Week 16 and 20: Patients on 8q12 and 8q16 meeting DRM criteria shortened to Q8

Week 24: Patients on 8q16 meeting DRM criteria shortened to Q12

Week 32 and 44 for 8q12 and Week 40 for 8q16: Treatment interval shortened by 4 weeks for patients meeting DRM criteria

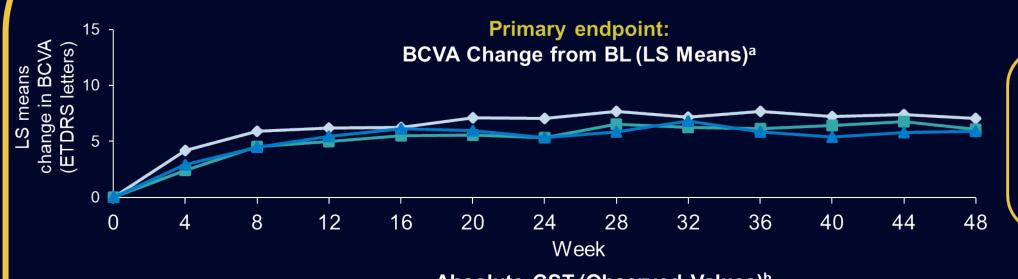
Stippled boxes = initial treatment phase; X = active injection; o = sham injection. Note: Table does not reflect all dosing options once a patient's dosing interval is shortened.

2q8, aflibercept 2 mg every 8 weeks after 3 initial monthly injections; 8q12, aflibercept 8 mg every 12 weeks after 3 initial monthly injections; 8q16, aflibercept 8 mg every 16 weeks after 3 initial monthly injections;

BCVA, best-corrected visual acuity; CST, central subfield thickness; DRM, dose regimen modification; IRF, intraretinal fluid; nAMD, neovascular age-related macular degeneration; Q8, every 8 weeks; Q12, every 12 weeks; SRF, subretinal fluid; Wk, week.

48-Week Visual and Anatomic Outcomes





BCVA Change from BL at Week 48 (LS means; ETDRS letters) +7.0 2q8 +6.1 8q12 +5.9 8q16



CST Change from BL at Week 48 (LS means;ª µm)

-147 8q16

-147 8q12

-136 2q8

aLS mean values (censoring data post-ICE); FAS: 2q8 n=336; 8q12 n=335; 8q16 n=338 (at BL). LS means were generated using MMRM, with baseline BCVA measurement as a covariate, treatment group (aflibercept 2q8, 8q12, 8q16), visit, and stratification variables (geographic region [Japan vs. Rest of World] and BL BCVA [<60 vs. ≥60]) as fixed factors, and interaction terms for BL and visit and for treatment and visit. bObserved values (censoring data post-ICEs); FAS: 2q8 n=336; 8q12 n=335; 8q16 n=338 (at BL).

BL, baseline; ETDRS, Early Treatment Diabetic Retinopathy Study; FAS, full analysis set; ICE, intercurrent event; LS, least squares; MRMM, mixed model for repeated measures.

Analysis of Early Fluid Resolution Associated with Dosing Interval



Objective:

To evaluate if early fluid resolution during the initial treatment phase may serve as a biomarker to predict the likelihood of patients with nAMD achieving extended dosing intervals with aflibercept 8 mg

Methods:

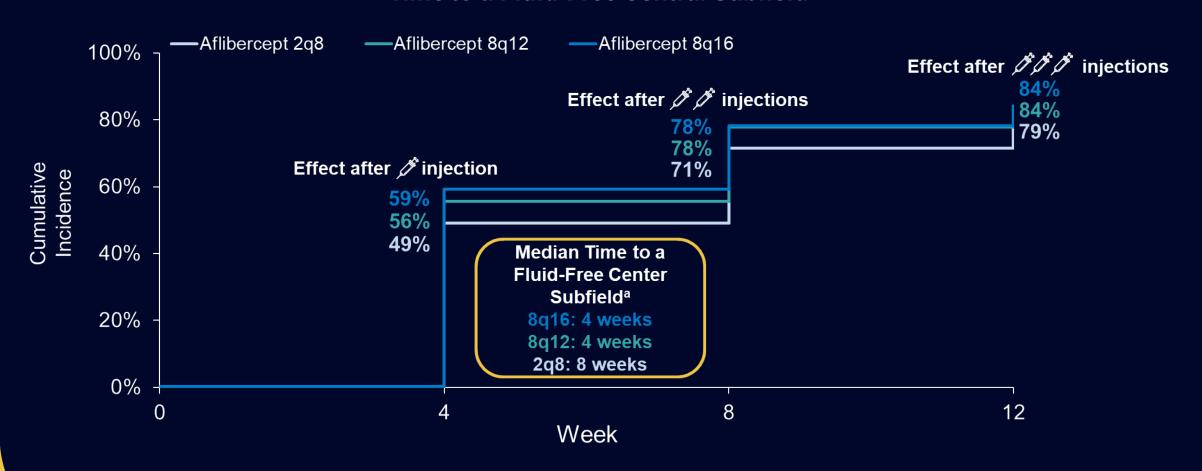
The presence of fluid at Weeks 4, 8, and 12 was analyzed in patients who received intravitreal aflibercept injections, after 3 initial monthly injections. Patients were categorized depending on their fluid status up to Week 12. In this analysis, we focus on the aflibercept 8q16 treatment group

	Day 1	Week 4	Week 8	Week 12
Aflibercept 8q16	1	Ø	ø	
Patients who were fluid free at Week 4		Fluid free	1	1
Patients who were fluid free at Weeks 4 and 8		Fluid free	Fluid free	1
Patients who were fluid free at Weeks 4, 8, and 12		Fluid free	Fluid free	Fluid free
Patients who were never fluid free during the initial treatment phase		Fluid presence 💧	Fluid presence 💧	Fluid presence 💧

Early Fluid Resolution: A Potential Biomarker



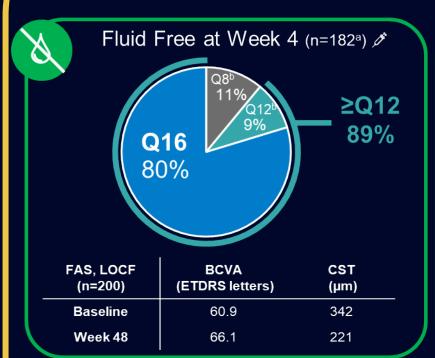
Time to a Fluid-Free Central Subfield

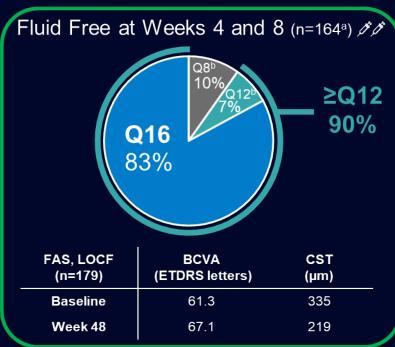


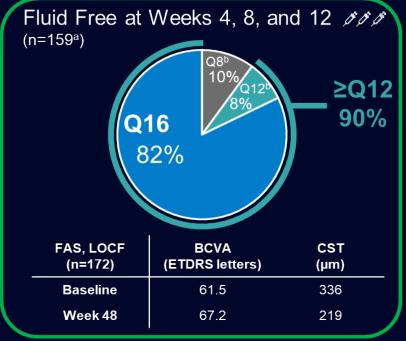
FAS, 2q8 n=336; 8q12 n=335; 8q16 n=338. Time to fluid-free central subfield is defined as the time of first injection until the time where a patient did not have any IRF or SRF in the central subfield for the first time (regardless of whether any retinal fluid was found again after that). a Time to fluid-free retina was analyzed using the Kaplan–Meier method, using the study visits (i.e., multiples of 4 weeks) and not the calendar time as unit.

Patients Maintaining ≥Q12- and Q16-Week Dosing Intervals at Week 48 Based on Early Fluid Status: Aflibercept 8q16 Treatment Group









CST

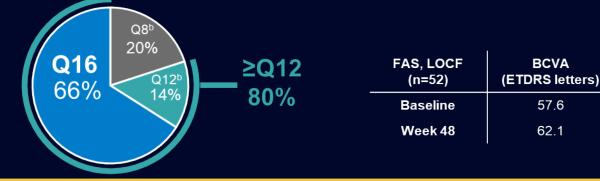
(µm)

432

249

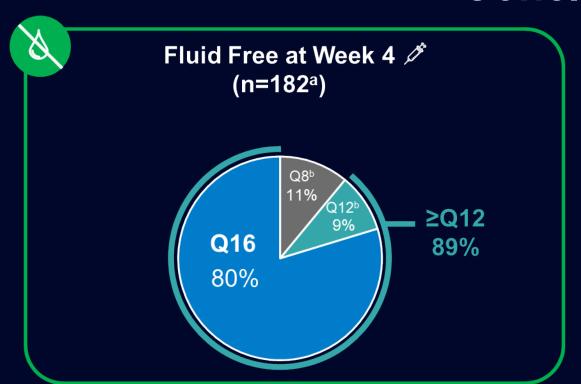


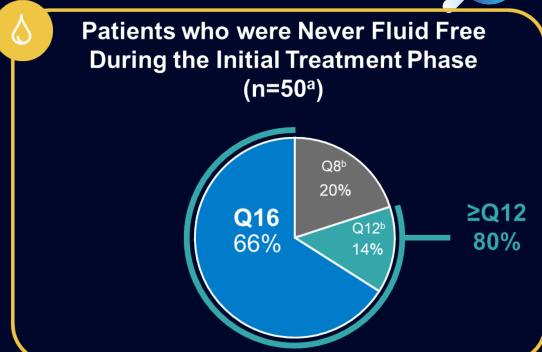
Patients Who
Were Never Fluid
Free During the
Initial Treatment
Phase (n=50°) ***



Conclusions







- Approximately 80% of patients who were fluid free at Week 4 maintained a Q16 interval until
 Week 48 compared with 66% of patients who had never been fluid free during the initial treatment
 phase
- These results suggest that early fluid resolution during the initial treatment phase may serve as a biomarker to predict the likelihood of patients with nAMD achieving extended dosing intervals with aflibercept 8 mg