

Intraocular Pressure Outcomes with Intravitreal Aflibercept 8 mg and 2 mg in Patients with Neovascular Age-related Macular Degeneration Through Week 96 of the PULSAR Trial

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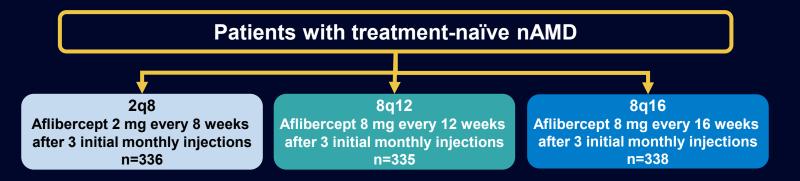
Disclosures



- Paolo Lanzetta: Consultant: Aerie, Allergan, Apellis, Bausch & Lomb, Bayer, Biogen, Boehringer Ingelheim, Genentech, I-Care, Novartis, Ocular Therapeutix, Outlook Therapeutics, and Roche
 - AL: Consultant: 4DMT, AbbVie, Alkeus, Annexon, Apellis, Astellas, Bayer Health Care, Beyeonics, Eyepoint, J&J, NotalVision, Novartis, Ocular Therapeutics, Ocuphire Pharma, Ocuterra, Oculis, Opthea, Oxurion, Roche, and Syneos. MS: Consultant: Alkahest and Bayer; Receives funding: Allergan, Kanghong, and Regeneron. RG: Consultant: AbbVie, Allergan, Apellis, Bayer, Biogen, Boehringer Ingelheim, Notal, Novartis, Roche, and Santen; Receives funding: Bayer, Novartis, and Roche. MM: Consultant: AbbVie, Allergan, Apellis, Bayer, Dandelione, Eyepoint, Isarna, Kubota, Lumithera, Novartis, Oculis, Ocuterra, RetinAl, Roche, and Zeiss. USO, CT, and TM: Employees of Bayer AG. SL, PMW, and XZ: Employees of Bayer Consumer Care AG
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PULSAR: Multicenter, Randomized, Double-masked 96-week Study





| | Injection volume | Mean (SD) number of active injections of aflibercept 8 mg or 2 mg through Week 96a |
|-------|---------------------|--|
| 2q8 | 50 μL | 11.9 (2.4) |
| 8q12 | 70 | 9.2 (1.9) |
| 70 μL | <i>τ</i> ο με | 7.8 (2.0) |

This post hoc analysis evaluated the potential effect of the higher injection volume of aflibercept 8 mg versus 2 mg on IOP outcomes for study eyes in patients with nAMD through to 96 weeks

Pre- and Post-injection IOP Assessment



Pre-injection IOP assessment (bilaterally)



Measured at active and sham injection visits



Post-injection IOP assessment (study eye only)



Measured at active and sham injection visits

IOP was measured ~30 to 60 minutes after administration (study eye only)

Symptoms indicative of a higher IOP increase prior to 30 minutes post-injection

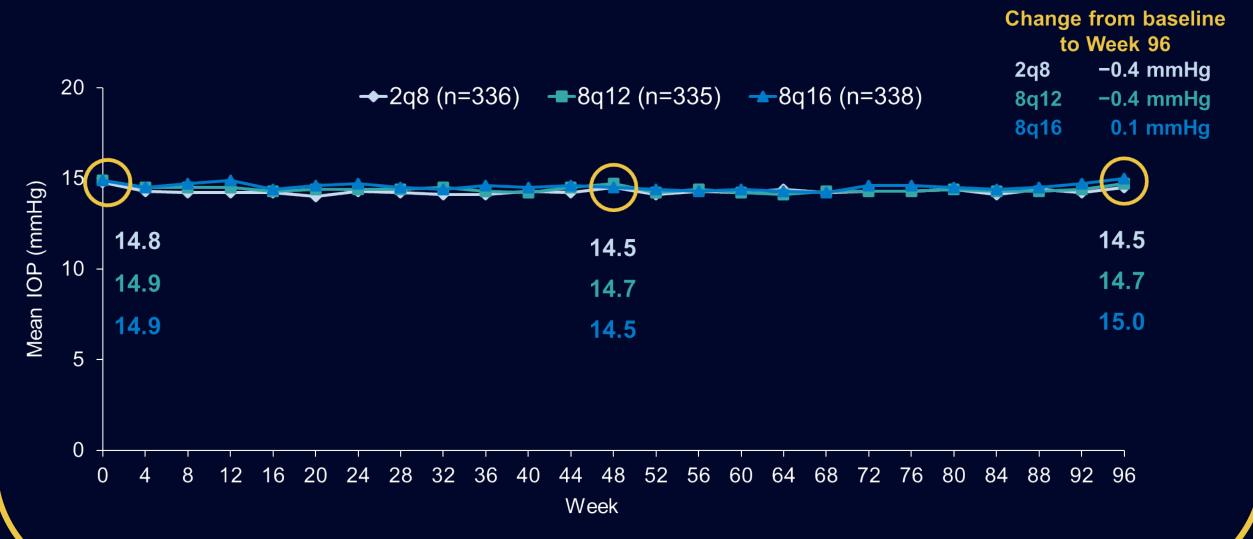
- IOP measured sooner
- Managed at investigator's discretion

Reported post-injection IOP was the last measurement recorded before the patient left the study site^a

The same method of measurement was used in each patient throughout the study (e.g., Goldmann applanation tonometry, rebound tonometry Icare, or Tono-pen™)

Mean Pre-injection IOP Values in Study Eyes Were Similar Through Week 96





Pre-injection IOP in the Study Eye Through Week 96



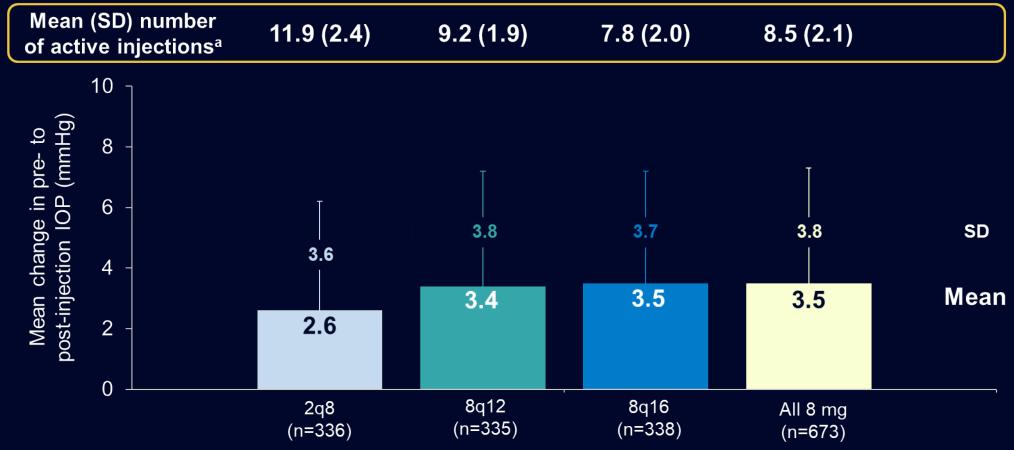
| | 2q8 | 8q12 | 8q16 | All 8 mg |
|--|---------|---------|---------|----------|
| Safety analysis set, n | 336 | 335 | 338 | 673 |
| Pre-injection IOP ≥25 mmHg, n (%)ª | 6 (1.8) | 9 (2.7) | 7 (2.1) | 16 (2.4) |
| Pre-injection IOP ≥35 mmHg, n (%) ^a | 1 (0.3) | 1 (0.3) | 0 | 1 (0.1) |

Proportion of patients with pre-injection IOP ≥25 or ≥35 mmHg at any visit through Week 96 was comparable across the treatment groups

^aAt any visit.

Mean Change in Pre- to Post-injection IOP in Study Eyes at Active Dosing Visits Through Week 96





The difference in mean change in pre- to post-injection IOP was <1 mmHg between treatment groups, no clinically relevant differences were observed

Safety analysis set. Error bars show SD.

Post-inje

| ection IOP in the Study Eye Through Week 96 | P | ulsar | |
|---|---|-------|--|
| | | | |

| | 2q8 | 8q12 | 8q16 | All 8 mg |
|-------------------------------------|---------|---------|---------|----------|
| Safety analysis set, n | 336 | 335 | 338 | 673 |
| Post-injection IOP ≥35 mmHg, n (%)ª | 1 (0.3) | 2 (0.6) | 1 (0.3) | 3 (0.4) |

The proportion of patients with IOP ≥35 mmHg post-injection at any visit through Week 96 was comparable across the treatment groups

Paracentesis or anterior chamber puncture in the study eye through Week 96b

| | 2q8 | 8q12 | 8q16 | All 8 mg |
|--|------------|---------------|------------|------------------|
| Patients requiring paracentesis or anterior chamber puncture/n (%) | 0/336 (0) | 1/335 (0.3) | 0/338 (0) | 1/673 (0.1) |
| Number of events requiring paracentesis or anterior chamber puncture/number of active study eye injections (%) | 0/4007 (0) | 2/3090 (<0.1) | 0/2621 (0) | 2/5711 (<0.1) |

^aAt any visit. ^bSafety analysis set.

IOP-related TEAEs Through Week 96



| | 2q8 | 8q12 | 8q16 | All 8 mg |
|---|----------|----------|----------|----------|
| Safety analysis set, n | 336 | 335 | 338 | 673 |
| Patients with IOP increase or glaucoma, n (%) | 13 (3.9) | 16 (4.8) | 17 (5.0) | 33 (4.9) |
| Angle closure glaucoma | 1 (0.3) | 1 (0.3) | 1 (0.3) | 2 (0.3) |
| Glaucoma | 1 (0.3) | 1 (0.3) | 3 (0.9) | 4 (0.6) |
| Intraocular pressure increased | 10 (3.0) | 12 (3.6) | 11 (3.3) | 23 (3.4) |
| Ocular hypertension | 1 (0.3) | 4 (1.2) | 4 (1.2) | 8 (1.2) |
| Open angle glaucoma | 1 (0.3) | 0 | 0 | 0 |

TEAEs in the study eye were as assessed by the investigators. The TEAE "IOP increase or glaucoma" was defined based on the following preferred terms: "Angle closure glaucoma", "Borderline glaucoma", "Glaucoma", "Glaucomatous optic neuropathy", "Intraocular pressure increased", "Ocular hypertension", "Open angle glaucoma", "Optic nerve cupping", and "Trabeculoplasty".

TEAE, treatment-emergent adverse event.

Conclusions

Pre-injection IOP

 Pre-injection IOP values in study eyes were similar across treatment groups, and there was no indication of sustained IOP increase through Week 96

Pre- to post-injection IOP differences

- The difference in mean change in pre- to post-injection IOP was <1 mmHg between treatment groups, no clinically relevant differences were observed
- Only 1 patient required paracentesis for an acute rise in post-injection IOP

TEAEs

 Rates of "IOP increase or glaucoma", "IOP increased", and "Ocular hypertension" were comparable across treatment groups