

Pigment Epithelial Detachment Outcomes with Aflibercept 8 mg versus Aflibercept 2 mg in the PULSAR trial: A 96-Week Post hoc Analysis

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Disclosures

- Michael Singer: Consultant for Aerie, Allegro, Alimera, Allergan, Eyepoint, Genentech,
 Kodiak, Novartis, Regeneron Pharmaceuticals, Inc., and Santen; speaker bureau member for Allergan,
 Eyepoint, Genentech, Novartis, Regeneron Pharmaceuticals, Inc., and Spark; contracted research with
 Aerie, Allegro, Allergan, Alimera, DRCR, Genentech, Icon, Ionis, Kalvista, Kodiak, Novartis, Opthea,
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PULSAR: 96-Week, Multicenter, Double-masked Study in Patients with Treatment-naïve nAMD



Patients were randomly assigned (1:1:1) to receive aflibercept 8q12 (n=335), 8q16 (n=338), or 2q8 (n=336) each after 3 monthly injections

At W48, treatment with aflibercept 8 mg demonstrated non-inferior BCVA gains with extended dosing intervals versus aflibercept 2 mg in patients with nAMD,¹ with no new safety signals

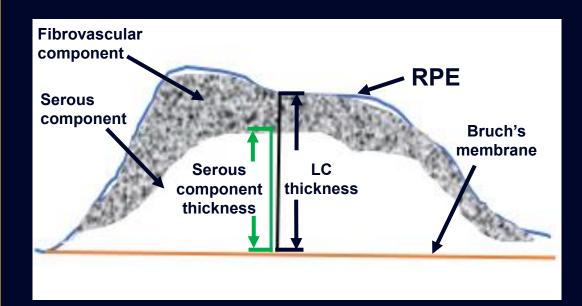
At W96, treatment with aflibercept 8 mg maintained improvements in visual and anatomic outcomes with extended dosing intervals, demonstrating long-term efficacy with no new safety signals



FAS: 2q8 n=336; 8q12 n=335; 8q16 n=338 (at BL). aLS mean values (post-ICE data were censored). bLS means were generated using MRMM, with BL CRT measured as a covariate; fixed factors included treatment group (aflibercept 2q8, 8q12, 8q16), visit, and stratification variables (geographic region [Japan vs Rest of World] and BL BCVA [<60 vs ≥60]); and interaction terms were included for BL and visit and for treatment and visit. 2q8, aflibercept 2 mg every 8 weeks; 8q12, aflibercept 8 mg every 12 weeks; 8q16, aflibercept 8 mg every 16 weeks; BCVA, best-corrected visual acuity; BL, baseline; CRT, central subfield retinal thickness; FAS, full analysis set; ICE, intercurrent event; LS, least squares; MMRM, mixed model for repeated measures; nAMD, neovascular age-related macular degeneration; W, week. Lanzetta P, et al. Lancet. 2024;403:1141–1152.

Objective and Methods





Objective:

Evaluate the impact of aflibercept 8 mg and 2 mg on PED outcomes in the PULSAR trial

Definition:

- PED is characterized by the separation of the RPE from the Bruch's membrane
- Neovascular lesion complex (LC) is comprised of the serous (sub-RPE fluid) and fibrovascular component of the PED

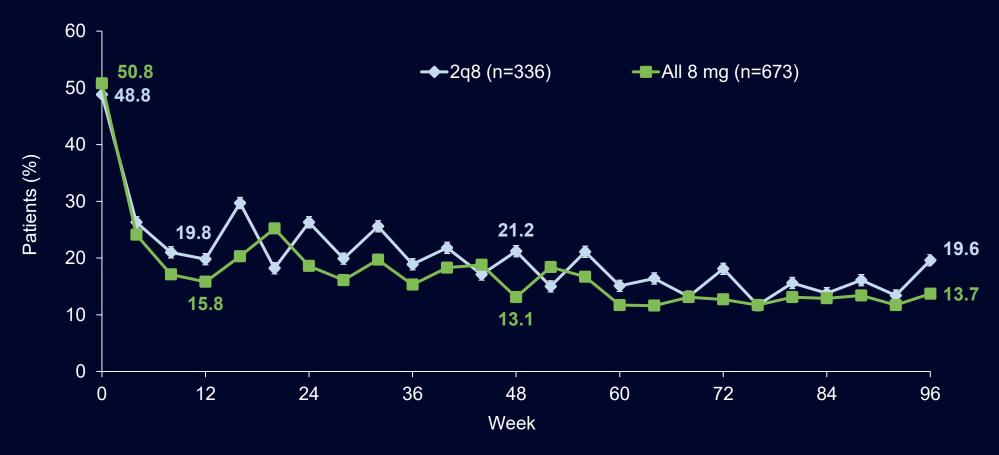
Outcomes:

- Presence and location of serous component of PED and neovascular LC through Week 96^a
- Thickness of serous component of PED and neovascular LC in patients with serous component of PED and neovascular LC with involvement of the foveal center

Presence and Location of PED at Baseline	2q8 (n=336)	8q12 (n=335)	8q16 (n=338)	All 8 mg (n=673)
Presence of serous component of PED, n (%)	164 (48.8)	171 (51.0)	171 (50.6)	342 (50.8)
Serous component of PED with involvement of foveal center, n (%)	29 (8.6)	42 (12.5)	36 (10.7)	78 (11.6)
Neovascular LC with involvement of foveal center, n (%)	299 (89.8)	299 (90.1)	296 (88.6)	595 (89.3)

Patients with Serous Component of PED Through Week 96

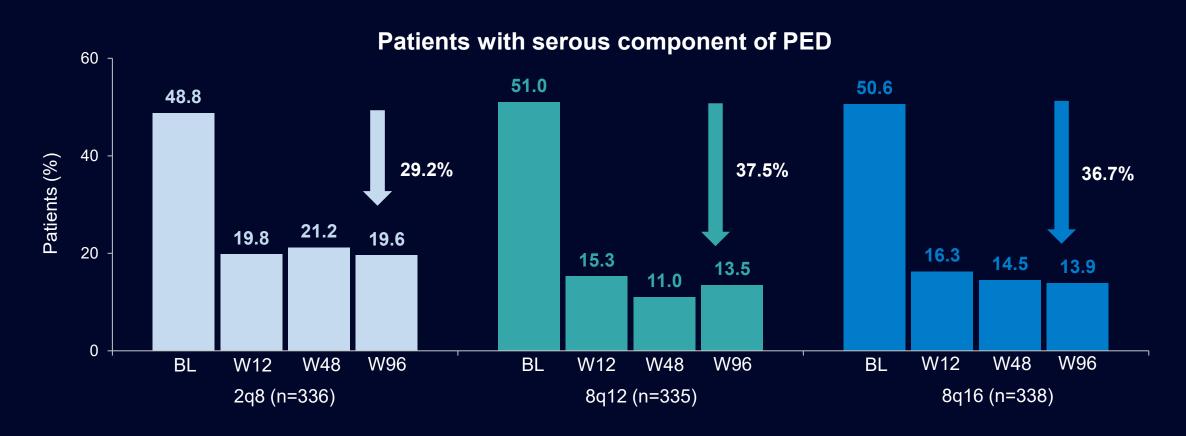




Lower proportion of patients had serous component of PED with aflibercept 8 mg than with aflibercept 2 mg through Week 96

Reduction of Proportion of Patients with Serous Component of PED at Key Timepoints

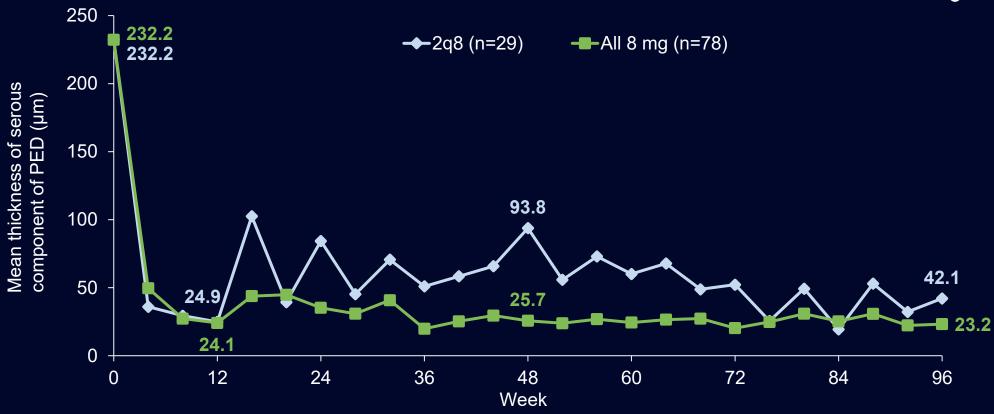




• The proportion of patients with serous component of PED decreased by 29.2%, 37.5%, and 36.7% in the 2q8, 8q12, and 8q16 groups, respectively, from BL to Week 96

Thickness of Serous Component of PED Involving the Foveal Center Through Week 96

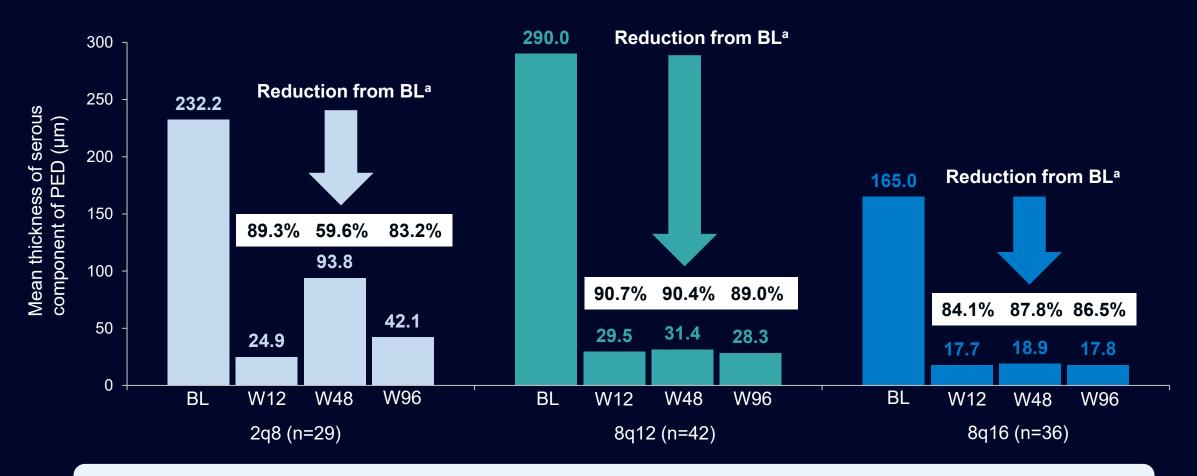




- Marked reductions in thickness of the serous component of PED involving the foveal center were achieved with aflibercept 8 mg and 2 mg at Week 12
- Reductions in thickness of the serous component of PED involving the foveal center were sustained through Week 96

Reductions in Thickness of Serous Component of PED Involving the Foveal Center at Key Timepoints

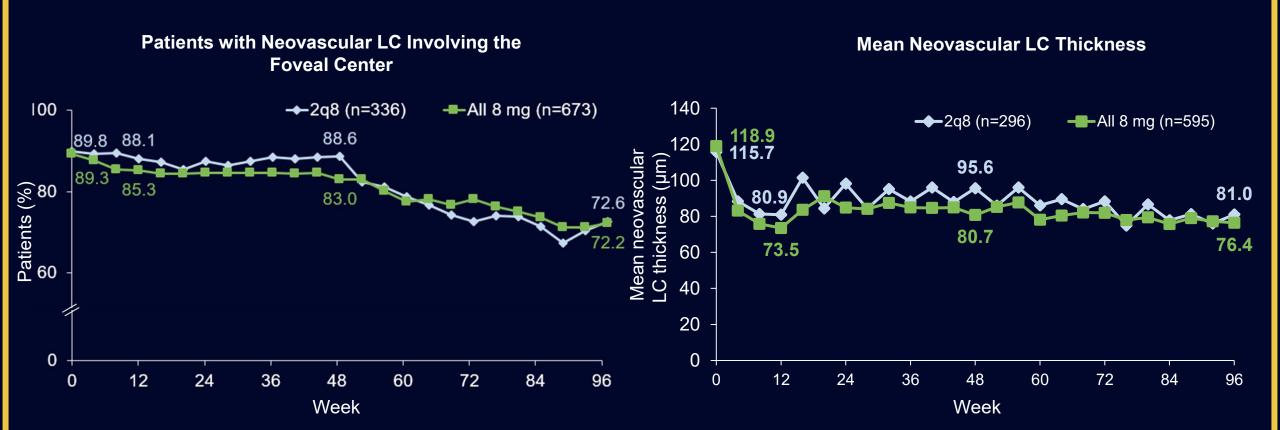




Marked reductions in thickness of the serous component of PED involving the foveal center at Week 12 were sustained through Week 96 in the aflibercept 8q12, 8q16, and 2q8 groups

Patients with Neovascular LC Involving the Foveal Center Through Week 96



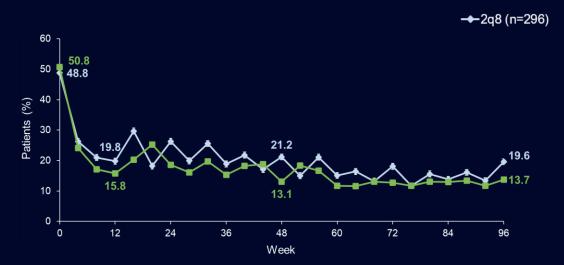


- Decrease in proportion of patients with neovascular LC involving the foveal center, from BL to Week 96,
 was comparable in the 8 mg and 2 mg treatment groups
- Reduction in mean thickness of neovascular LC involving the foveal center, achieved with aflibercept
 8 mg and 2 mg at Week 12, was sustained at Weeks 48 and 96

Conclusions

- pulsar
- A lower proportion of patients treated with aflibercept 8 mg than with aflibercept 2 mg had serous component of PED through Week 96
 - Marked reductions in thickness of serous component of PED involving the foveal center were achieved in the aflibercept 8q12, 8q16, and 2q8 groups
- Decrease in proportion of patients with neovascular LC involving the foveal center, from BL to Week 96, was comparable in the 2 mg and 8 mg treatment groups
 - Moderate reductions in mean neovascular LC thickness were seen across all 3 treatment groups
- All improvements in PED outcomes were observed early at Week 12 and maintained through Week 96, with fewer injections of aflibercept 8 mg than aflibercept 2 mg

Patients with Serous Component of PED



Patients with Neovascular LC Involving the Foveal Center

