

Quantification of Nonperfusion And Neovascularization on Ultrawide-field Fluorescein Angiography in Patients with Diabetes and Association with Vitreous Hemorrhage, Macular Edema, and Vitrectomy



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Purpose

- To identify risk factors associated w/ increased areas of foveal avascular zone (FAZ), neovascularization (NV) and nonperfusion (NP) in diabetic patients
- To calculate a threshold total NP associated with an increased risk of proliferative diabetic retinopathy (PDR)

Methods

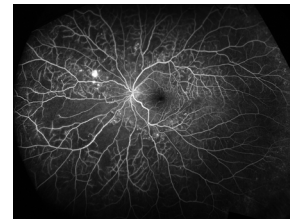
Patient Enrollment

- IRB-approved retrospective chart review (HUM00120509) b/w Jan 2009 and May 2018
- Inclusion:** 18 years or older, diagnosed w/ type 1 or 2 diabetes mellitus (DM)

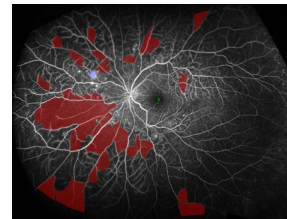
Statistical Analysis

- All analysis conducted in R (Core Team, 2019)
- For associations analysis,** linear multivariate regression performed w/ *geelm* and *geepack*.¹ Demographic (eye laterality, sex, race, age, type of DM) and advanced DR features (vitreous hemorrhage [VH], macular edema [DME], requirement of PPV) were independent. FAZ, NP and NV areas were dependent. $P < .05$ was significant
- For threshold analysis,** Youden index calculated for total NP w/ best sensitivity and specificity in predicting PDR²

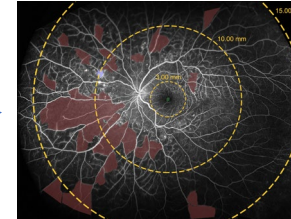
Segmentation



Stereographic Projection: Pixels were projected onto 3D globe (d=24 mm)



Grading: Trained, masked segmentation of NP (red), NV (blue), and FAZ (green) in mm²

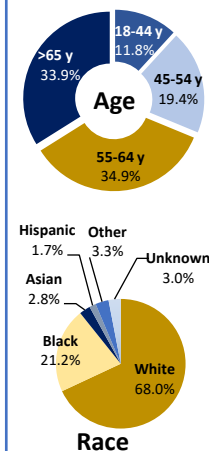


Posterior pole ($r \leq 3.00$), mid-periphery ($3.00 < r \leq 10.00$), far-periphery ($10.00 < r \leq 15.00$)

Results

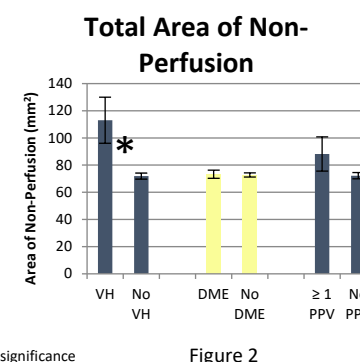
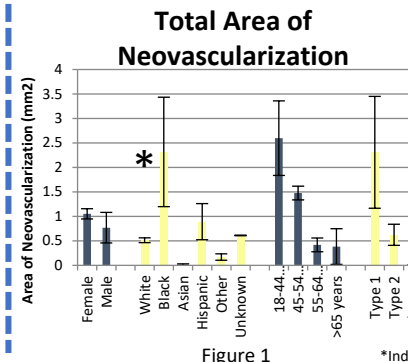
- 651 eyes from 363 patients (42.4% female)
- 76 (11.7%) no DR, 92 (41.1%) mild non-proliferative DR (NPDR), 144 (22.1%) moderate NPDR, 101 (15.5%) severe NPDR, 220 (33.8%) PDR, 18 (2.8%) unknown

Demographics



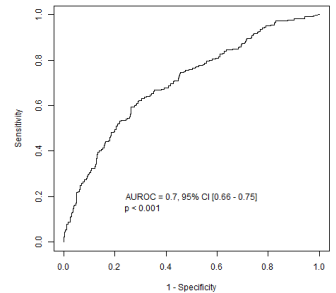
Nonperfusion and Neovascularization Analysis

Significant associations: male w/ total NP ($P = .005$), black race (Figure 1) w/ total NV ($P = .04$), VH (Figure 2) w/ total NP ($P = .02$)



Further Analysis

Total NP threshold of 77.48 mm² (95% CI: 54.24-92.66) for increased risk of PDR (sensitivity 59.5%, specificity 73.6%)



Conclusion

These findings suggest eyes with at least 77.48 mm² of NP are at risk for PDR. Male sex, black race, and presence of VH are associated with greatest areas of NP and NV.

Acknowledgements

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References

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