

## OCT and Reviews: “Treat & Extend.”

In patients with wet AMD treated with antiangiogenic drugs, the frequency of the injection was not the only parameter assessed. The high number of regular examinations also is a substantial burden for patients, families, and the health system. Several studies (PIER, EXCITE) proposed revisions to the fixed protocols after 1 month, but the results were worse than those obtained with monthly revisions, with both fixed reinjection protocols and those based on OCT. [6,57](#) Therefore, it is necessary to establish specific criteria to control AMD and allow more time between retreatments without losing the treatment effectiveness. Once again, OCT had a fundamental role in this approach. In this sense, Spaide proposed a revision scheme called Treat and Extend; after three monthly loading injections, patients were reevaluated in 6 weeks, at which time the physicians determine whether there are signs of activity by funduscopy and edema or intraretinal or subretinal fluid by OCT ([Figure 20](#)).[58](#)

The results depend not only on treatment but also the frequency of subsequent examinations by the protocol presented in this proposal, which takes a leading role in OCT. The use of this treatment regimen is being evaluated in a study conducted at Wills Eye Institute, Philadelphia, Pennsylvania. The preliminary results are promising, with a lower frequency of examinations, i.e., an average of 7.4 injections annually and similar VA outcomes to those obtained in the PRONTO study in a greater number of patients (n=92).[59](#)

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