

OCT and Wet AMD in Clinical Practice

To reach a consensus on the criteria of treatment and frequency of revisions, daily management of these patients is individualized, and the decisions are based on clinical examination and qualitative analysis of OCT images.² The main signs of activity of the neovascular membranes in the OCT are the presence of intraretinal or subretinal fluid and RPE detachments and tears. These OCT findings should be evaluated biomicroscopically for the presence of fibrosis in disciform scars, which are final and irreversible stages of the disease that sometimes can be shown on OCT. The presence of any of these tomographic signs, the patient's VA, and the ophthalmoscopic and angiographic appearance of the lesions should be evaluated by ophthalmologists to reach treatment decisions and revisions in each case until the current prospective multicenter studies shed light on results based on conclusive evidence.

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