

treatment such as medicated eye drops or surgery may be required to lower the pressure. Some patients who receive Ozurdex intravitreal implants may develop cataracts or their existing cataracts may worsen. It's important to remember that not treating macular oedema associated with a retinal vein occlusion may lead to irreversible vision loss.

If you have any queries or concerns about this treatment please speak to your eye doctor during your consultation.

Contact details

Clinic 8, Lincoln County Hospital

01522 512512 ext 2457

Monday to Friday 9am to 5pm

Royle Eye Department, Pilgrim Hospital

01205 445626

Monday to Thursday 8am to 8pm, Friday 9am to 5pm

The following websites have further information:

www.maculardisease.org

www.rnib.org.uk

References

If you require a full list of references for this leaflet please email patient.information@ulh.nhs.uk

The Trust endeavours to ensure that the information given here is accurate and impartial.



If you require this information in another language, large print, audio (CD or tape) or braille, please email the Patient Information team at patient.information@ulh.nhs.uk



Intravitreal Ozurdex Implant

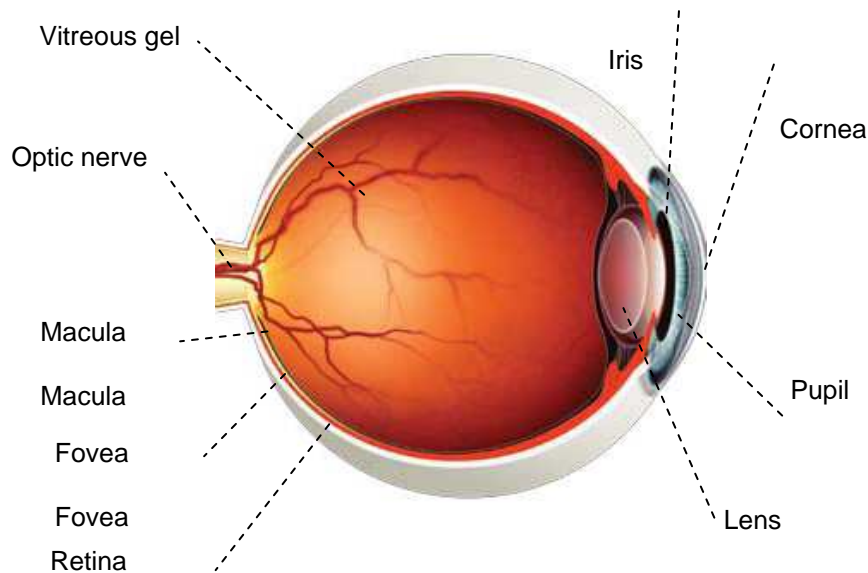
Ophthalmology Departments

www.ulh.nhs.uk

Aim of the leaflet

This leaflet is aimed at patients considering treatment with Ozurdex (dexamethasone intravitreal implant).

What makes up the eye?



How does the eye work?

Light enters through the cornea, passes through the opening in the iris, called the pupil and then to the lens which focuses light on the retina; the inner lining of the back of the eye. The retina is lined with light-sensitive cells, or photoreceptors, called rods and cones. The macula is the centre of the retina and it is responsible for sharp central vision. The fovea is a small depression in the macula that provides the sharpest vision of all. When light reaches the retina, the photoreceptors send impulses along the optic nerve to the brain, which interprets them as vision.

What happens during the injection procedure?

You will be awake during the procedure. Your doctor will follow steps that include ensuring the surface of the eye is clean and numbing the surface of the eye to help keep you comfortable. Ozurdex is injected using a special applicator device that's about the size of a pen. The applicator is designed to help your doctor deliver Ozurdex to the vitreous where the medication is needed. The injection will be complete within seconds and the procedure is generally well tolerated by patients.

Are there any risks with intravitreal injections?

Injections into the vitreous in the eye are associated with serious eye infection (endophthalmitis - this is very rare and occurs in less than 1 in 1,000 injections), eye inflammation, increased eye pressure and retinal detachments. In the days following an injection, patients are at risk from a serious eye infection or elevated eye pressure. **If your eye becomes red, sensitive to light, painful or develops a change in vision, you should seek urgent care from your eye doctor.** Also, you may experience temporary visual blurring after receiving an injection and should not drive or use machines until this has resolved. Your eye doctor will discuss the possible risks with you before performing the injection.

The most common side effects reported in patients include: increased eye pressure, conjunctival bleeding, eye pain, red eye (conjunctival hyperemia), cataract, vitreous detachment and headache.

What else should I know about safety and follow up?

Corticosteroids, such as Ozurdex intravitreal implants, can cause the fluid pressure inside the eye to increase. This is not something you can feel. So, following the injection, your doctor will monitor your eye pressure. If you experience this side effect,

[vitreous] through a small needle. Each implant is already inside a special applicator device that is needed to perform the procedure. The implant will be injected into the vitreous inside your eye.

Will I receive Ozurdex more than once?

Your doctor may decide to administer Ozurdex again if he or she believes that you may benefit from another injection. If the treatment is repeated it is usually after 4 to 6 months.

What results can I expect with an Ozurdex intravitreal implant?

It is important to remember that each case of retinal vein occlusion is unique. In clinical studies, 20% (20 of 100) to 30% of patients (30 of 100) who received Ozurdex gained 3 or more lines of vision on the eye chart in the first 2 months - compared with 7% (7 in 100) who received sham (simulated) injections. Once vision had improved, the improvements lasted approximately 1 to 3 months. Your own results may vary.

Is there anyone who should not be given Ozurdex?

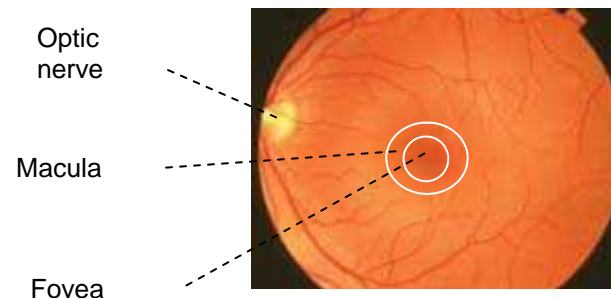
You should not receive Ozurdex if you have an eye infection in or near your eye (including active herpes viral infection of the eye, vaccinia, varicella, mycobacterial infections and fungal diseases), if you have advanced glaucoma; or if you are allergic to corticosteroids or to any other ingredient of Ozurdex intravitreal implants.

Are intravitreal injections common?

Yes. Intravitreal injections are now used to deliver medication to treat many types of eye conditions. Your retina specialist is specially trained in giving eye injections.

Why is a healthy retina important?

A healthy retina is essential for normal vision. A number of diseases can damage the retina, which may lead to impaired vision or loss of vision. One of these diseases is retinal vein occlusion, which occurs more commonly as people reach middle age.



What is retinal vein occlusion?

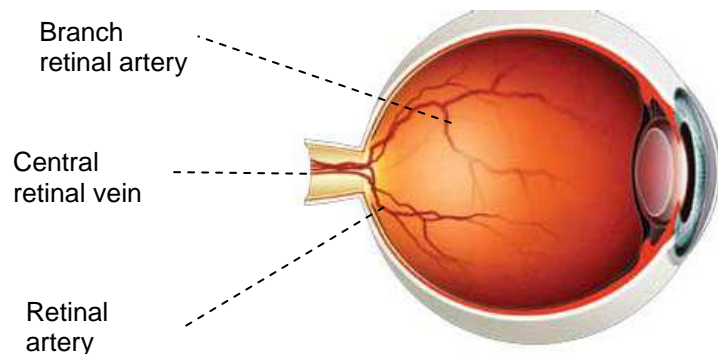
Blood circulating through the retinas leaves the eye by draining into the retinal vein. A retinal vein occlusion is a blockage that prevents normal blood flow out of the eye. The blockage may be caused by a blood clot, by compression (squeezing) from a nearby retinal artery, or by diseases that affect the blood vessels, such as diabetes, glaucoma, high blood pressure and atherosclerosis (hardening of the arteries).

There are 2 main types of retinal vein occlusion: branch retinal vein occlusion (BRVO) and central retinal vein occlusion (CRVO). In BRVO, the blockage occurs in one of the smaller branch vessels that connect to the central retinal vein. In CRVO, the blockage occurs in the central retinal vein.

What are the symptoms of retinal vein occlusion?

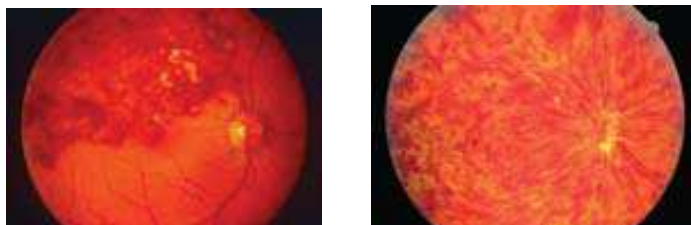
Sudden blurring or vision loss in all or part of the eye are the most common symptoms of retinal vein occlusion. For some patients, the vision loss may happen gradually over a period of

days or weeks instead of suddenly. The amount of blurring or vision loss depends on how much damage to the retina has occurred.



How does retinal vein occlusion affect the eye?

The blockage of blood flow can cause retinal bleeding, damage nearby capillaries (small blood vessels) and deprive the retina of oxygen. When retinal capillaries are damaged, it can lead to swelling of the retina (known as oedema). If the oedema affects the central part of the retina, called the macula (causing macular oedema), it can reduce your central vision. In addition, low oxygen levels may trigger the formation of fragile new blood vessels that can also cause vision problems. Untreated retinal vein occlusion can take months to heal and lead to permanent vision impairment in the affected eye.



Images of retinal vein occlusions

Why did my doctor choose Ozurdex?

Ozurdex has been approved to treat macular oedema following branch or central retinal vein occlusion. In the case of a branch retinal vein occlusion you may have already had laser treatment or it was felt to be inappropriate. Ozurdex has been proven to be effective in large clinical trials. If you are to receive an Ozurdex intravitreal implant, it means you have a retinal vein occlusion that is causing macular oedema. Your doctor has chosen Ozurdex to help treat your macular oedema. They will discuss more specific reasons why Ozurdex was selected as well as the benefits and risks of treatment.

How does the Ozurdex intravitreal implant work?

Ozurdex is a biodegradable implant containing the corticosteroid dexamethasone. Corticosteroids such as dexamethasone block chemical pathways that lead to inflammation, leakage from the retinal blood vessels and oedema. By reducing macular oedema, Ozurdex may help reverse some vision loss that may be caused by a retinal vein occlusion.

What is a biodegradable implant?

A biodegradable implant is one that doesn't need to be removed after it's done working. Ozurdex biodegradable implants use a special material which is combined with the active drug dexamethasone to form a tiny rod-shaped implant. Inside the eye, the implant is slowly dissolved by the vitreous gel that fills the eye, releasing dexamethasone.

Ozurdex is an implant injected into the eye (vitreous) to treat adults with macular oedema following branch retinal vein occlusion (BRVO) or central retinal vein occlusion (CRVO).

How is Ozurdex administered?

The Ozurdex implant is so tiny that it can be injected into the eye