Aflibercept vs. Laser Photocoagulation vs. Observation for Diabetic Macular Edema (DRCR V) - 2019



Objective

To compare anti-VEGF, laser photocoagulation, and observation as the initial treatment for center-involving diabetic macular edema

Methods

Design: Multi-site RCT

Sample Size: 702 eyes

Treatment Groups:

- 236 to observation
- 240 to laser photocoagulation
- 226 to aflibercept

Outcome Measures:

- Proportion of patients with 5letter visual acuity decrease at 2 years
- Visual acuity, change in visual acuity, and adverse events

Results

Point 1: There was no significant difference in the proportion of patients with vision loss at 2 years

- 16% of the aflibercept, 17% of laser, and 19% of those with observation (P = .79) were noted to have >5 letters of vision loss at 2 years
- Each group had a mean Snellen equivalent of 20/20 at 2 years
- No subgroups (DR severity, central ERM, baseline CST, vitreomacular traction) showed significant difference
- There was a small increase in the proportion of patients that were 20/20 at year 2 for the Aflibercept group (77%) compared to initial observation (66%) (P = 0.03); this was not true for Aflibercept versus laser

Point 2: Aflibercept still played a notable role for patients with worsening edema

• 80 observation-group eyes (34%) and 60 laser-group eye (25%) received aflibercept during the study

Point 3: There was no significant difference in major adverse events between the 3 groups

• No significant differences in adverse events (P=0.28), frequency of at least 1 serious event (P=0.66), or hospitalization (P=0.45)

TLDR: It is appropriate to manage center-involving diabetic macular edema with observation rather than Aflibercept or Laser

Baker et al. Effect of Initial Management With Aflibercept vs Laser Photocoagulation vs Observation on Vision Loss Among Patients With Diabetic Macular Edema Involving the Center of the Macula and Good Visual Acuity. JAMA. 2019 May; 321(19): 1880–1894