

Optic Neuritis Treatment Trial (ONTT)



Objective

To evaluate the benefit of corticosteroids as a treatment for optic neuritis. Do oral or IV corticosteroids improve visual outcomes and/or speed recovery? Are there complications?

Methods

Design: RCT

Sample Size: 457

- N = 319 at 10 year follow up
- N = 389 at 15 year follow up

Treatment Groups:

- 150 to placebo
- 151 to IV methylprednisolone
- 156 to oral prednisone

Outcome Measures:

- Primary: Visual Field & Contrast Sensitivity
- Secondary: Visual Acuity (VA) & Color Vision
- Long term: development of MS

Results

Point 1: IV methylprednisolone group had quicker recovery of vision versus placebo

- P = 0.0001 for visual field, P = 0.02 for contrast sensitivity, P = 0.09 for VA
- Oral prednisone group did not have statistically significant quicker recovery

Point 2: No difference in visual acuity at 6 months between groups

- Though IV methylpred group had slightly better visual field, contrast sensitivity, and color vision

Point 3: Oral prednisone group had higher incidence repeat optic neuritis

- Relative risk of optic neuritis was 1.79 for oral pred group compared to placebo (0.81 for IV methylpred group)

Point 4: Development of MS diagnosis at 15 years was 50% overall

- Only 25% if no baseline MRI lesions, increased to 72% if 1 or more lesions

Point 5: Long-term VA (10-year) was good (69% had 20/20 in both eyes)

- Patients with MS were more likely to have repeat events and worse vision

TLDR: Treatment of acute optic neuritis with IV methylprednisolone accelerated visual recovery, whereas oral prednisone led to increased episodes of repeat optic neuritis.