

The PeriOcular vs. INTravitreal corticosteroids for uveitic macular edema (POINT) Trial - 2019



Objective

To determine whether periocular or intravitreal corticosteroids are more effective in the treatment of uveitic macular edema

Methods

Design: multi-center randomized clinical trial

Sample Size: 230 eyes

Treatment Groups:

- 73 periocular triamcinolone acetonide (PTA)
- 79 intravitreal triamcinolone acetonide (ITA)
- 78 intravitreal dexamethasone implant (IDI)

Outcome Measures:

- Central subfield thickness (CST) change, BCVA, IOP, change in macular edema

Results

Point 1: Intravitreal corticosteroids were more effective than periocular corticosteroids

- By 8 weeks, all treatments resulted in central subfield thickness (CST) reduction (ITA and IDI significantly greater than PTA)
- ITA and IDI groups had greater BCVA improvement than the PTA group at 8 weeks ($p < 0.004$)
- IDI and ITA were superior to PTA in improving and/or resolving uveitic macular edema

Point 2: Intravitreal corticosteroid treatment had a higher risk of increased IOP

- When compared to periocular corticosteroids: ITA treatment had a hazard ratio (HR) of 1.83, and the IDI group had a HR of 2.52
- There were no significant differences between intravitreal groups

TLDR: Use of intravitreal corticosteroids for uveitic macular edema is more effective than periocular corticosteroids. However, intravitreal corticosteroids had a higher risk of increased IOP.