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Intravitreal dexamethasone implantation for treatment-naive patients with macular edema due to branch retinal vein occlusion: A 6-month follow-up study

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Background: Retinal vein occlusion (RVO) is one of the most common type of retinal vascular disease. Macular edema is a major cause of visual loss due to retinal vein occlusion. A sustained-release dexamethasone implant has recently become available for the treatment of macular edema secondary to retinal vein occlusion.

Objective: To evaluate the effect of intravitreal Dexamethasone implantation treatment on the visual acuity (VA) and the central foveal thickness (CFT) in macular edema (ME) due to branch retinal vein occlusion (BRVO).

Methods: Twenty patients without previous treatment who received an intravitreal implantation of Dexamethasone were included in this retrospective study. The patients were treated on an as-needed basis after single injection. The main outcome measures were changes in BCVA (best corrected visual acuity) and central foveal thickness (CFT) as measured by OCT.

Results: The preoperative mean BCVA of the patients was 0.56±0.13 logMAR which improved to 0.54±0.11 (p=0.001), 0.47±0.11 (p=0.001), 0.69±0.17 (p=0.004), 0.57±0.17 (p=0.15) log MAR at the 1st, 3rd, 5th, 6th months, respectively. At the baseline, the mean CMT was 338.09±75.6 μm which improved to 156.86±35.07μm (p=0.001), 156.72±36.93 μm (p=0.001), 168.46±45.02 μm (p=0.002) and 186.35 ± 53.79 μm (p=0.002) at the 1st, 3rd, 5th and 6th month, respectively.

Conclusion: Intravitreal Dexamethasone implantation is a safe and effective treatment option for macular edema due to BRVO using an as needed algorithm.

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