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Uhn Toronto Western Hospital, Department of Ophthalomology, Ontario Delayed diagnosis of choroidal-neovascularization (CNV) in age- related macular degeneration (AMD) adversely affects visual outcome.

Objective: We aim to identify factors associated with early detection of CNV in the clinic setting.

Methods: Demographics, clinical data and lesion characteristics were retrospectively collected from 76 consecutive AMD patients who had history of CNV in one eye and presented with CNV in the second eye and evaluated for association with visual acuity (VA) at time of presentation.

Results: Better VA was associated with history of CNV in the fellow eye (p<0.0001), adherence to follow-up every four-months (p=0.015), younger age (p=0.03), smaller lesion (p<0.0001), and non-subfoveal location (p=0.048). VA of the fellow eye did not correlate with VA at presentation with

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Factors Associated

of Choroidal

Clinic Setting

with Early Detection

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Age Related Macular Degeneration in the

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CNV.

Conclusions: These data suggest that experience of CNV, regardless of VA, facilitates early diagnosis in the fellow eye. Adherence to follow-up in the routine clinic setting also facilitates early detection of CNV.