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Outcomes of treatment with Sirolimus for non-infectious uveitis: A meta-analysis and systematic review**Vicente Lorenzo O Cabahug**

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Introduction & Objective: Uveitis is a group of intraocular inflammatory diseases whose primary treatment involves immunosuppression. While corticosteroids are the mainstay of therapy, Sirolimus is among the recently studied immune-modulator drugs for the treatment of non-infectious uveitis. The objective is to assess and summarize updated evidence on the outcomes of treatment of non-infectious uveitis with Sirolimus.

Method: Two reviewers conducted a systematic search on November 5, 2018 of bibliographic databases (MEDLINE, Embase and the Cochrane Library) and clinical trial registers with no restriction on language or publication date. The primary outcome was uveitis activity as measured by vitreous haze while secondary outcomes included Central Macular Thickness (CMT), Best Corrected Visual Acuity (BCVA), corticosteroid-sparing effect, Intraocular Pressure (IOP) elevation and other adverse events. Meta-analysis was undertaken where appropriate clinical and methodological homogeneity exists.

Results: Seven studies were included and reviewed. Four randomized clinical trials were eligible for meta-analysis: SAVE 2013, Ibrahim et al, SAVE 2 2016 and SAKURA 2016. The pooled proportions of inflammation control (VH improvement) were 38% (95% CI 16.19%-62.66%) during a 6-month follow-up and 49.97% (95% CI 16.19%-83.03%) during a 6 to 12-month follow-up with the latter showing a significantly higher response rate ($p=0.0472$). BCVA improvement was 62.2% (95% CI 33.17%-87.11%) during a 6-month follow-up and 56.86% (95% CI 20.91%-89.05%) during a 6 to 12-month follow-up with no significant difference between the two ($p=0.0001$). Increased IOP was 7.11% (95% CI 3.46%-12.68%) for both a 6-month follow-up duration and 6 to 12-month follow-up duration. The corticosteroid-sparing effect of Sirolimus was also well demonstrated. A reduction in CMT was observed and minor drug-related adverse events were reported in all the studies reviewed.

Conclusion: This review provided evidence that Sirolimus is a promising treatment option in reducing inflammatory activity, improving visual acuity and sparing corticosteroid use with minor adverse events for non-infectious uveitis.

Biography

Vicente Lorenzo O Cabahug has completed his Medical Degree from Cebu Doctors' University. He recently completed his Ophthalmology Residency from St. Luke's Medical Center, Philippines.

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