

# The diagnostic ability of angiography in glaucoma

<b>Submission date</b> 02/01/2019	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 23/01/2019	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
<b>Last Edited</b> 25/01/2019	<b>Condition category</b> Eye Diseases	<input type="checkbox"/> Individual participant data <input type="checkbox"/> Record updated in last year

## Plain English summary of protocol

### Background and study aims

The development of optical coherence tomography (OCTA) has enabled non-invasive measurements of vascular changes in the retinal layers, and this new tool has been increasingly used in retinal diseases and glaucoma. Several previous studies have investigated the vessel density in the peripapillary area or parafoveal region with OCTA in patients with glaucoma. Some of these studies have shown that the abnormal vessel density in OCTA has a significant association with glaucomatous optic nerve damage, although it has been controversial whether these abnormal vascular densities in glaucoma are the primary cause of the disorder or secondary changes due to the disorder.

With the recent developments in OCTA software, it is possible to segment the macular vessel density and to measure the vessel density layer-by-layer. Therefore, in this study, we will analyse the macular vessel density layer-by-layer and compared the diagnostic ability of each for detection of glaucoma.

### Who can participate?

Patients with primary open angle glaucoma undergoing treatment with drugs and patients visiting the clinic for regular eye examinations for refractive errors.

### What does the study involve?

All participants will be investigated using macular optical coherence tomographic angiography, fundus photography, and 24-2 visual field

### What are the possible benefits and risks of participating?

Since this study is observational and evaluating the diagnostic value of OCTA in glaucoma, we expect that there are no benefits or risks to the participants.

### Where is the study run from?

Glaucoma clinic in pusan national university Yangsan hospital, Yangsan, South Korea

### When is the study starting and how long is it expected to run for?

February 2019 until February 2020

Who is funding the study?  
Pusan National University Yangsan Hospital

Who is the main contact?  
Jonghoon shin, jjongggal@naver.com

## Contact information

**Type(s)**  
Scientific

**Contact name**  
Mr Jonghoon Shin

**ORCID ID**  
<http://orcid.org/0000-0003-1721-1253>

**Contact details**  
20-Geumo-ro, Mulgeum-eup, Yangsan, South Korea  
Yangsan  
Korea, South  
50612  
82-55-360-2595  
jjongggal@naver.com

## Additional identifiers

**EudraCT/CTIS number**

**IRAS number**

**ClinicalTrials.gov number**

**Secondary identifying numbers**  
05-2018-145

## Study information

**Scientific Title**  
Diagnostic Ability of Macular Vessel Density in the Ganglion Cell–Inner Plexiform Layer on Optical Coherence Tomographic Angiography for Glaucoma

**Acronym**  
OCTAGCIPL

**Study objectives**  
Some previous studies have shown that the abnormal vessel density in OCTA has a significant association with glaucomatous optic nerve damage, although it has been controversial whether these abnormal vascular densities in glaucoma are the primary cause of the disorder or

secondary changes due to the disorder. In addition, with the recent developments in OCTA software, it is possible to segment the macular vessel density and to measure the vessel density layer-by-layer.

We will use optical coherence tomographic angiography to compare the diagnostic ability of measuring abnormal vessel density vs layer-by-layer macular vessel density for detection of glaucoma.

### **Ethics approval required**

Old ethics approval format

### **Ethics approval(s)**

Institutional Review Board of Pusan National University Yangsan Hospital, 09/08/2018, ref. 05-2018-145.

### **Study design**

comparative cross-sectional study

### **Primary study design**

Observational

### **Secondary study design**

Cross sectional study

### **Study setting(s)**

Hospital

### **Study type(s)**

Diagnostic

### **Participant information sheet**

Not available in web format, please use the contact details below to request a participant information sheet

### **Health condition(s) or problem(s) studied**

Glaucoma

### **Interventions**

All participants underwent the following ophthalmic examinations

1. BCVA measurements, slit-lamp examination, gonioscopy, and IOP measurement with the Goldmann applanation tonometer.
2. Red-free fundus photography using a non-mydratic fundus camera (Canon CR-2, Canon, Tokyo, Japan)
3. OCTA measurements using Topcon Atlantis (DRI OCT-1, Topcon, Tokyo, Japan)
4. Automated visual field examination using the Humphrey 740 Visual Field Analyzer (Carl Zeiss Meditec, Dublin, CA, USA) were performed on all subjects.

Glaucoma patients should keep using the glaucoma treatment with topical IOP-lowering agents, and age-matched normal controls who visited our clinic for regular eye examinations for refractive errors.

**Intervention Type**

Other

**Primary outcome measure**

The macular vessel density is measured using optical coherence tomographic angiography at the retinal nerve fiber–ganglion cell–inner plexiform layer, retinal nerve fiber–ganglion cell layer, retinal nerve fiber layer, ganglion cell–inner plexiform layer, ganglion cell layer, and inner plexiform layer segments.

**Secondary outcome measures**

The macular vessel densities in six segments are compared between glaucoma patients and normal controls.

**Overall study start date**

01/11/2018

**Completion date**

31/12/2019

**Eligibility****Key inclusion criteria**

Patients:

1. Primary open angle glaucoma
2. Undergoing treatment with drugs

Control group:

1. Visited the clinic for regular eye examinations for refractive errors

**Participant type(s)**

Patient

**Age group**

Adult

**Sex**

Both

**Target number of participants**

over fifty participants per group

**Key exclusion criteria**

1. Best-corrected visual acuity less than 20/40
2. Refractive error outside the range of – 6.0 to + 3.0 diopters
3. Astigmatism beyond  $\pm 3.0$  diopters
4. Previous ocular trauma
5. Ocular surgery or laser treatment
6. History of ocular or systemic disease that could affect the optic nerve or visual field

**Date of first enrolment**

01/12/2018

**Date of final enrolment**

31/01/2019

## **Locations**

**Countries of recruitment**

Korea, South

**Study participating centre**

**Pusan National University Yangsan Hospital**

20-Geumo-ro, Mulgeum-eup, Yangsan, South Korea

Yangsan

Korea, South

50612

## **Sponsor information**

**Organisation**

Pusan National University Yangsan Hospital

**Sponsor details**

20-Geumo-ro, Mulgeum-eup, Yangsan, South Korea

Yangsan

Korea, South

50612

**Sponsor type**

Hospital/treatment centre

**ROR**

<https://ror.org/04kkg1090>

## **Funder(s)**

**Funder type**

Hospital/treatment centre

**Funder Name**

Pusan National University Hospital

**Alternative Name(s)**

PNUH

**Funding Body Type**

Private sector organisation

**Funding Body Subtype**

Other non-profit organizations

**Location**

Korea, South

## **Results and Publications**

**Publication and dissemination plan**

Planned publication in the journal Ophthalmology, American Journal of Ophthalmology or JAMA Ophthalmology.

**Intention to publish date**

01/12/2019

**Individual participant data (IPD) sharing plan**

The data sharing plans for the current study are unknown and will be made available at a later date.

**IPD sharing plan summary**

Data sharing statement to be made available at a later date