# Combination photodynamic treatment and intravitreal ranibizumab versus intravitreal ranibizumab alone in neovascular age-related macular degeneration

Submission date	Recruitment status No longer recruiting	<ul><li>Prospectively registered</li></ul>	
03/12/2008		☐ Protocol	
Registration date	Overall study status Completed	Statistical analysis plan	
05/12/2008		[X] Results	
Last Edited	Condition category	[] Individual participant data	
04/12/2012	Eve Diseases		

## Plain English summary of protocol

Not provided at time of registration

## Contact information

# Type(s)

Scientific

#### Contact name

Dr Clare Bailey

## Contact details

Bristol Eye Hospital Lower Maudlin Street Bristol United Kingdom BS1 2LX

# Additional identifiers

Clinical Trials Information System (CTIS) 2006-005172-40

Protocol serial number

EudraCT: 2006-005172-40

# Study information

### Scientific Title

A randomised prospective exploratory study comparing combination photodynamic treatment and intravitreal ranibizumab versus intravitreal ranibizumab alone in the treatment of neovascular age-related macular degeneration

## **Study objectives**

This study is designed to evaluate the safety and efficacy of intravitreal ranibizumab used in combination with verteporfin photodynamic therapy (Visudyne®) for the treatment of subfoveal choroidal neovascularisation secondary to age-related macular degeneration (AMD), compared to the use of intravitreal ranibizumab alone and to see whether combination treatment reduces retreatment rates.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

North Somerset and South Bristol Research Ethics Committee gave approval on the 14th February 2007 (ref: 2389)

## Study design

Single-centre randomised controlled exploratory study

## Primary study design

Interventional

## Study type(s)

Treatment

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

Neovascular age-related macular degeneration

#### Interventions

Intravitreal ranibizumab combined with photodynamic treatment versus intravitreal ranibizumab alone:

Ranibizumab 0.5 mg by intravitreal delivery. Given monthly for 3 months, then as required monthly depending on defined retreatment criteria. Total duration of treatment 1 year. For photodynamic treatment, this (or sham) is given only on the first treatment visit, and not again. Photodynamic treatment involves the intravenous administration of a drug called Visudyne®, dose depends on the body mass index of patient, followed by application of a laser to the affected eye.

## Intervention Type

Drug

#### Phase

Phase III

## Drug/device/biological/vaccine name(s)

Ranibizumab, verteporfin photodynamic therapy (Visudyne®)

## Primary outcome(s)

The proportion of subjects who gain 15 or more letters of best corrected visual acuity at 12 months compared to baseline, based on the ETDRS visual acuity chart.

## Key secondary outcome(s))

- 1. Mean change from baseline in best corrected visual acuity (BCVA) at months 6 and 12
- 2. Proportion of patients who gain greater than or equal to 5, greater than or equal to 10 letters of BCVA from baseline at months 6 and 12
- 3. Proportion of patients who lose less than 15 letters of BCVA from baseline at months 6 and 12
- 4. Mean change from baseline in total size of lesion and total size of CNV at 3, 6 and 12 months
- 5. Change in area of leakage at 3, 6 and 12 months
- 6. The number of treatments required with ranibizumab for each group

## Completion date

20/01/2009

# **Eligibility**

## Key inclusion criteria

Patients (male and female aged 50 or over, no upper age limit) who at baseline:

- 1. Have a best-corrected logarithm of the minimum angle of resolution (logMAR) visual acuity in the study eye between 73 24 letters
- 2. Have a choroidal neovascularisation (CNV) lesion of any type in the study eye with the following characteristics as determined by fluorescein angiography:
- 2.1. Evidence that CNV extends under the geometric centre of the foveal avascular zone
- 2.2. The area of the CNV must occupy at least 50% of the total lesion
- 2.3. The lesion must be less than or equal to 5400 microns in greatest linear dimension (GLD)
- 2.4. No subfoveal atrophic change, no subfoveal fibrosis. Area of fibrosis less than or equal to 50% of total lesion area.
- 3. For occult with no classic CNV, the lesion must have presumed recent disease progression as assessed by the Investigator and defined as having at least one of the following criteria:
- 3.1. Blood associated with the lesion at baseline
- 3.2. Greater than or equal to 10% increase in the GLD as assessed by fluorescein angiography in the previous 3 months
- 3.3. Loss of VA in the previous 3 months defined as either:
- 3.3.1. Greater than or equal to 5 letters logMAR vision as determined by protocol refraction and protocol measurement, or
- 3.3.2. Two or more lines using a Snellen chart by standard examination

# Participant type(s)

Patient

## Healthy volunteers allowed

No

# Age group

Adult

#### Sex

All

## Key exclusion criteria

- 1. Prior treatment with external-beam radiation therapy, transpupillary thermotherapy (TTT), thermal laser, or verteporfin therapy (PDT) in the study eye
- 2. Treatment with verteporfin in the non-study eye less than 7 days preceding Day 0
- 3. Previous participation in a clinical trial (for either eye) involving anti-angiogenic drugs (Macugen®, Avastin®, anecortave acetate, protein kinase C inhibitors, etc.)
- 4. Previous intravitreal drug delivery (e.g., intravitreal corticosteroid injection or device implantation) in the study eye
- 5. History of vitrectomy surgery in the study eye
- 6. History of greater than mild non-proliferative diabetic retinopathy or any diabetic maculopathy
- 7. History of retinal vascular occlusions
- 8. History of glaucoma filtering surgery in the study eye
- 9. History of corneal transplant in the study eye
- 10. History of submacular surgery or other surgical intervention for AMD in the study eye
- 11. Previous participation in any studies of investigational drugs within 1 month preceding Day 0 (excluding vitamins and minerals)
- 12. Subretinal haemorrhage in the study eye that involves the centre of the fovea, if the size of the haemorrhage is either greater than 50% of the total lesion area or greater than 1 disc area in size
- 13. Subfoveal fibrosis or atrophy in the study eye. Area of fibrosis greater than 50% of total lesion area.
- 14. CNV in either eye due to causes other than AMD, such as ocular histoplasmosis, trauma, or pathologic myopia
- 15. Retinal pigment epithelial tear involving the macula in the study eye
- 16. Any concurrent intraocular condition in the study eye (e.g., cataract or diabetic retinopathy) that, in the opinion of the investigator, could either require medical or surgical intervention during the 12-month study period to prevent or treat visual loss that might result from that condition, or if allowed to progress untreated, could likely contribute to loss of at least two Snellen equivalent lines of best corrected visual acuity over the 12-month study period
- 17. Active intraocular inflammation (grade trace or above) in the study eye
- 18. Current vitreous haemorrhage in the study eye
- 19. History of rhegmatogenous retinal detachment or macular hole (Stage 3 or 4) in the study eye
- 20. History of idiopathic or autoimmune-associated uveitis in either eye
- 21. Infectious conjunctivitis, keratitis, scleritis, or endophthalmitis in either eye
- 22. Aphakia or absence of the posterior capsule in the study eye
- 23. Previous violation of the posterior capsule in the study eye is also excluded unless it occurred as a result of YAG posterior capsulotomy in association with prior, posterior chamber intraocular lens implantation
- 24. Spherical equivalent of the refractive error in the study eye demonstrating more than -8 diopters of myopia or signs of pathologic myopia with a refraction of 4 8 diopters
- 25. For subjects who have undergone prior refractive or cataract surgery in the study eye, the pre-operative refractive error in the study eye cannot exceed -8 diopters of myopia
- 26. Intraocular surgery (including cataract surgery) in the study eye within 2 months preceding Day 0
- 27. Uncontrolled glaucoma in the study eye (defined as intraocular pressure greater than 30 mmHg despite treatment with anti-glaucoma medication)
- 28. Concurrent systemic conditions
- 29. Premenopausal women not using adequate contraception. The following are considered effective means of contraception:

- 29.1. Surgical sterilisation
- 29.2. Use of oral contraceptives
- 29.3. Barrier contraception with either a condom or diaphragm in conjunction with spermicidal gel
- 29.4. An intrauterine device (IUD)
- 29.5. Contraceptive hormone implant or patch
- 30. History of other disease, metabolic dysfunction, physical examination finding, or clinical laboratory finding giving reasonable suspicion of a disease or condition that contraindicates the use an investigational drug or that might affect interpretation of the results of the study or render the subject at high risk for treatment complications
- 31. Current treatment for active systemic infection
- 32. Recent stroke, or cardiac event, uncontrolled angina or hypertension
- 33. History of allergy to fluorescein
- 34. Inability to obtain fundus photographs or fluorescein angiograms of sufficient quality to be analysed
- 35. Inability to comply with study or follow-up procedures

#### Date of first enrolment

07/07/2007

## Date of final enrolment

20/01/2009

# Locations

#### Countries of recruitment

United Kingdom

England

Study participating centre Bristol Eye Hospital

Bristol United Kingdom BS1 2LX

# Sponsor information

## Organisation

University Hospitals Bristol NHS Foundation Trust (UK)

#### **ROR**

https://ror.org/04nm1cv11

# Funder(s)

## Funder type

Industry

## Funder Name

Novartis Pharmaceuticals (UK)

# **Results and Publications**

Individual participant data (IPD) sharing plan

# IPD sharing plan summary

Not provided at time of registration

## **Study outputs**

Output type	Details	Date created Date added	Peer reviewed?	Patient-facing?
Results article	results	01/10/2010	Yes	No
Participant information shee	Participant information sheet	11/11/2025 11/11/2025	No	Yes