

# Comparison of treatment with the steroid anti-inflammatory loteprednol etabonate and the non-steroidal anti-inflammatory drug (NSAID) bromfenac after cataract surgery.

<b>Submission date</b> 26/03/2018	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 02/05/2018	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 07/11/2019	<b>Condition category</b> Eye Diseases	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

### Background and study aims

After cataract surgery, patients need to use eye drops to reduce inflammation of the eye. Suitable medicines include non-steroidal anti-inflammatory drugs (NSAIDs) and steroids and they can be applied alone or in combination. However, steroid eye drops can cause an increase in pressure inside the eye.

The aim of this study is to investigate if using the NSAID bromfenac after cataract surgery has reduced side effects compared with the steroid loteprednol etabonate. This is the first study where bromfenac is administered alone after phacoemulsification. In previous studies it was administered in combination with a steroid drug. Bromfenac is an effective anti-inflammatory after cataract surgery and could simplify the number of eye drops patients have to use. This might reduce costs and side effects.

### Who can participate?

Patients aged 45-90 years with age-related cataract undergoing phacoemulsification cataract surgery with posterior chamber intraocular lens implantation, in which the lens is removed and replaced with an artificial lens.

### What does this study involve?

All participants will use ofloxacin (an antibiotic) as eye drops for 10 days after the operation. Patients in Group I will use bromfenac eye drops 2 times a day for 30 days after the operation. Patients in Group II will use loteprednol etabonate eye drops 4 times daily for 30 days after the operation.

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

There are no known side-effects of bromfenac administered after phacoemulsification. Both drugs are approved by medicine regulatory bodies. There was no risk of participating in this study.

Where is the study run from?

There are two medical centers taking part in this study. The lead center is Department of Ophthalmology, Norbert Barlicki Memorial Teaching Hospital No. 1, Medical University of Lodz, Poland. Head: Wojciech Omulecki MD, PhD. The second center is Department of Ophthalmology and Visual Rehabilitation, Central Veterans Hospital in Lodz. Medical University of Lodz, Poland Head: Piotr Jurowski MD, PhD

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

The start date was 5/05/2012 and the trial ran until 30/11/2014

Who is funding the study?

The study funder is Department of Ophthalmology, Norbert Barlicki Memorial Teaching Hospital No. 1, Medical University of Lodz, Poland and this department will be paying the costs that trial will incur during its lifecycle.

Who is the main contact?

Magdalena Kucharczyk-Pospiech, kucharczykma@gmail.com.

## Contact information

### Type(s)

Public

### Contact name

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## Additional identifiers

### Protocol serial number

1

## Study information

### Scientific Title

Comparison of efficacy and safety of postoperative treatment with loteprednol etabonate and bromfenac after phacoemulsification

### Study objectives

We hypothesise that there will be no difference in postoperative treatment with loteprednol etabonate and bromfenac after phacoemulsification

### Ethics approval required

Old ethics approval format

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

Ethics Committee of Medical University of Lodz, 18/09/2012, RNN/164/12/KE.

### **Study design**

Prospective case series

### **Primary study design**

Observational

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

Treatment

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

Cataract surgery

### **Interventions**

All patients used topical ofloxacin 4 times daily for 10 days postoperatively with an addition of the respective topical anti-inflammatory drug. The patients were randomized into 2 groups. Patients in Group I used a non-steroidal anti-inflammatory drug (0.09% bromfenac) 2 times daily for 30 days postoperatively. Patients in Group II used a steroidal anti-inflammatory drug (0.5% loteprednol etabonate) 4 times daily for 30 days postoperatively. Consecutive 58 patients (58 eyes) were randomly assigned to the one of the study groups regarding postoperative treatment. The follow-up examinations were performed on the first day and 1, 4, and 12 weeks postoperatively.

### **Intervention Type**

Drug

### **Phase**

Not Applicable

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

bromfenac, loteprednol etabonate

### **Primary outcome(s)**

Intraocular inflammation assessed by laser flare photometry using Kowa FM -600 (Kowa Co. Ltd). Seven laser flare photometry measurements with values greater than 0 and which backgrounds differed less than 15% were saved. For all patients the highest and the lowest values of flare were excluded, according to the manufacturer's guidelines. The remaining 5 measurements were averaged. All measurements were taken with undilated pupils. The follow-up examinations were performed on the first day and 1, 4, and 12 weeks postoperatively. Measurements were done at the same time of the day on scheduled visits.

### **Key secondary outcome(s)**

1. Best corrected visual acuity (BCVA) on the Snellen chart
2. Intraocular pressure
3. Anterior and posterior segment evaluation
4. Foveal retina thickness using Optical Coherence Tomography (Topcon 3D OCT-1000 Mark II and Zeiss Stratus OCT Version 4.0.5 (0076))

5. Endothelial cell density measured with Tomey EM-3000 and Topcon SP 2000P Confocal Microscope

The follow-up examinations were performed on the first day and 1, 4, and 12 weeks postoperatively. Measurements were done at the same time of the day on scheduled visits.

**Completion date**

30/11/2014

## Eligibility

**Key inclusion criteria**

1. Patients with age-related cataract undergoing phacoemulsification with posterior chamber intraocular lens (PC IOL) implantation. Patients having uneventful phacoemulsification with PC IOL implantation were enrolled.
2. BCVA between 0.1 and 0.5
3. Cataract nuclear sclerosis in the range between II and III according to LOCS III scale
4. No anti-inflammatory medication for 2 weeks prior to cataract surgery
5. No allergy to loteprednol etabonate (LE) or bromfenac
6. Aged 45-90 years

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Senior

**Sex**

All

**Total final enrolment**

58

**Key exclusion criteria**

Patients with ocular infection, glaucoma, uveitis, diabetes, pseudoexfoliation syndrome, prior ocular trauma or intraocular surgery, corneal diseases, ocular tumors, optic nerve atrophy, autoimmune diseases, endocrine, renal, neurological, psychiatric disorders were excluded from the study.

**Date of first enrolment**

02/11/2013

**Date of final enrolment**

30/10/2014

## Locations

**Countries of recruitment**

Poland

**Study participating centre**

Department of Ophthalmology, Norbert Barlicki Memorial Teaching Hospital No. 1, Medical University of Lodz, Poland Head: Wojciech Omulecki MD, PhD

Poland  
92-430

**Study participating centre**

Department of Ophthalmology and Visual Rehabilitation, Central Veterans Hospital, Medical University of Lodz, Poland Head: Piotr Jurowski MD, PhD

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## Sponsor information

**Organisation**

Department of Ophthalmology, Norbert Barlicki Memorial Teaching Hospital No. 1, Medical University of Lodz

**ROR**

<https://ror.org/02t4ekc95>

## Funder(s)

**Funder type**

Not defined

**Funder Name**

Medical University of Lodz

## Results and Publications

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

The datasets generated during and/or analysed during the current study are not expected to be made available because we did not receive agreement from our patients to share the data with other institutions.

## IPD sharing plan summary

Not expected to be made available

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/01/2019	07/11/2019	Yes	No