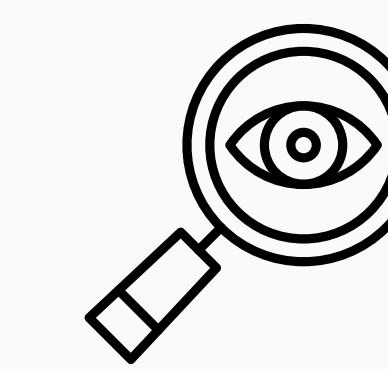


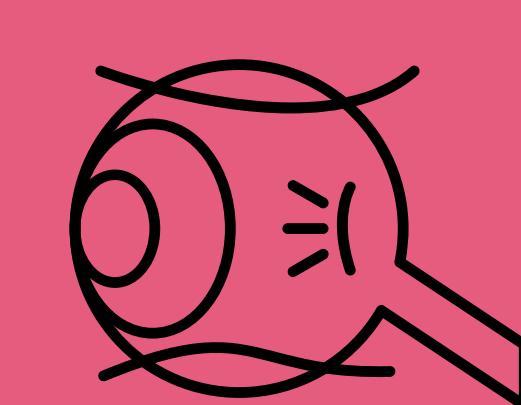
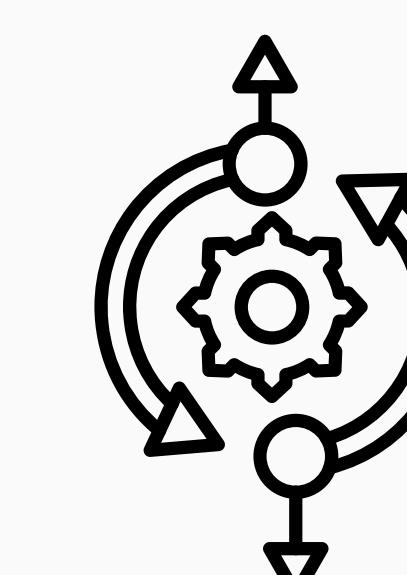
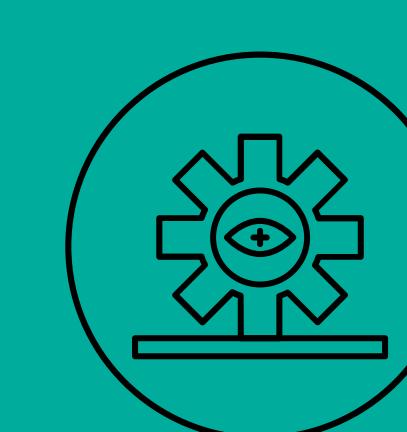
Ophthalmology Practice: A Pilot Project on Neovascular AMD



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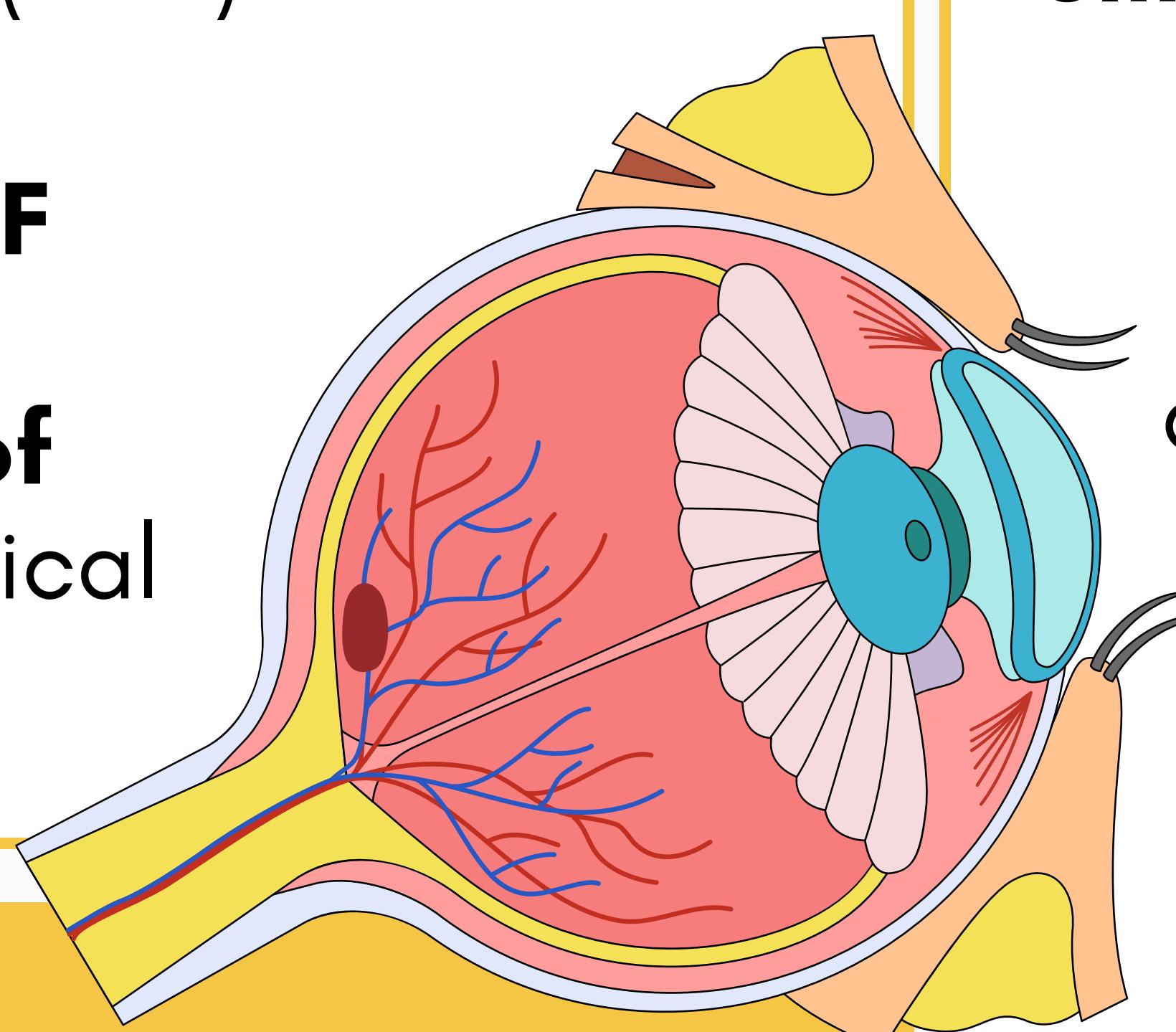
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OBJECTIVES

To explore **the relationship between** visual function and patient quality of life (QoL) in nAMD patients

undergoing **anti-VEGF therapy, and to evaluate the utility of PROMs** in routine clinical decision-making.

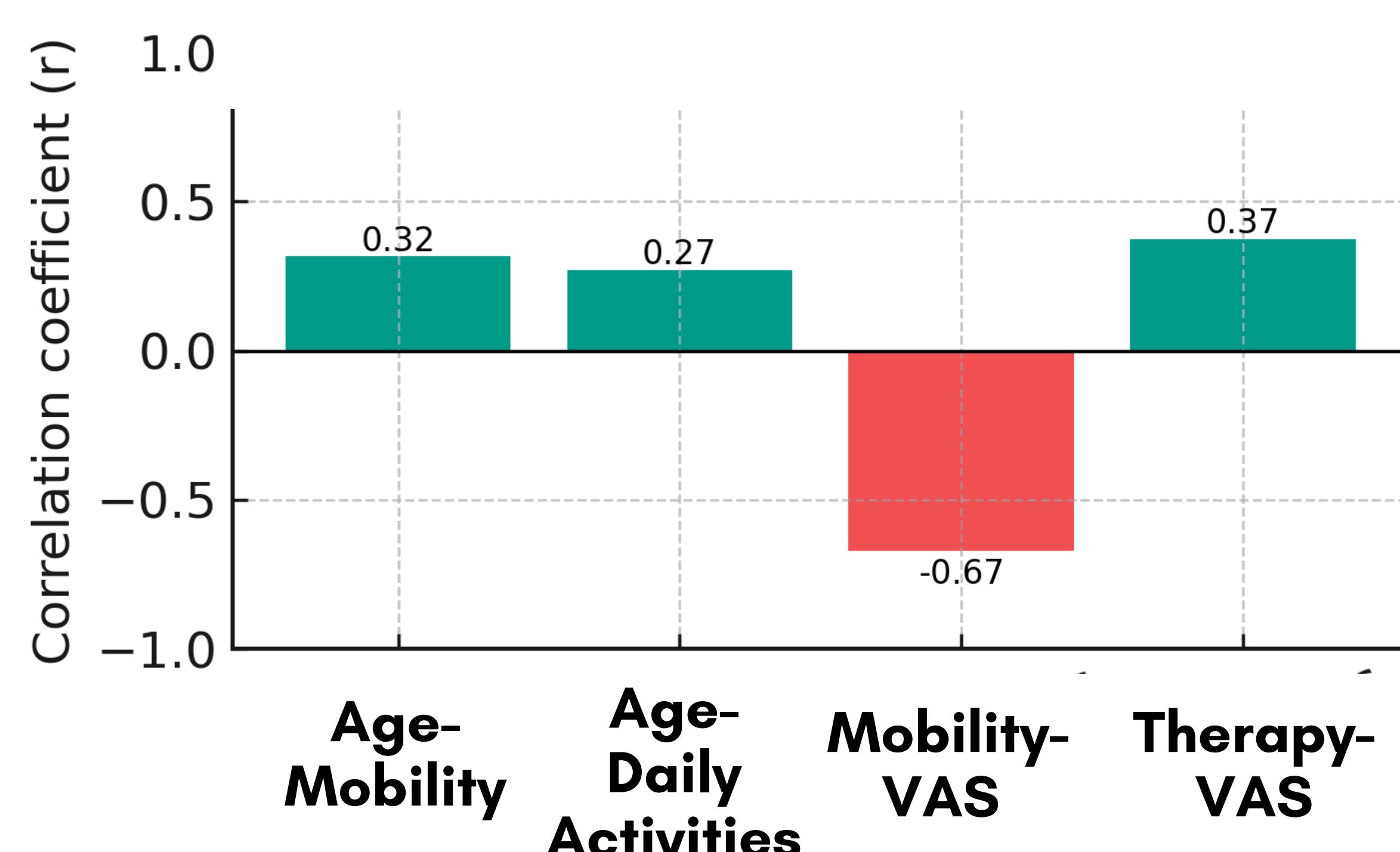


RESULTS

Women reported **greater impact** on activities and emotional well-being, although not statistically significant.

Correlation analysis (Figure 1) showed weak to moderate positive associations **between age and functional decline**, and a strong negative correlation between **mobility and overall health perception** (VAS). A moderate positive relationship was also observed between therapy frequency and VAS. **PROMs analysis (Figure 2)** revealed significant differences between treatment-naïve and non-naïve patients in self-care ($p = 0.001$), mobility ($p = 0.011$), and anxiety ($p = 0.040$), with naïve patients reporting better outcomes.

Figure 1. Correlation summary between key clinical and patient-reported outcomes



METHODS:

A longitudinal observational study **was conducted across two ophthalmology clinics** in Bulgaria from January to July 2024.

Validated PROMs instruments

assessing mobility, self-care, daily activities, pain, anxiety, and general health (via VAS) were administered at baseline and follow-ups. **Correlation analyses were performed** between PROM scores, age, gender, therapy exposure (naïve vs non-naïve), and visual acuity outcomes (VOD/VOS).

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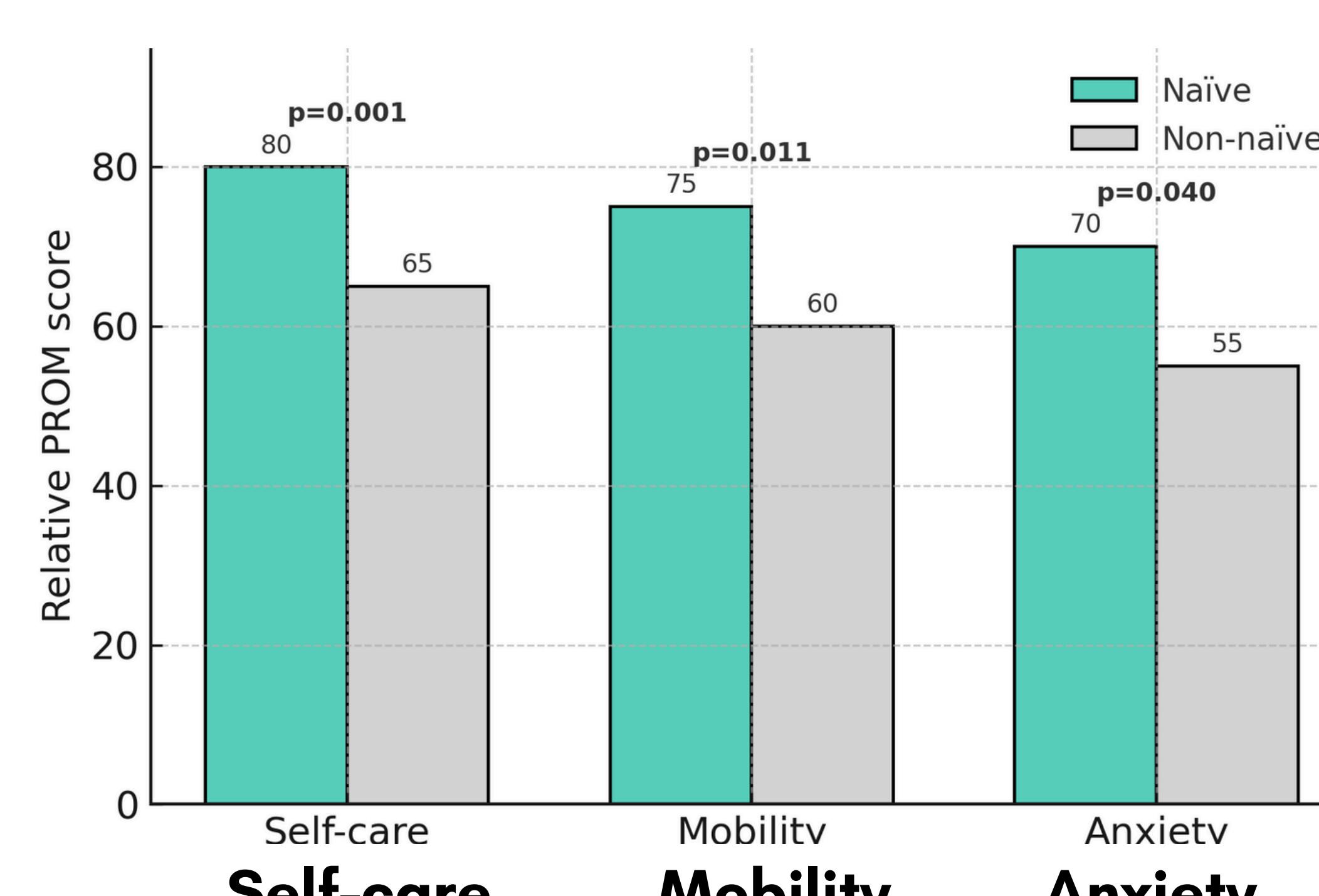
Age-related macular degeneration patients.

CONCLUSION

PROMs integration into ophthalmology practice **is feasible and yields clinically relevant insights**.

These measures capture meaningful aspects of patient experience that may not be reflected in clinical indicators alone. **The findings support** wider PROMs implementation in real-world AMD care to enable truly value-based decision-making.

Figure 2. PROMs differences between treatment-naïve and non-naïve patients



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