

# Vitreomacular traction in patients with exudative age-related macular degeneration<sup>☆</sup>

## Tracción vitreomacular en pacientes con degeneración macular asociada a la edad exudativa

Dear Sir,

We have read with interest the article by Dr. Filloy and Arias<sup>1</sup> under the title "Response to ranibizumab in patients with wet age-related macular degeneration (ARMD) with vitreomacular traction" in which they conclude that in these patients the tendency is to diminished visual acuity, requiring a higher number of intravitreal injections.

Recently, Mayr-Sponer et al.<sup>2</sup> published a paper under the title "Influence of the vitreomacular interface on outcomes of ranibizumab therapy in neovascular age-related macular degeneration", in which they conclude that patients with posterior vitreous detachment may require a lower number of injections than those who did not exhibit complete detachment. The patients of said study were obtained from the patient database of the EXCITE<sup>3</sup> study, in which vitreomacular traction (VMT) was a criterion for exclusion and therefore only the various degrees of vitreous detachment and vitreomacular adhesion (VMA) were studied. However, said results are in agreement with those published by Filloy and Arias<sup>1</sup> who studied VMT specifically.

Out of 373 wet ARMD patients treated with ranibizumab of the Filloy and Arias database<sup>1</sup>, 18 exhibited VMT, which would leave a 4.56% prevalence of VMT in patients with exudative ARMD. The University Hospital of La Candelaria (Santa Cruz de Tenerife, Spain) and the University Hospital of La Fe (Valencia, Spain) have carried out a retrospective and observational study with exudative ARMD patients referred to said hospitals without having received any type of previous treatment and who subsequently received an initial dose of 3 consecutive ranibizumab injections in order to study vitreomacular interface characteristics. Out of 17 patients included in said study, none exhibited VMT and only 7.1% exhibited VMA. The differences vis-à-vis the study discussed herein are probably due to the low sample numbers both presented.

Due to the low prevalence of vitreomacular traction in exudative ARMD patients, multicenter and prospective studies with larger samples are necessary to obtain an in-depth knowledge of the prognostic implications of the vitreomac-

ular interface and ARMD. This would allow greater degree of treatment individualization to enable an optimization of results in these patients and to determine whether, with the aim of improving visual results and reducing the number of intravitreal injections, the pharmacological induction of posterior vitreous detachment prior to the use of intravitreal ranibizumab injections could be beneficial.

### REFERENCES

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