

## One-year results of half-dose photodynamic therapy versus one-third-dose photodynamic therapy in chronic or recurrent central serous chorioretinopathy

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Abstract:

**Objective:** To think about the adequacy of half-portion photodynamic Therapy (PDT) and 33% portion PDT in therapy in constant or repeat Central Serous Chorioretinopathy (CSC).

Laser photocoagulation is commonly used to treat extrafoveal spillage. Nonetheless, interminable CSC, with expansive or undefined spillage, and CSC with subfoveal or juxtafoveal spillage are hard to treat with laser photocoagulation on account of trouble in confining the spillage point and the chance of genuine intricacies, for example, RPE decay, changeless scotoma and optional choroidal neovascularization (CNV). Photodynamic treatment (PDT) with verteporfin has been accounted for to be powerful for diminishing SRF, accordingly improving the visual keenness in these patients. Notwithstanding, post-PDT confusions, for example, RPE change, choroidal ischemia and auxiliary CNV, have propelled investigations of the impact of bringing down the portion of verteporfin or diminishing the laser power vitality (diminishing the fluence), to limit post-PDT complexities. Appropriately, numerous investigations have detailed the viability of half-portion PDT and half-fluence PDT in therapy of intense and interminable CSC, without genuine inconveniences

We reflectively surveyed clinical records and pictures from patients who got half-portion PDT or 33% portion PDT for ceaseless or repetitive CSC between January 2012 and December 2017 at the Department of Ophthalmology, Songklanagarind Hospital, PSU, Songkhla Province, Thailand. Our

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examination was affirmed by the Institutional Review Board of Songklanagarind Hospital, PSU, and clung to the rules of the Declaration of Helsinki.

We characterized CSC into two kinds; ceaseless CSC was characterized dependent on indications continuing over 3 months, and repetitive CSC was characterized dependent on new side effects in a similar eye or the individual eye of a patient with visual shortfalls from a previous scene of CSC.

**Strategies:** A review survey of ceaseless or repeat CSC patients, who were treated with half-portion or 33% portion PDT for a year development. Best-Corrected Visual Acuity (BCVA), Central Retinal Thickness (CRT) and goal of Subretinal Fluid (SRF) at standard, 1, 3, 6, and a year post PDT were surveyed.

**Results:** 46 eyes and 20 eyes got half-portion and 33% portion PDT, individually. The investigation shows non-inadequacy of the 33% portion PDT contrasted and half-portion PDT in BCVA improvement ( $0.10 \pm 0.04$  versus  $0.17 \pm 0.04$  LogMar,  $P=0.293$ ) and CRT improvement ( $125.6 \pm 24.6$  versus  $139.1 \pm 16.54$   $\mu$ m,  $P=0.652$ ) at a year development. The repeat paces of SRF was noteworthy higher in 33% portion of PDT contrasted and half-portion PDT (40.0% versus 15.2%,  $P=0.027$ ) at a year development.

A sum of 87 patients with ceaseless or intermittent CSC were incorporated. 27 patients were barred on the grounds that: their

follow-up was under a year (25 patients), the finding was changed to PCV (1 patient) or their subsequent OCT information were missing (1 patient). At last, information from 60 patients (66 eyes) were investigated; 41 patients (46 eyes) had gotten half-portion PDT and 19 patients (20 eyes) had gotten 33% portion PDT.

CSC is portrayed by a collection of SRF in the macula, with or without serous separation of the RPE, brought about by choroidal vascular hyperpermeability. PDT is applied for treatment of CSC on the grounds that it demonstrates to remake the choroidal vasculature and decrease vascular hyperpermeability. As of late, the PDT convention has been changed to decrease the pace of complexities, by diminishing the dose of verteporfin or lessening the fluence. Until this point, in any case, the ideal PDT convention for keeping up adequacy and lessening unfavorable occasions stays indistinct. This review study analyzed the adequacy of 33% portion and half-portion PDT for constant or intermittent CSC.

End: 33% portion PDT was non mediocrity in BCVA and CRT improvement when contrasted and half-portion PDT. This examination indicated 33% portion PDT was higher repeat pace of ailment.

