Quality of life in the AMD: impact of the methodology ICHOM in the clinical process

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1. INTRODUCTION

The Age-related Macular Degeneration, AMD, is a disease with a growing incidence in the population. This increase highlights the **need to develop tools to make the care process more efficient and improve the quality of life of the patients.**

- The ICHOM methodology was adopted into the AMD process
- New tools and technologies were developed, to register and structure all the patient's data, CROs and PROs
- All the collected data was deeply analyzed

2. OBJECTIVE

To measure and improve the quality of life of patients with AMD, through the implementation of the ICHOM methodology

2. METHODS

MINIMUM DATA SET

- The ICHOM set was taken as a basis

CROS FORMS

- Based on the defined data set, three data collection forms were designed to be used during the patient's visits

PROS QUESTIONNAIRES

- **Brief IVI questionnaire**
- Tool that allows patients to respond questionnaires using their devices

Using these tools, all CROs and PROS were collected in the hospital information system, allowing its further exploitation and analysis.

4. RESULTS

The ICHOM set for AMD has been correctly implemented, beginning data collection in February 2023.

332 patients have been included from February to September, with a total of 818 structured visit forms

Dashboards have been created to analyze all the data collected:

Population analysis	Individual patient's evolution	Cost analysis	Statistical analysis

DATA RESULTS:

Visits information:

	Mean	Q1	Q3	IQR	IC95
Num of visits*	2.35	2	3	1	0.12
Num of injections*	2.24	1	3	2	0.10

** by patient's and eye*

Visual acuity (VA):

VA evolution | Affected eye VA | VA segmentation (by drug, sex, age...)

VA example results:

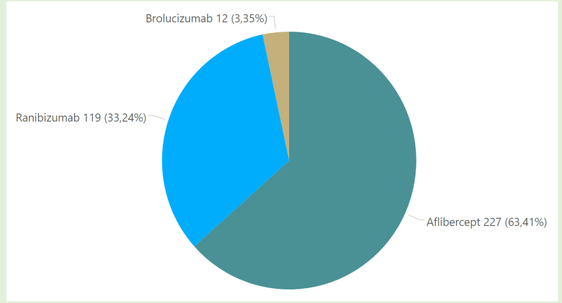
	Mean	Q1	Q3	IQR	IC95
VA (LogMAR letters)	64.49	60.00	75.00	15.00	1.03

Drug	None	Brolucizumab	Ranibuzumab	Aflibercept	Bevacizumab
VA (LogMAR letters)	70.71	66.67	65.76	65.49	61.11

Treatment:

Last injection drug | Drug segmentation | Time between injections | Treatment abandonment | Switch between drugs change | ...

Last injection drug



OCT activity:

OCT activity	NUM	%
Inactive	469	48.60 %
Active	206	21.35
Subretinal fluid only	206	21.35
N/A	84	8.70

Switch between drugs information:

OCT change | VA change | ...

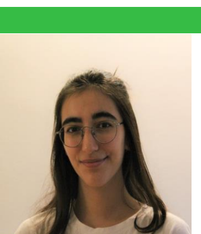
Process indicators:

Emergency referrals | Adverse effects | ...

Results by type of patient: Naïve, not naïve

5. CONCLUSIONS

- The collection of data, both at the **individual and population level**, allows for better follow-up of patients and to know in advance their possible evolution.
- Very valuable information has been acquired, which will help to **detect patterns and draw conclusions in order to improve the AMD process**.
- **The patient's perception of their illness has been obtained**, an essential step to include them in decision-making and guide healthcare towards VBHC.



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Scan here for more information about the ICHOM implementation

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