

DMLA exsudative: cas cliniques

Salomon-Yves Cohen

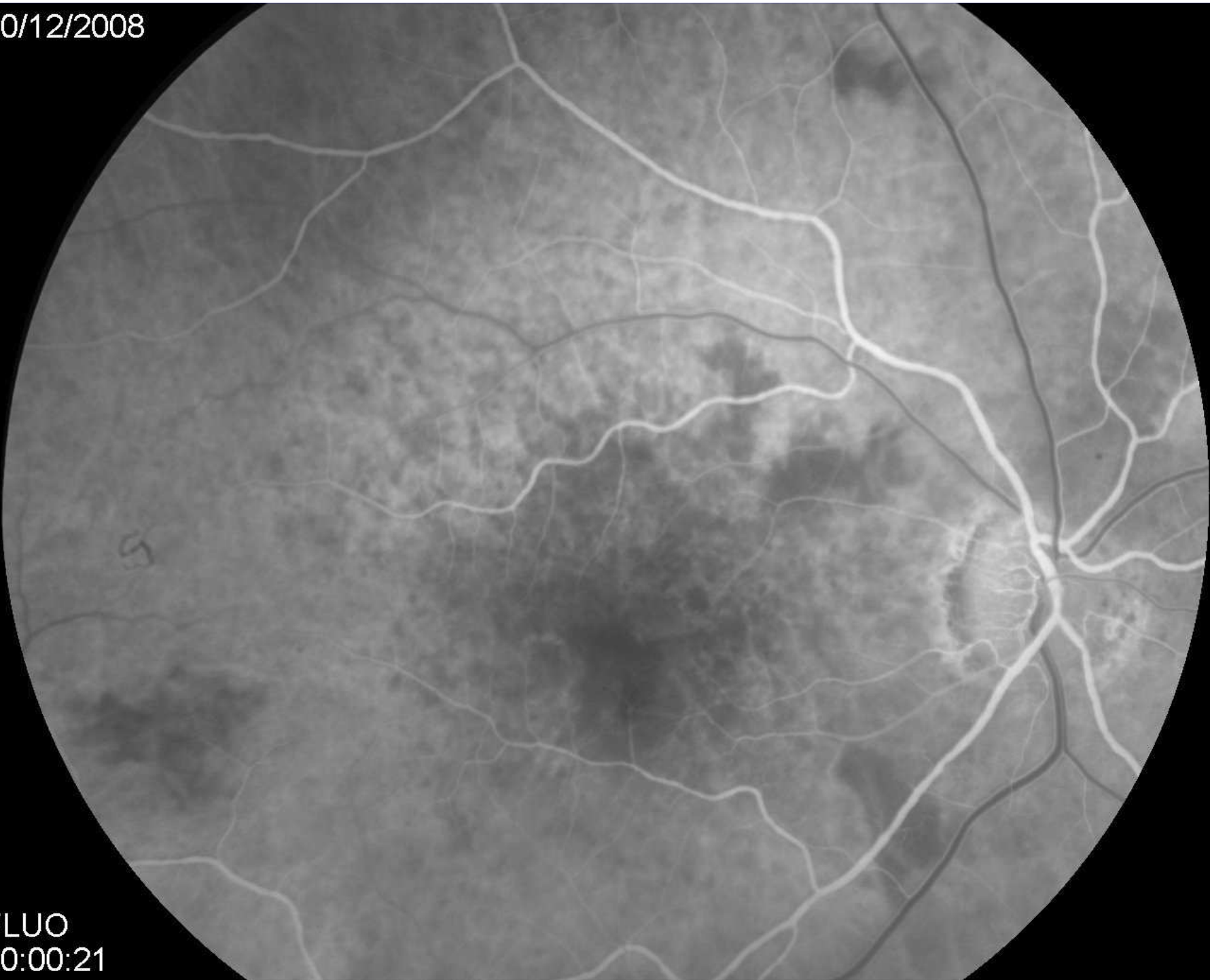
Centre d'Imagerie et de Laser, Paris

10/12/2008



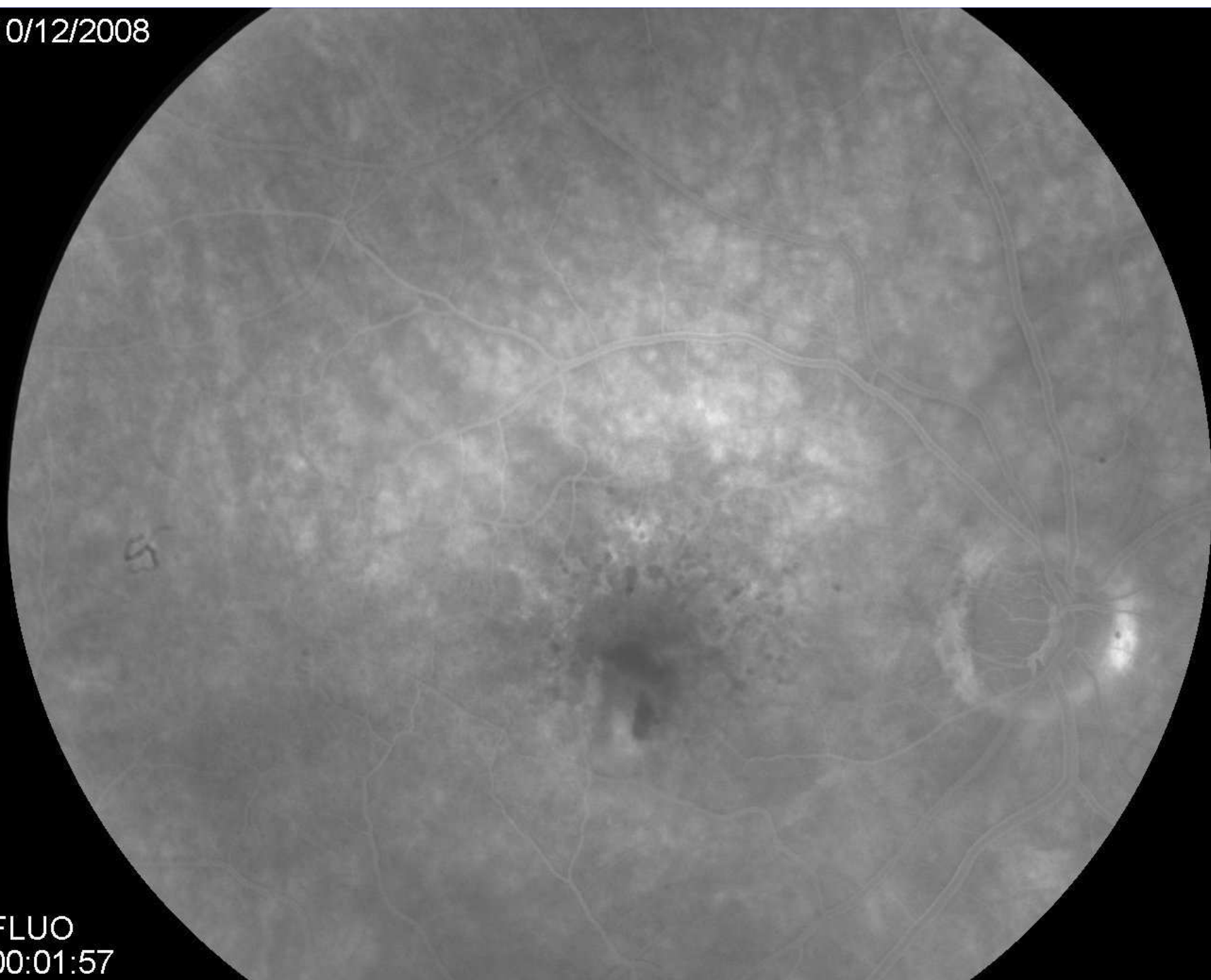
Couleur (comp.

10/12/2008

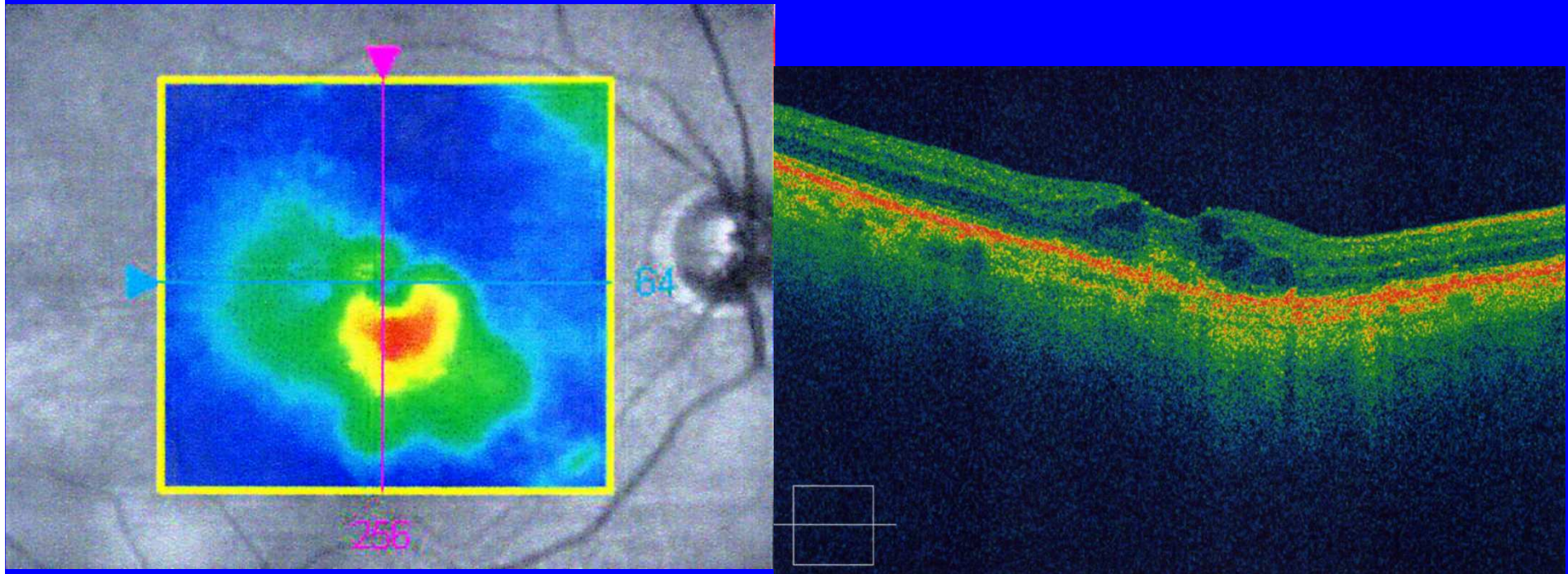


FLUO
00:00:21

10/12/2008



FLUO
00:01:57



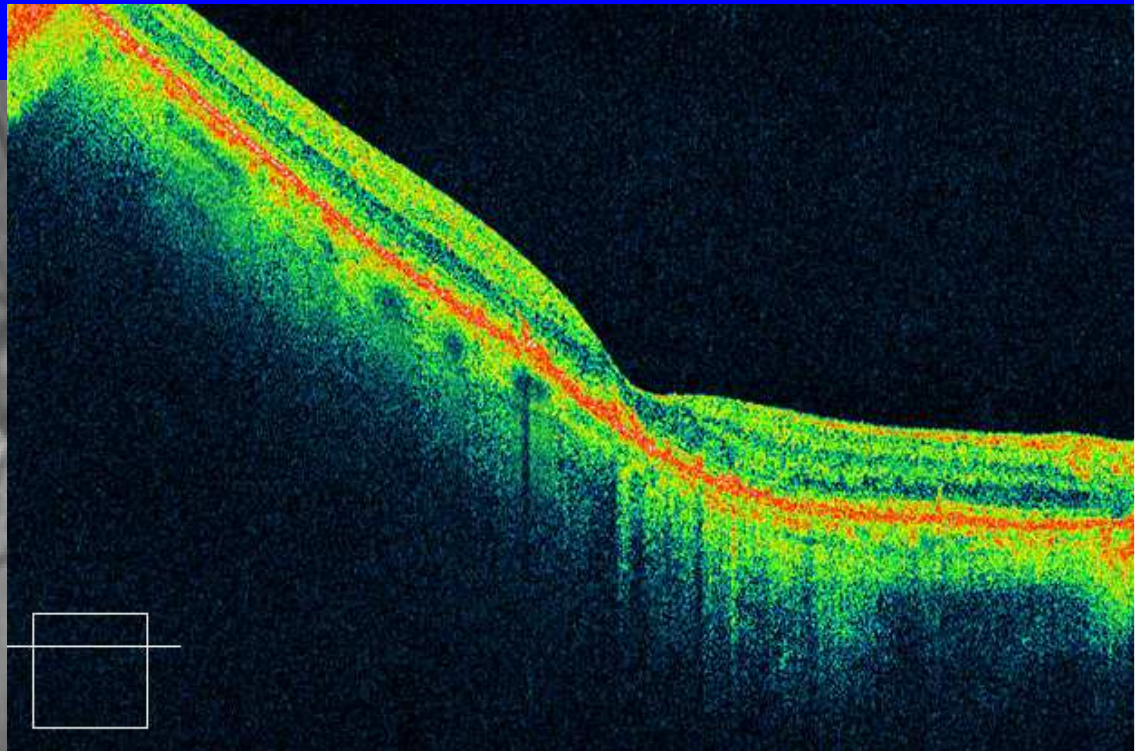
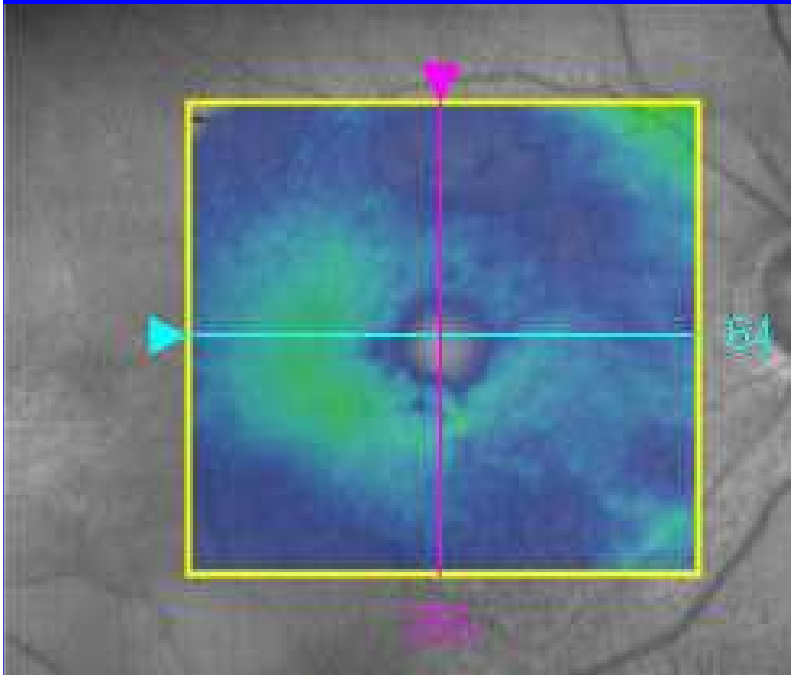
$AV = 20/32$

3 IVT Lucentis

06/04/2009



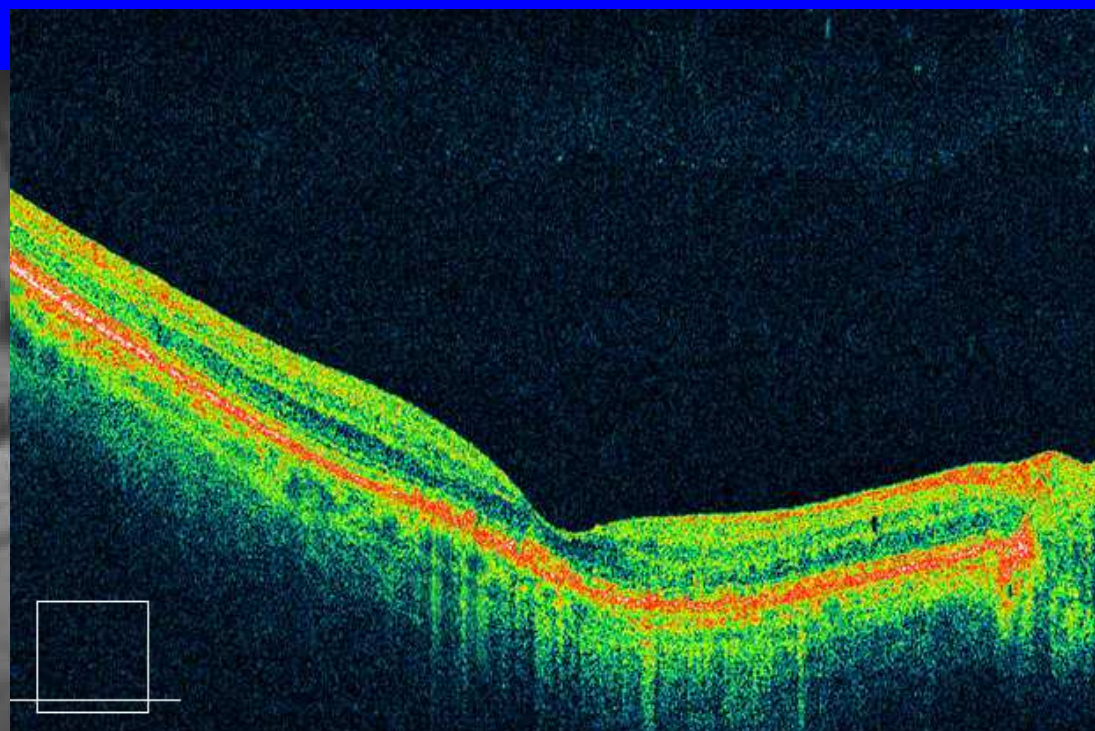
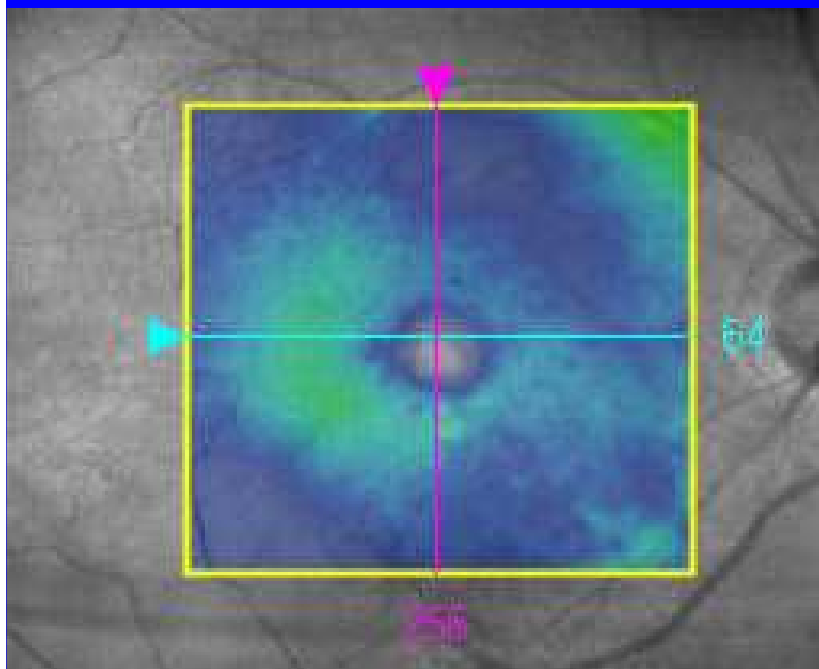
Couleur (comp.



20/05/2009



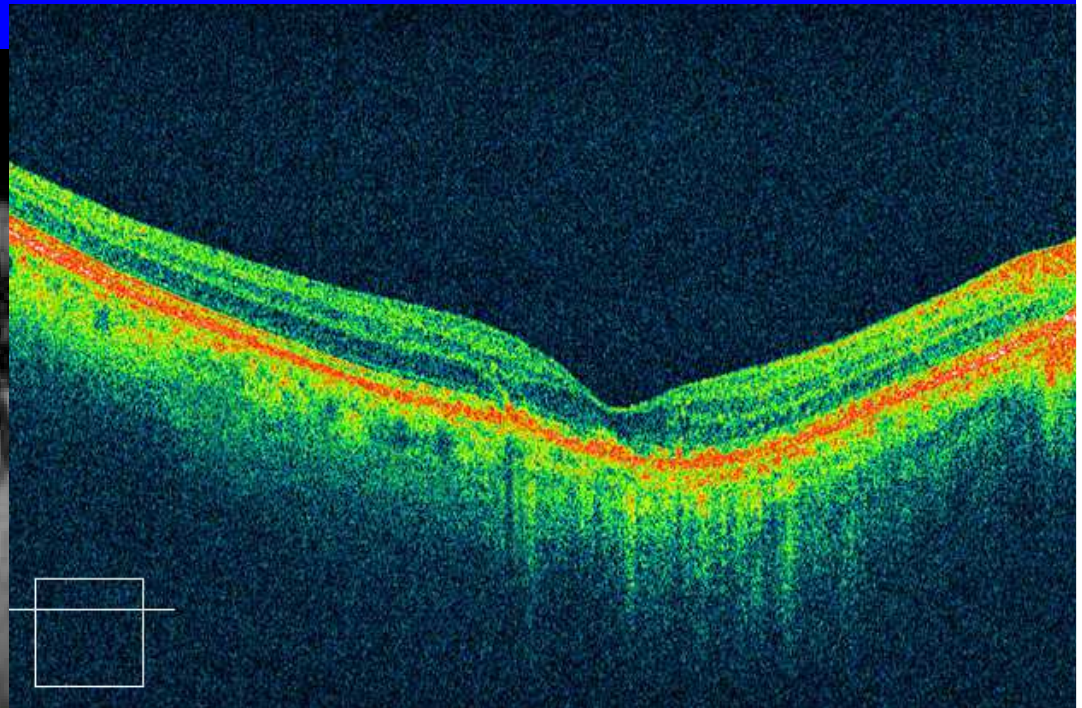
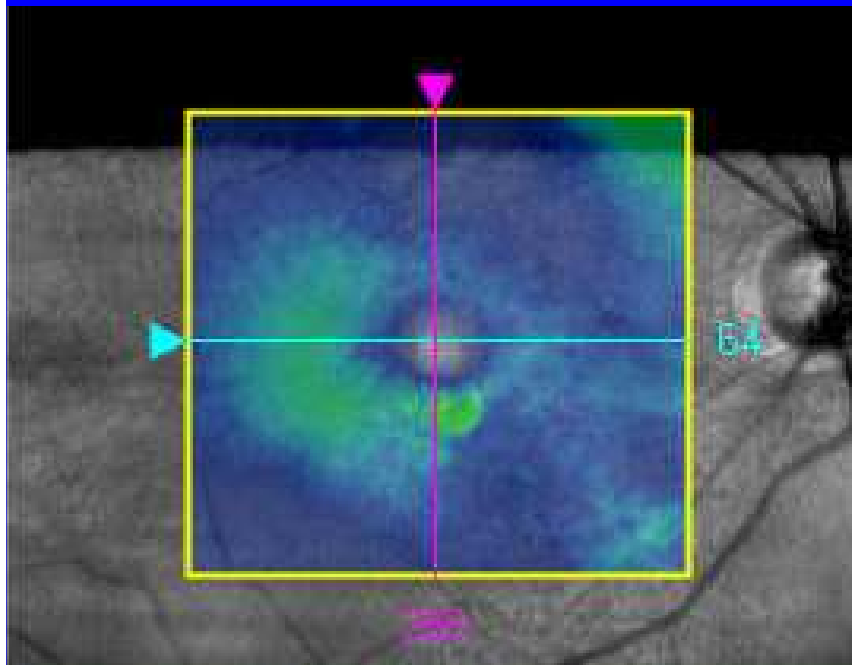
Couleur (comp.



09/09/2009



Couleur (comp.



AV = 20/25 (83 lettres)

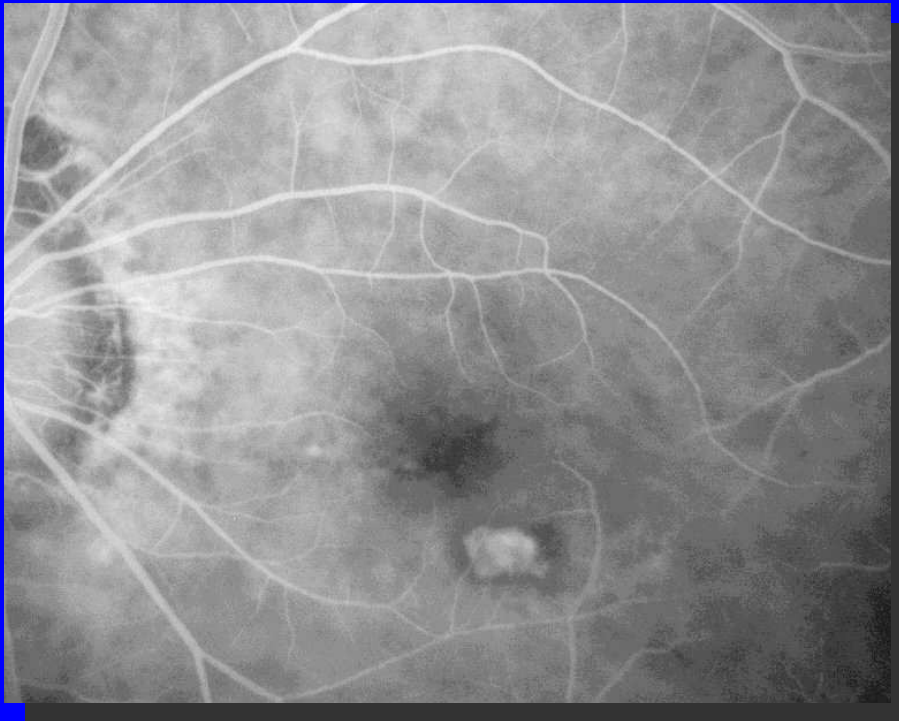
Toujours sec en OCT

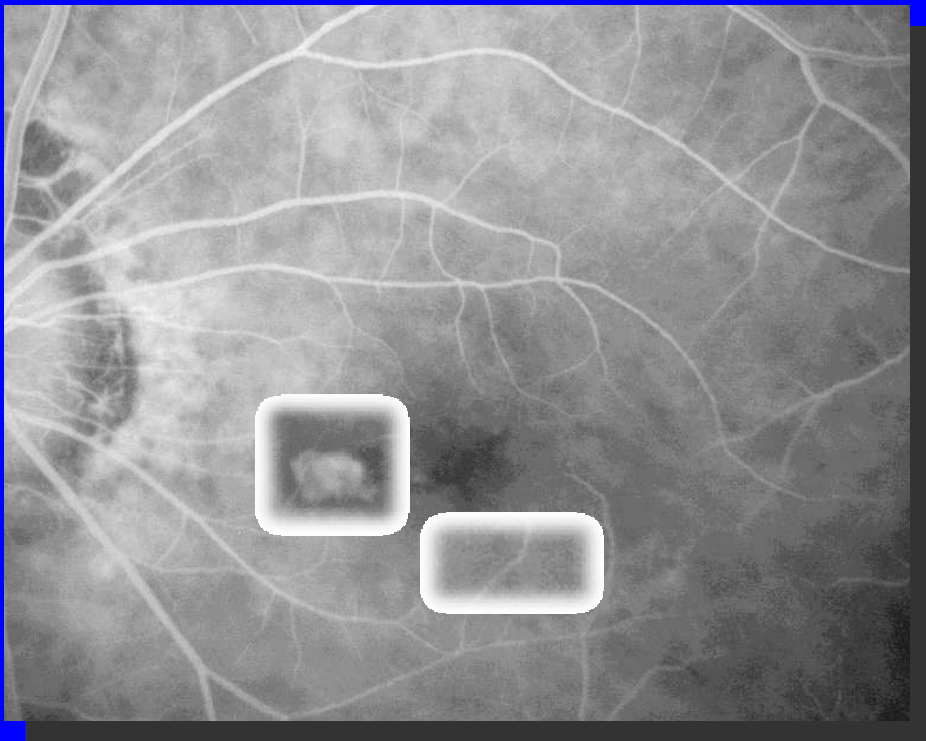
Toujours sec en OCT

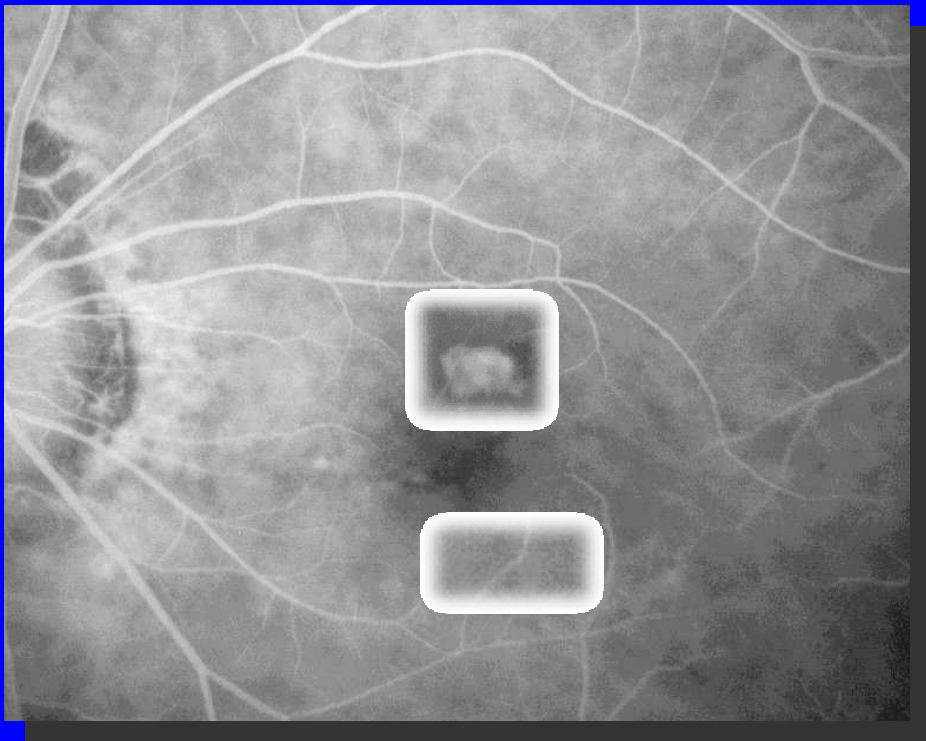
Poursuivre les contrôles mensuels ?

A vie ??

Quid des néovaisseaux juxta et extra-fovéolaires ?







Photocoagulation des NVV

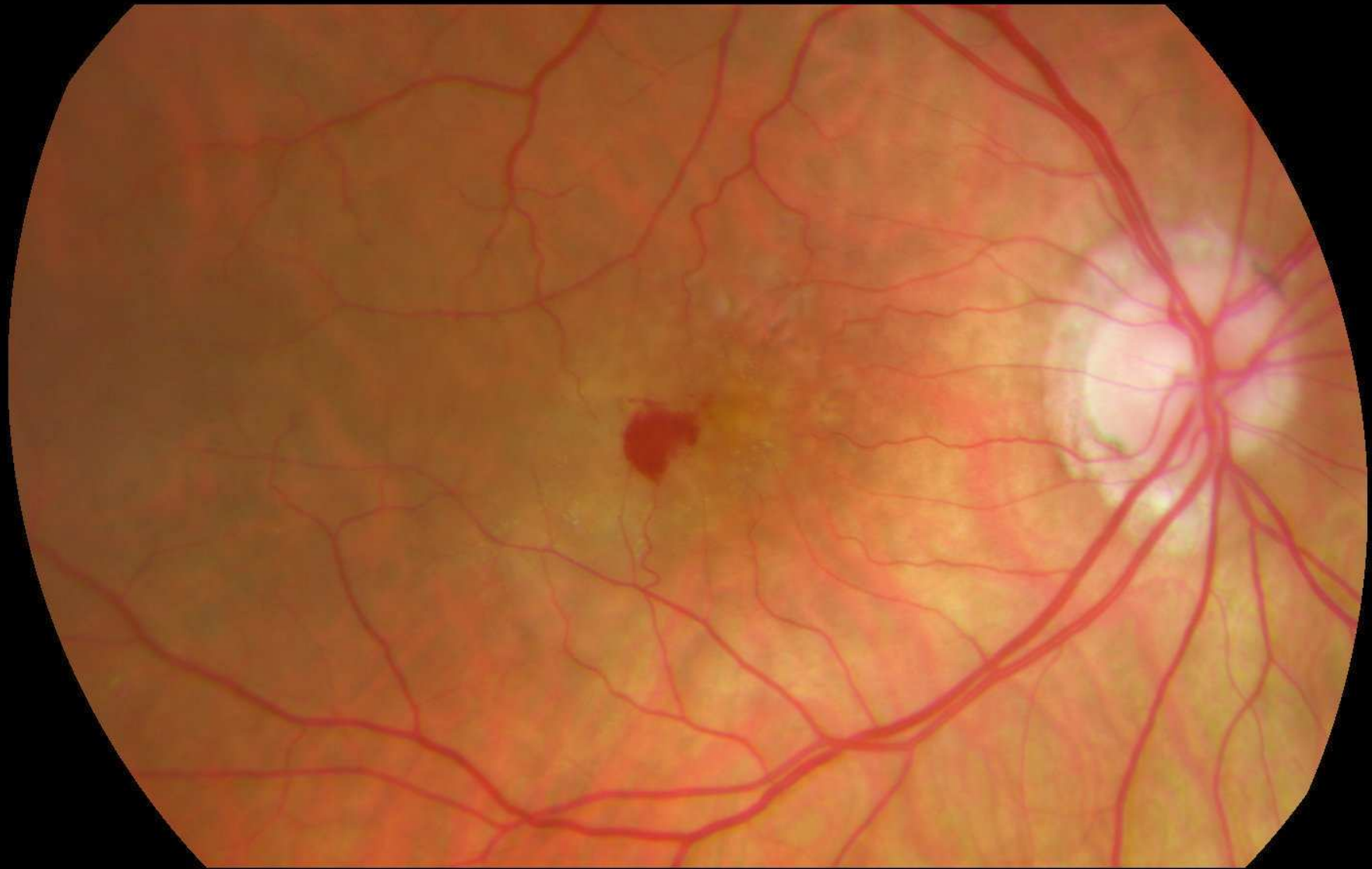
Indications résiduelles ?

A partir de quelle distance / fovéola ?

La dimension du néovaisseau intervient-elle dans la décision ?

Sa topographie intervient-elle ?

28/06/2007



Couleur (comp.

28/06/2007

VERT



28/06/2007

FLUO
00:00:26



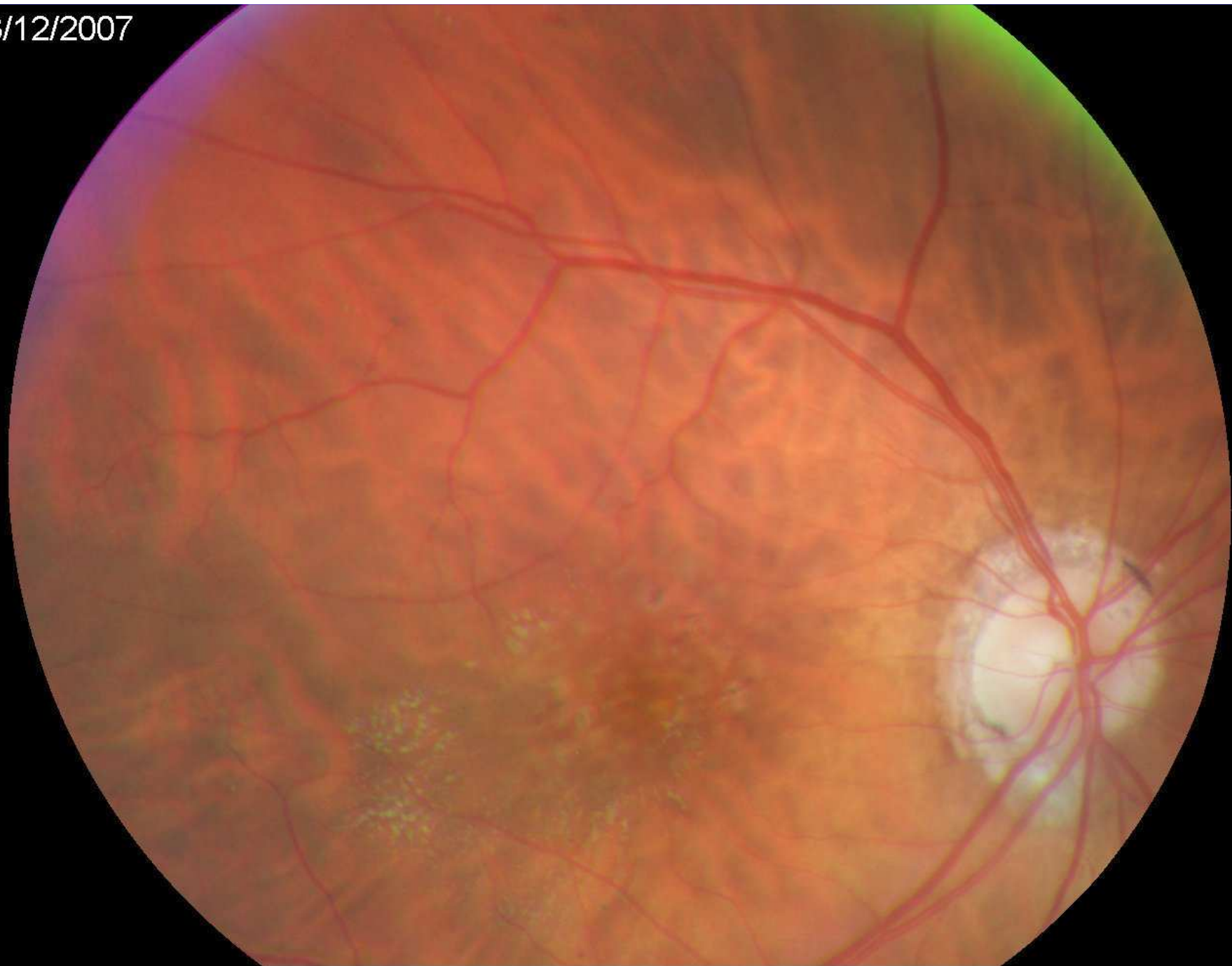
28/06/2007



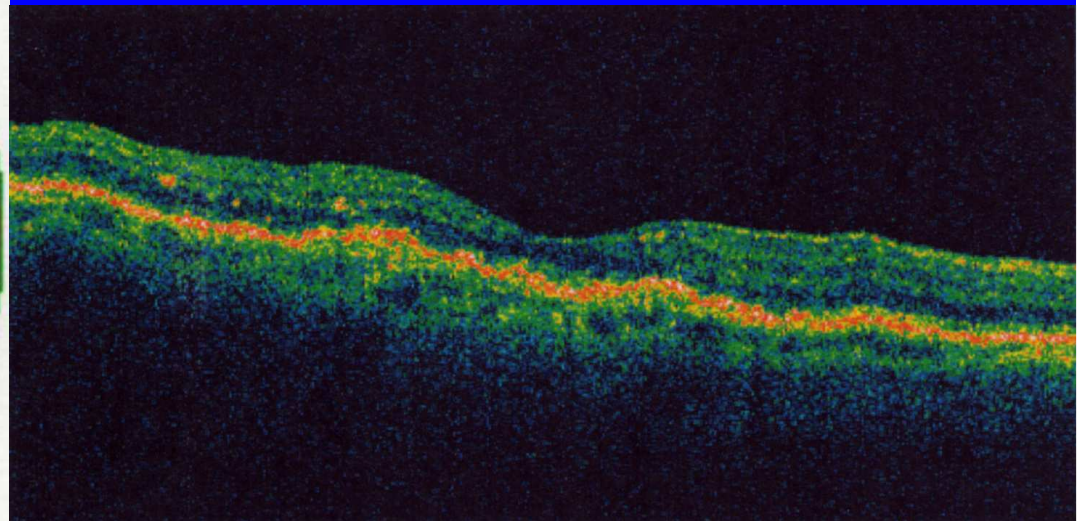
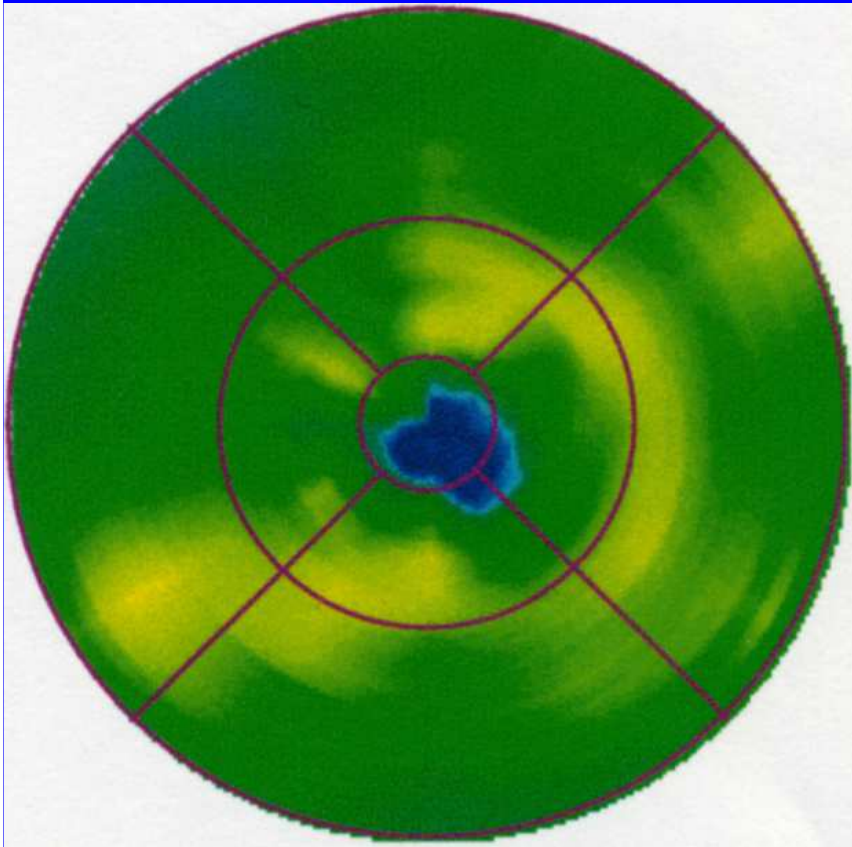
FLUO
00:05:07

AV = 20/40, 4 IVT de Lucentis

13/12/2007

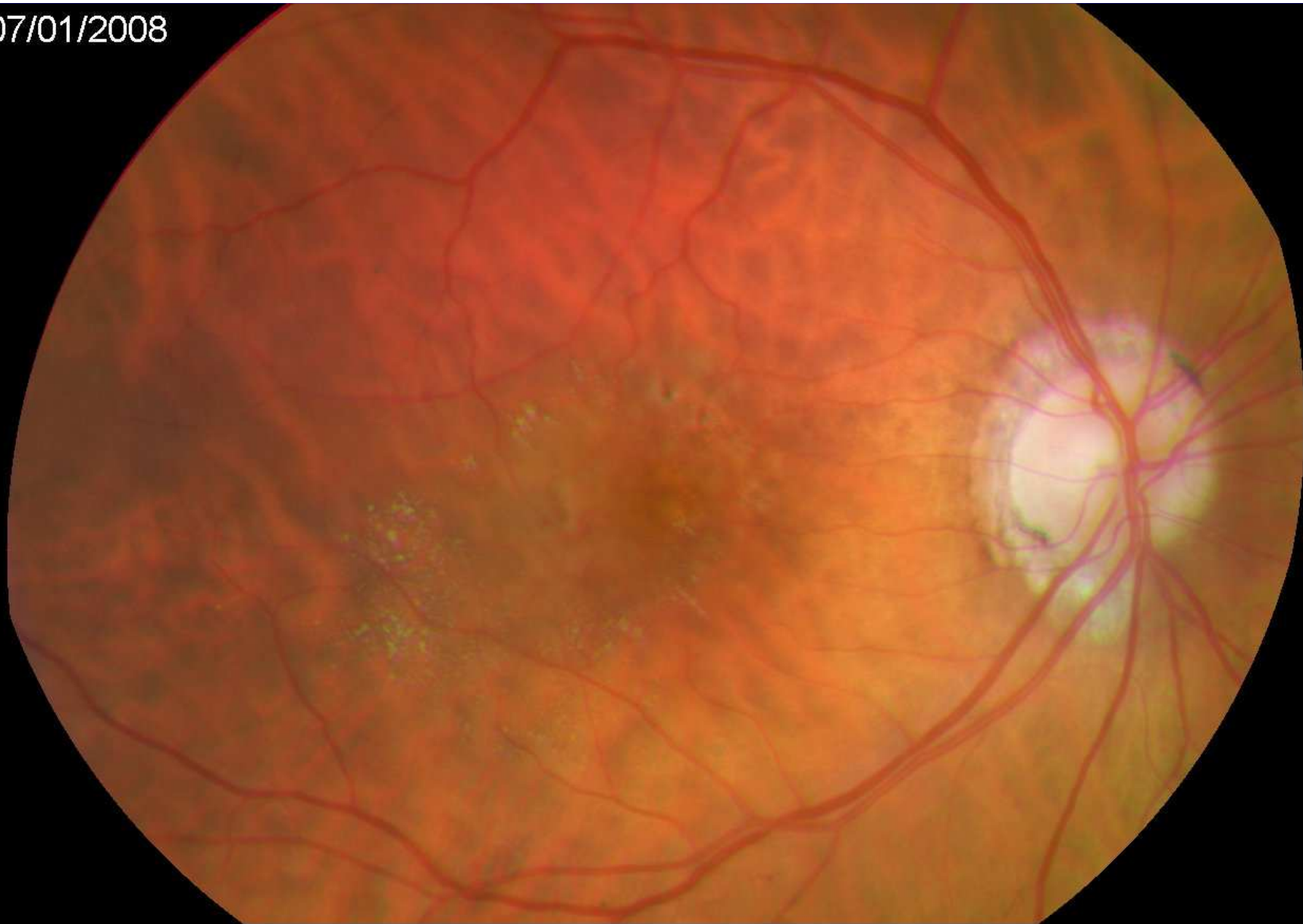


Couleur (comp.

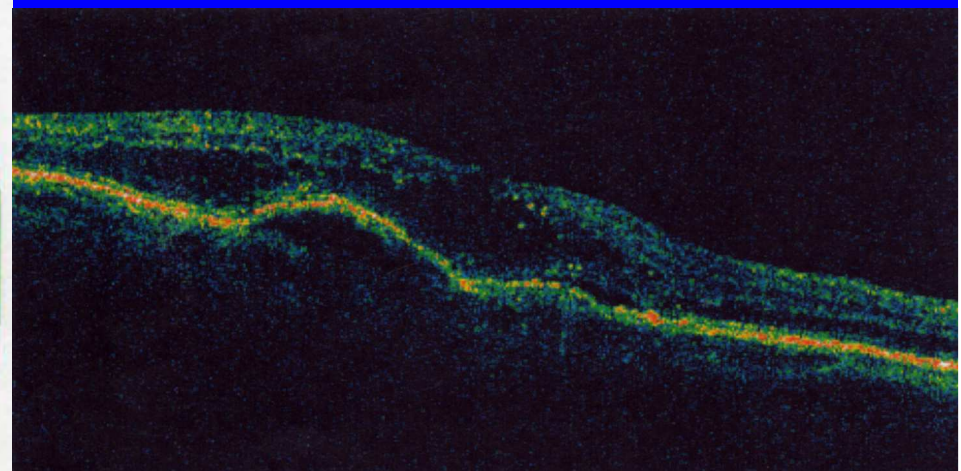
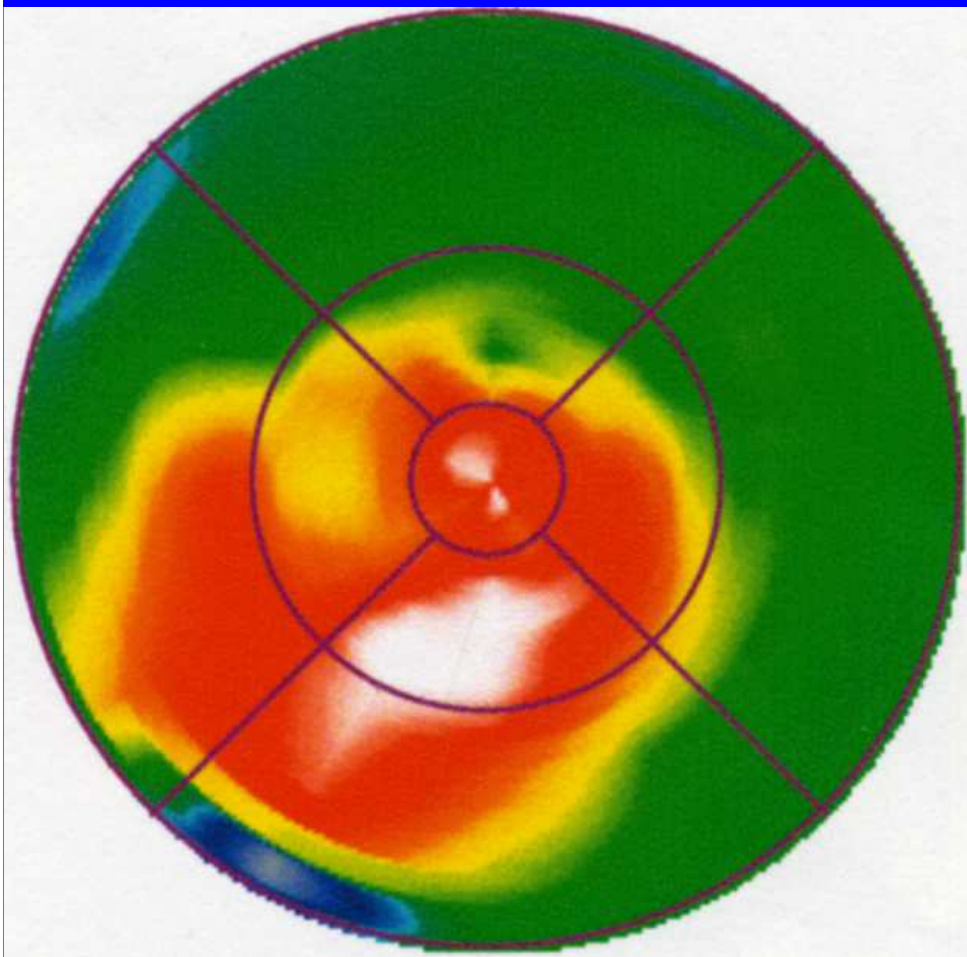


AV = 20/32, surveillance mensuelle

07/01/2008

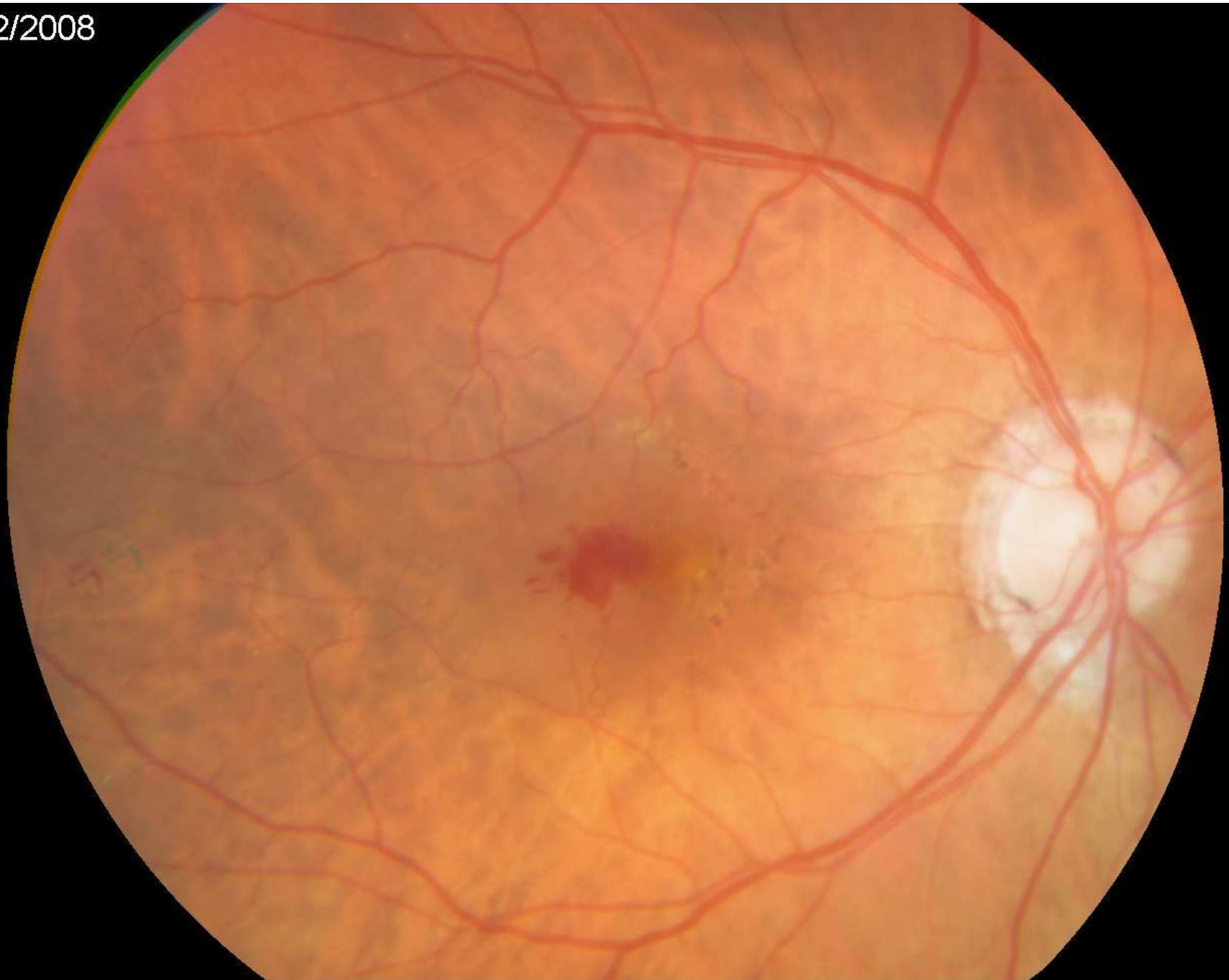


Couleur (comp.

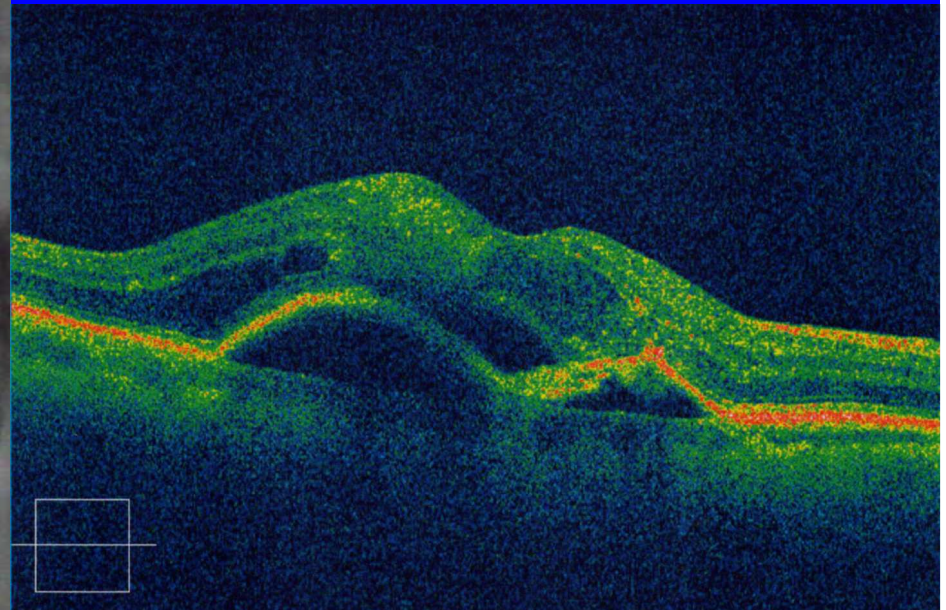
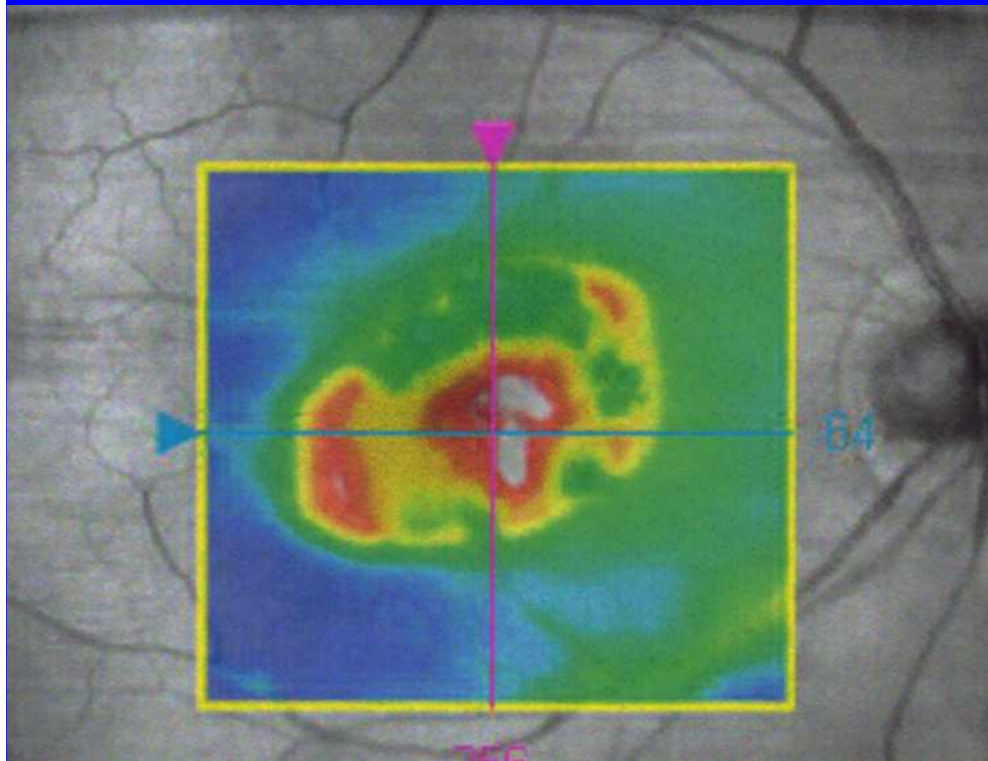


Récidive 15 jours après un contrôle satisfaisant,
accueil en urgence: plusieurs IVT en 2008

17/12/2008



Couleur (comp.

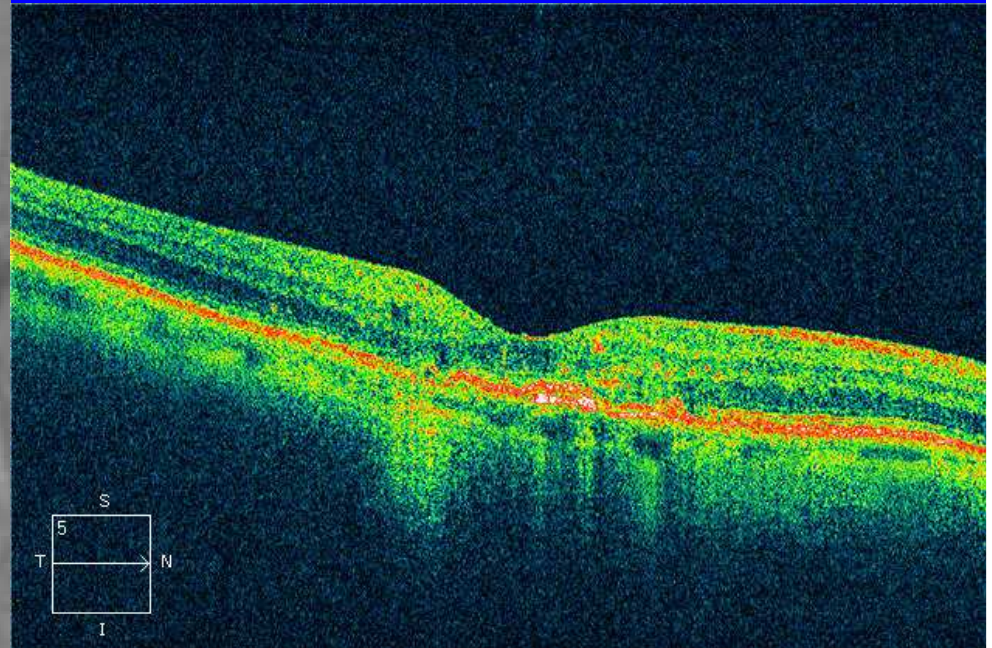
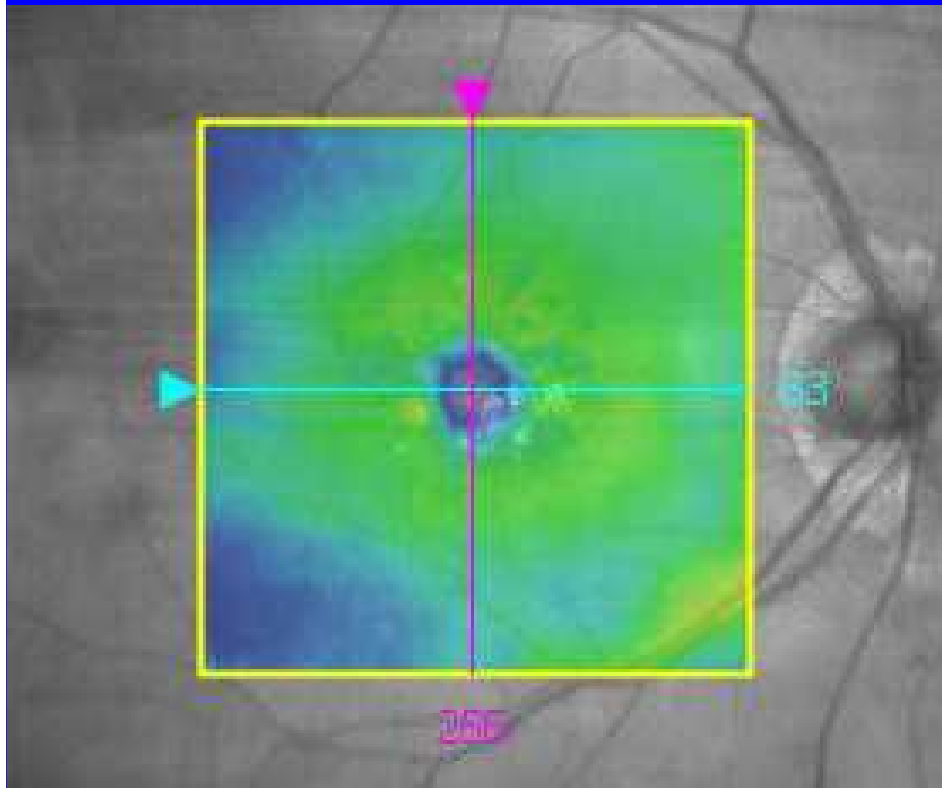


Evolution cyclique: 8 IVT OD

09/09/2009

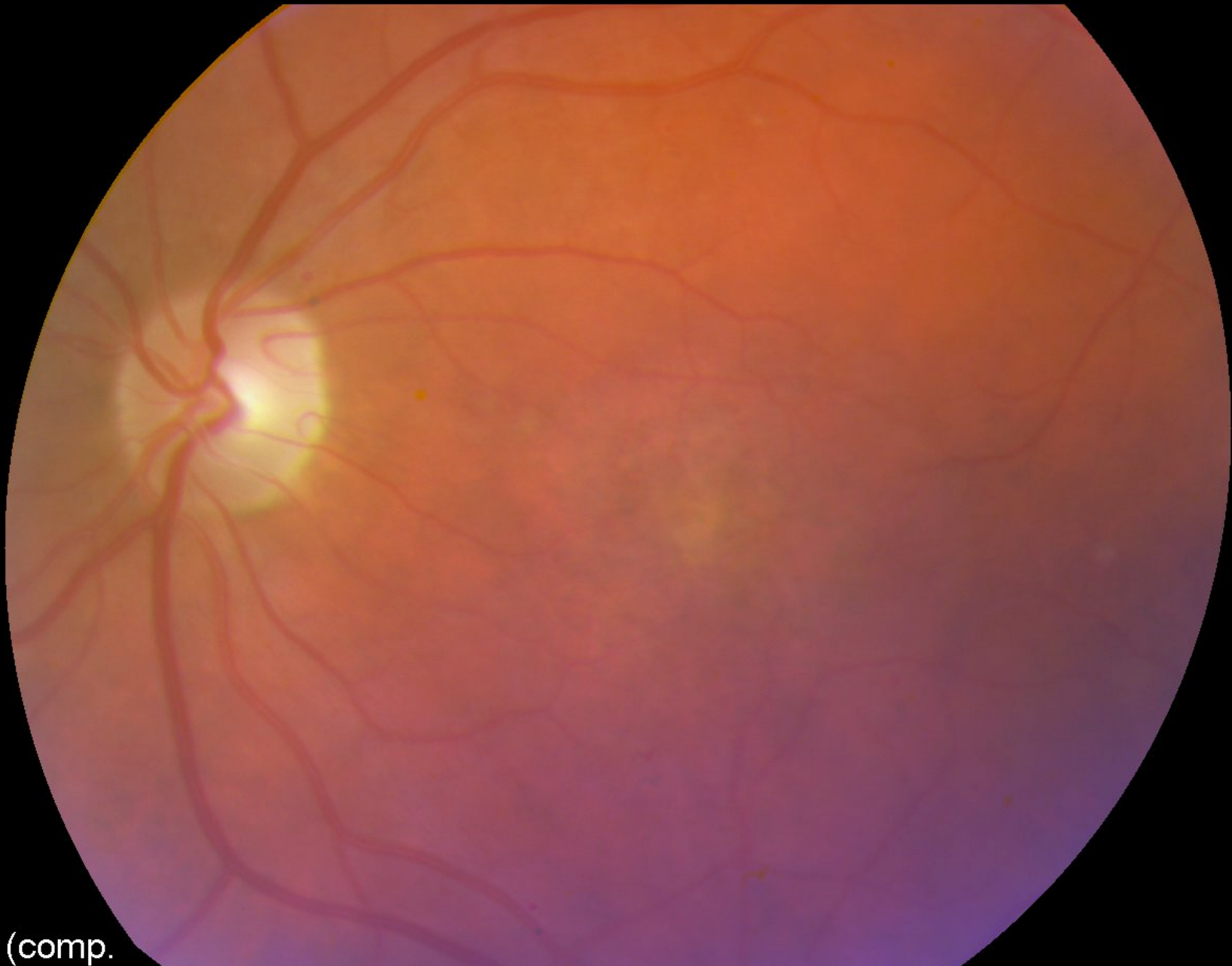


Couleur (comp.



AV = 20/40, Sec en OCT après 13 IVT OD
Poursuivre ou anticiper les récides ?

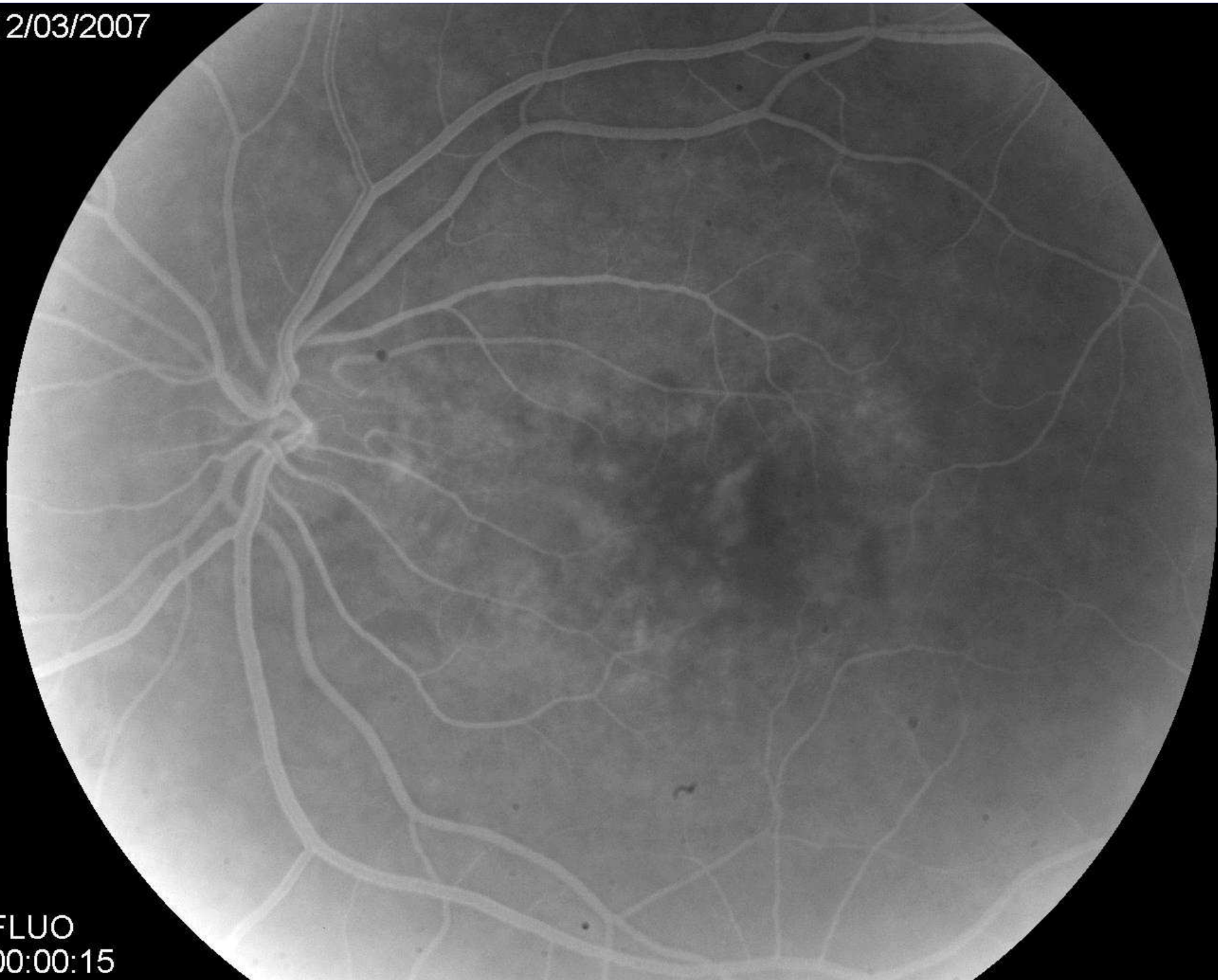
12/03/2007



Couleur (comp.

12/03/2007

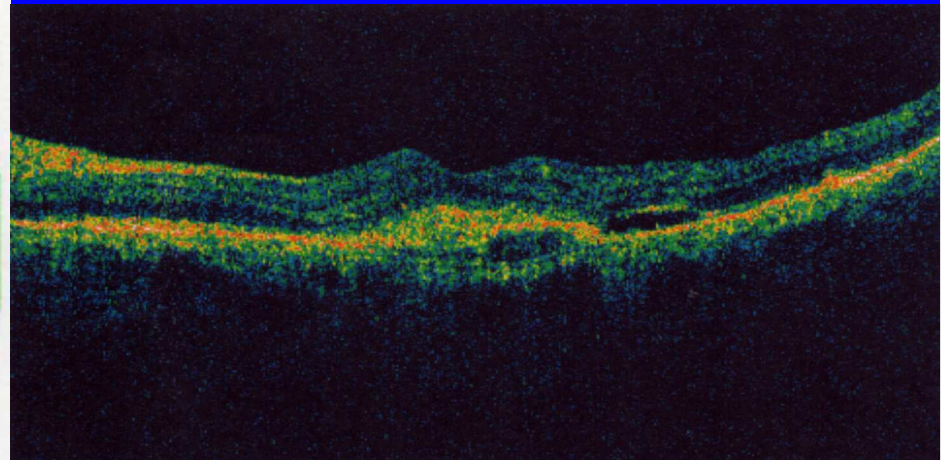
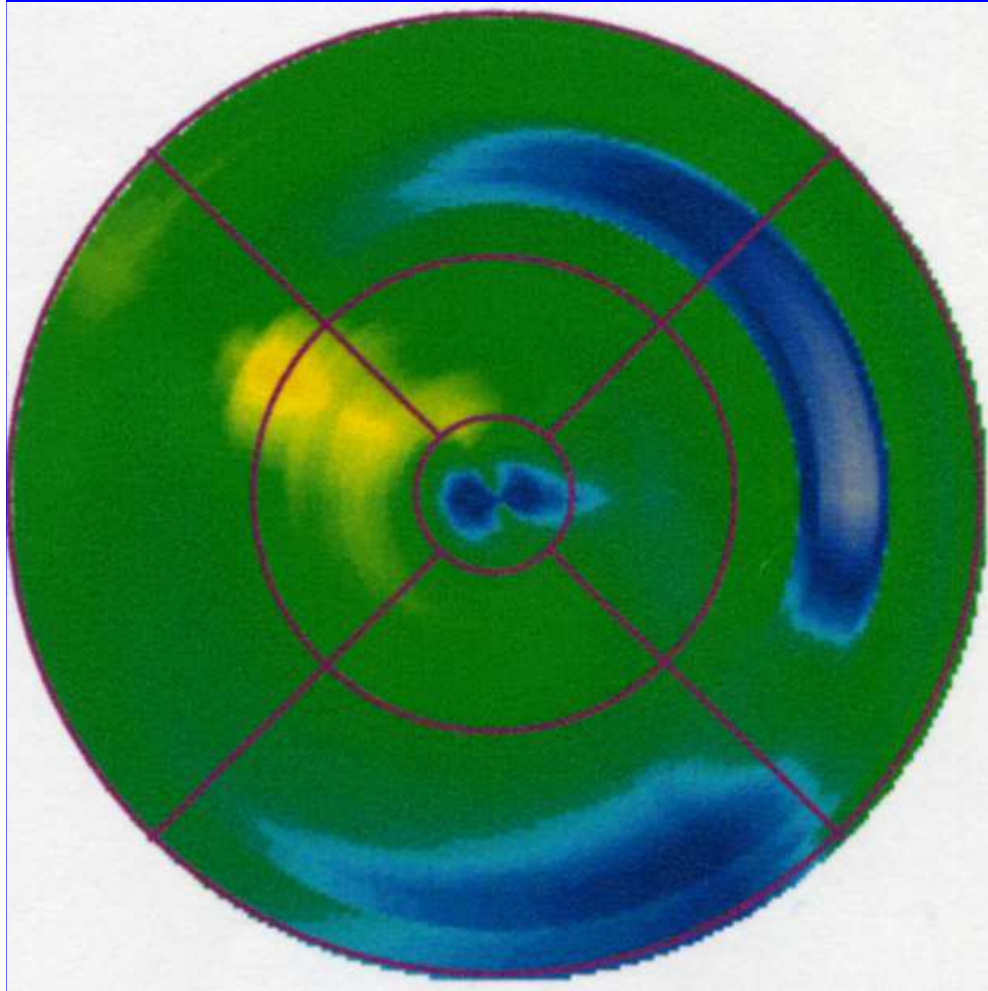
FLUO
00:00:15



12/03/2007

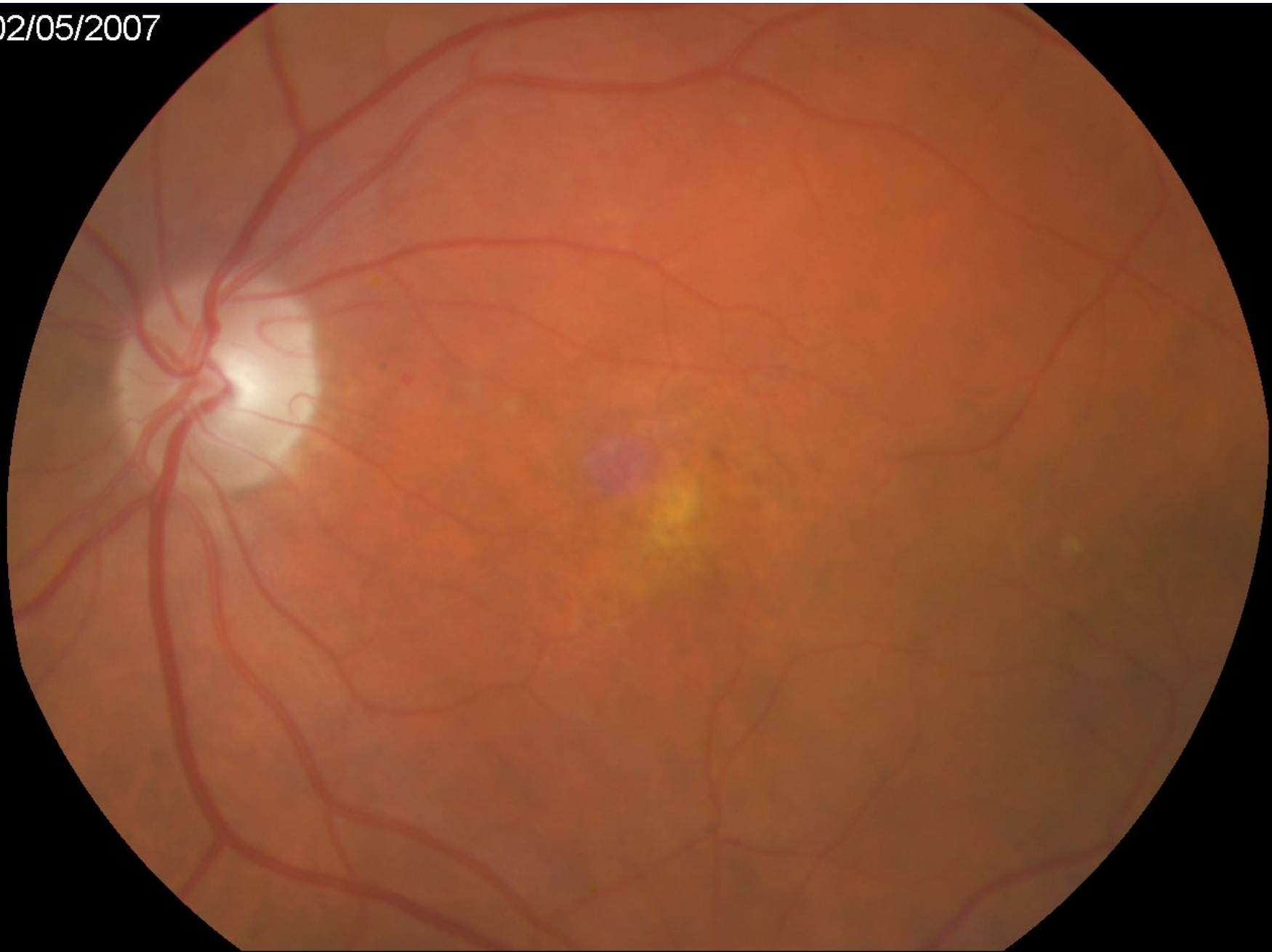
FLUO
00:03:03





AV = 20/64, BAV ressentie, 1 IVT Lucentis

02/05/2007



Couleur (comp.

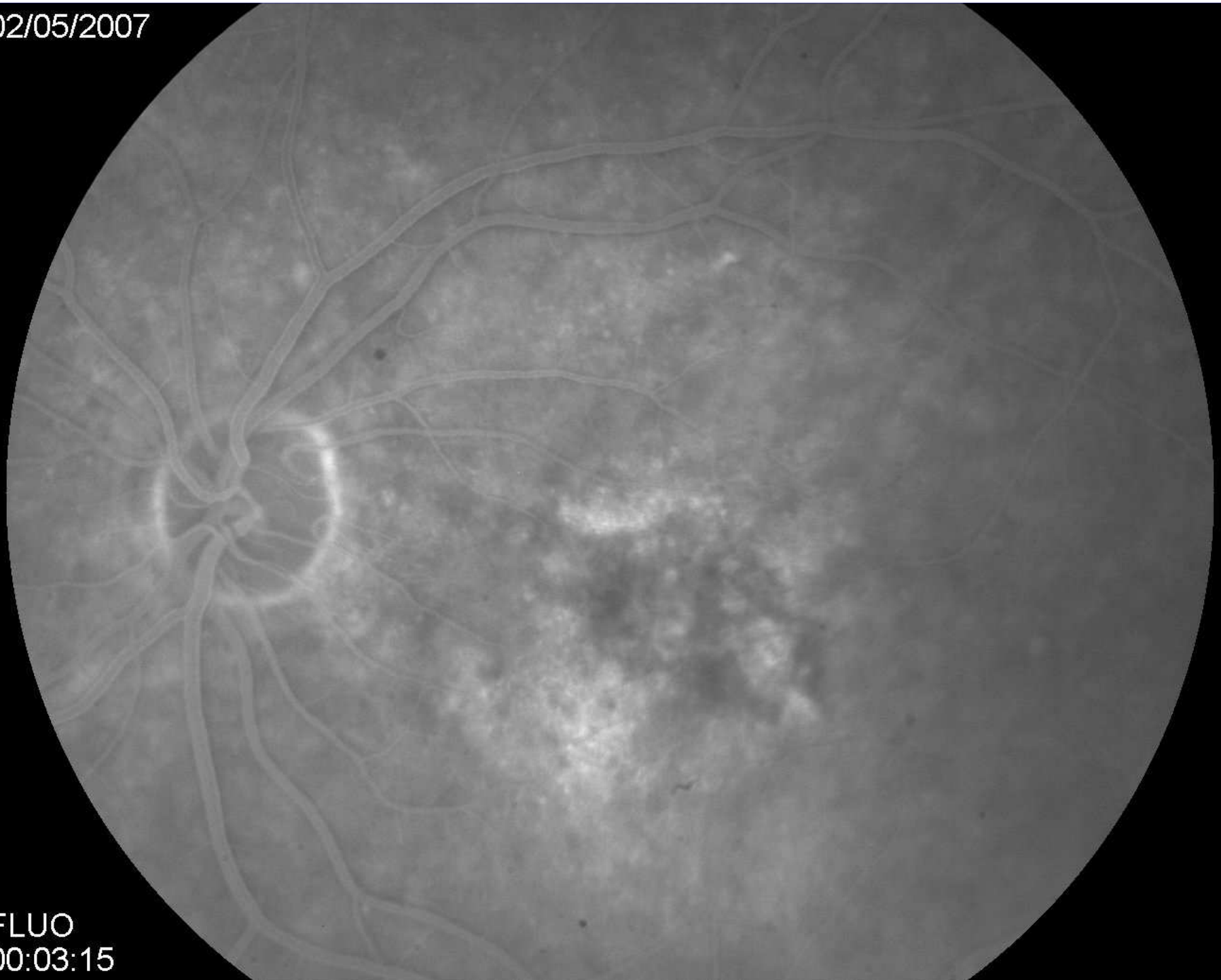
02/05/2007

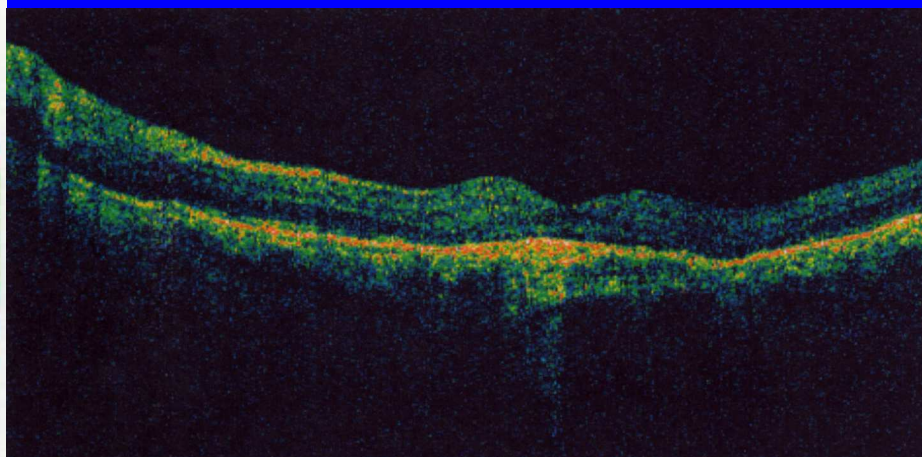
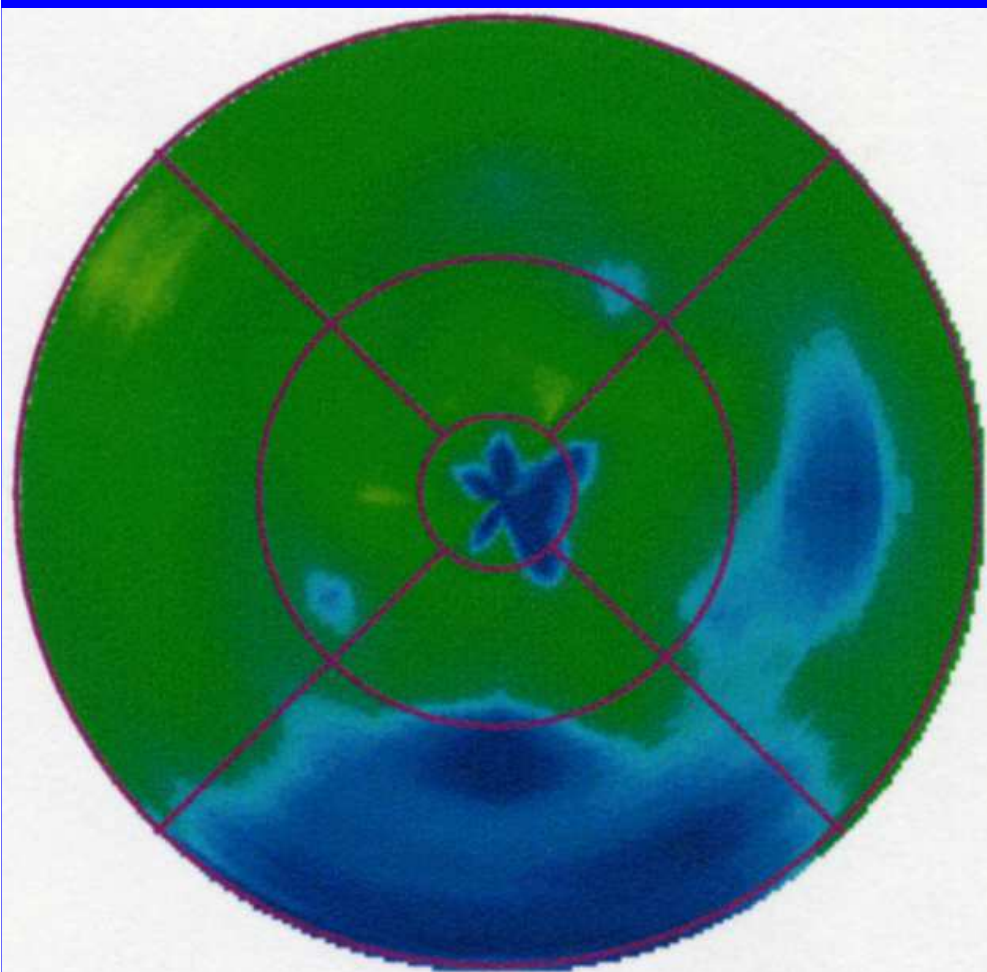
FLUO
00:00:28



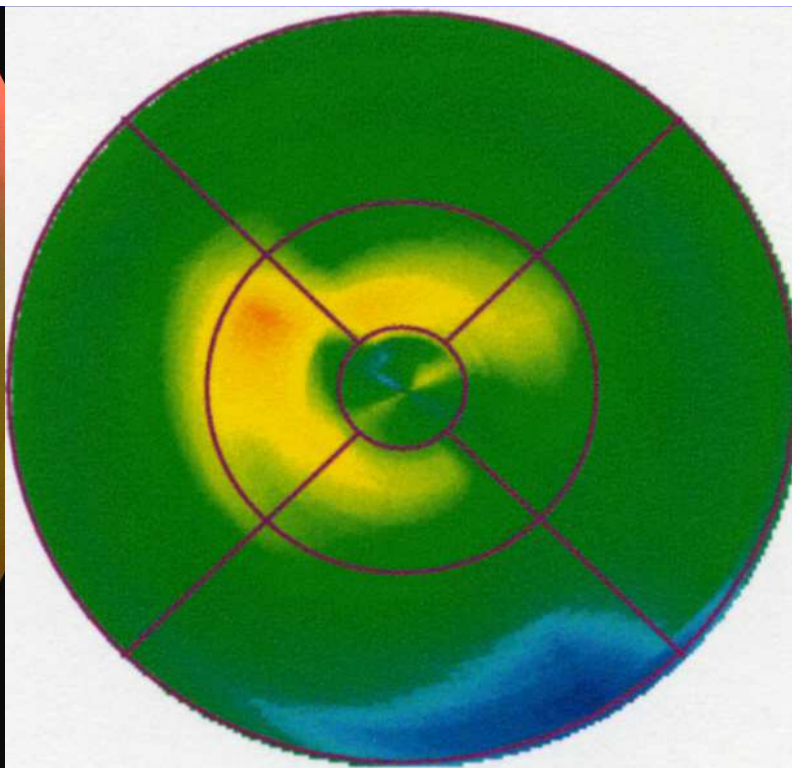
02/05/2007

FLUO
00:03:15

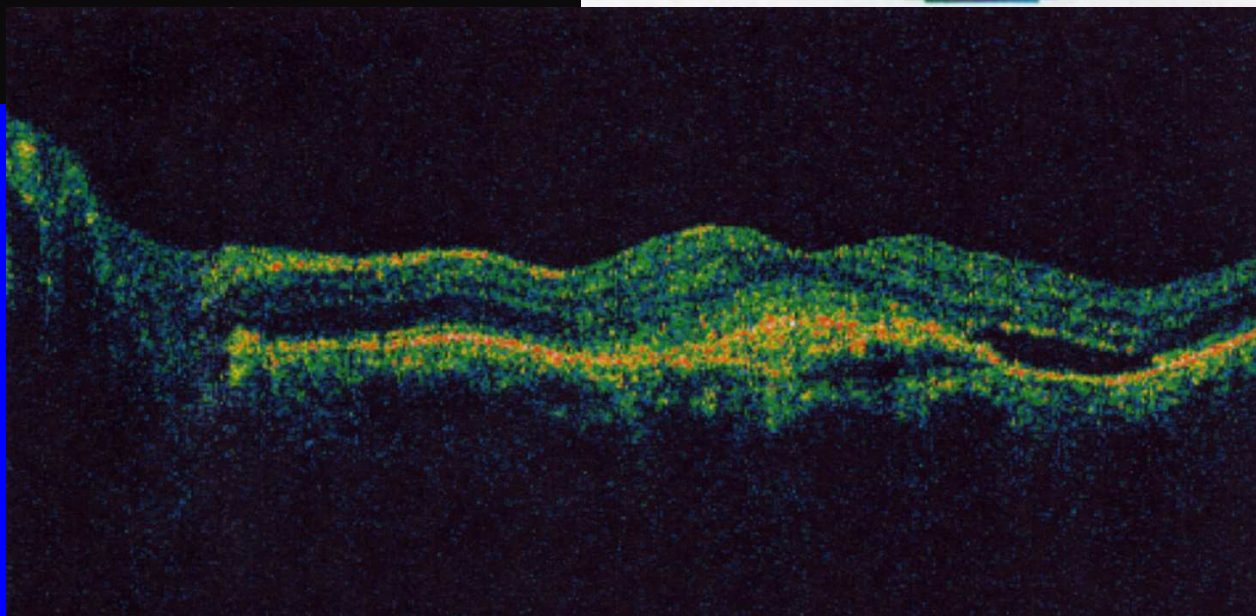




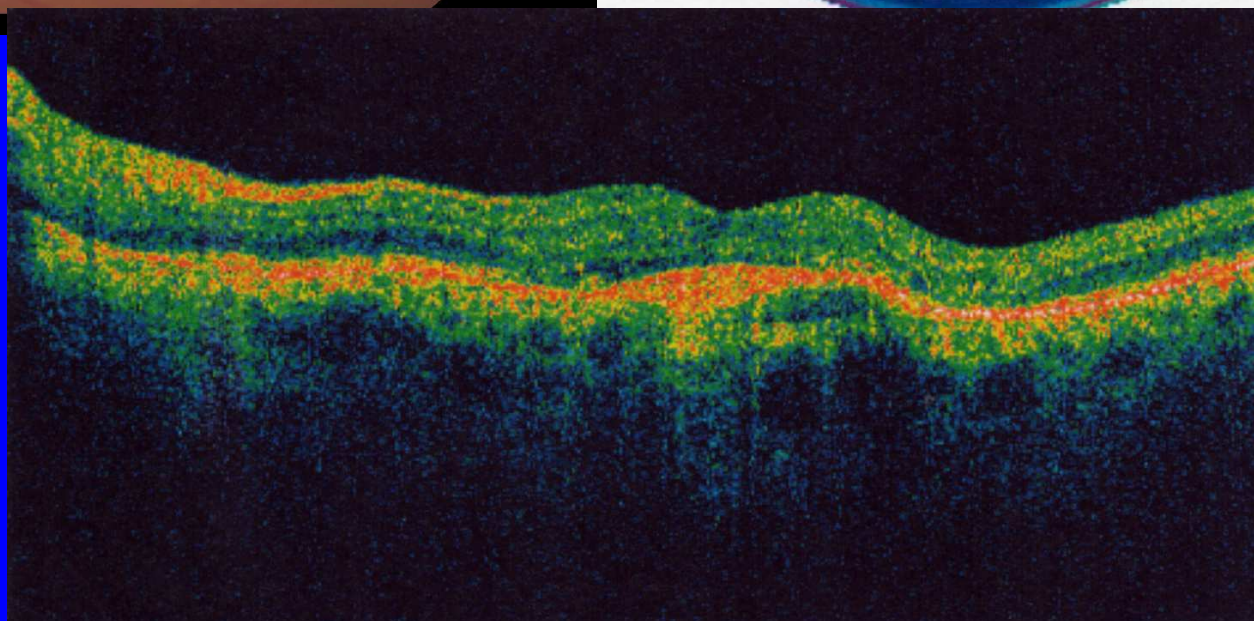
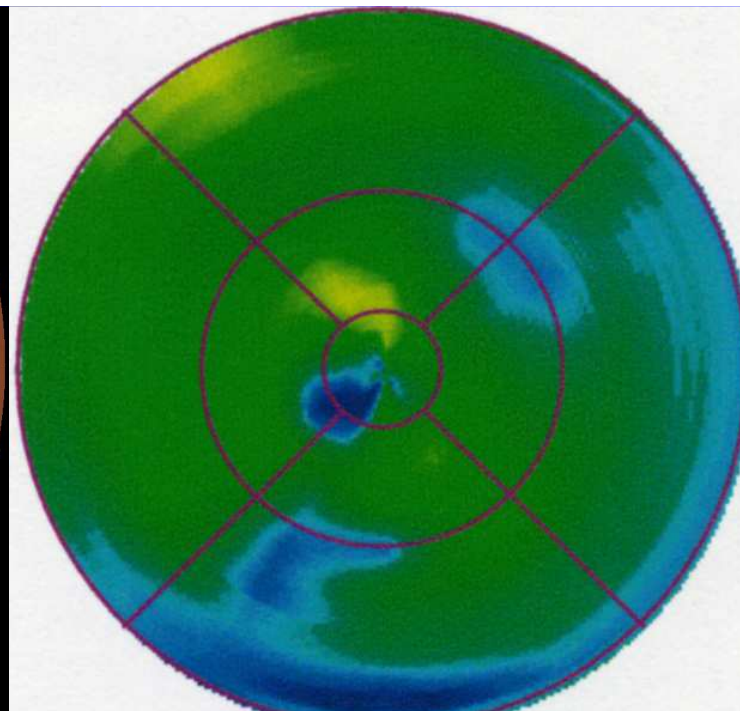
30/07/2007



Couleur (comp.



10/12/2007

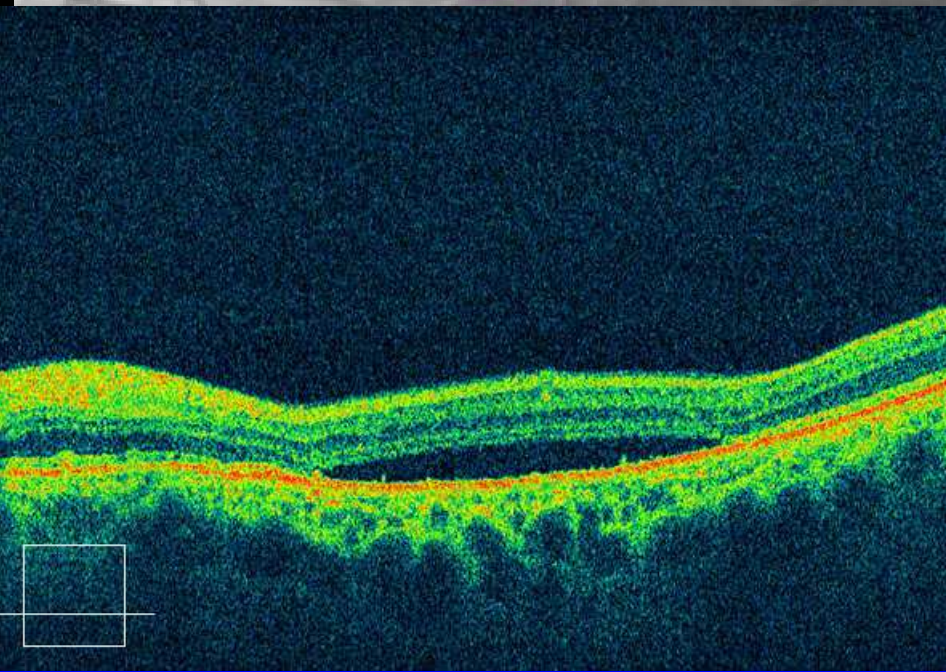
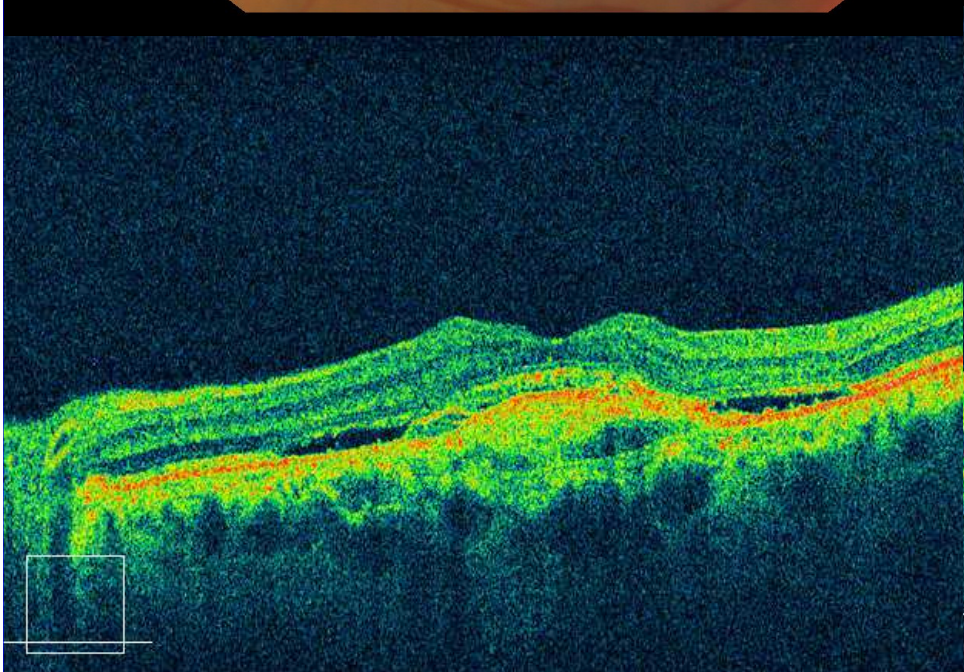
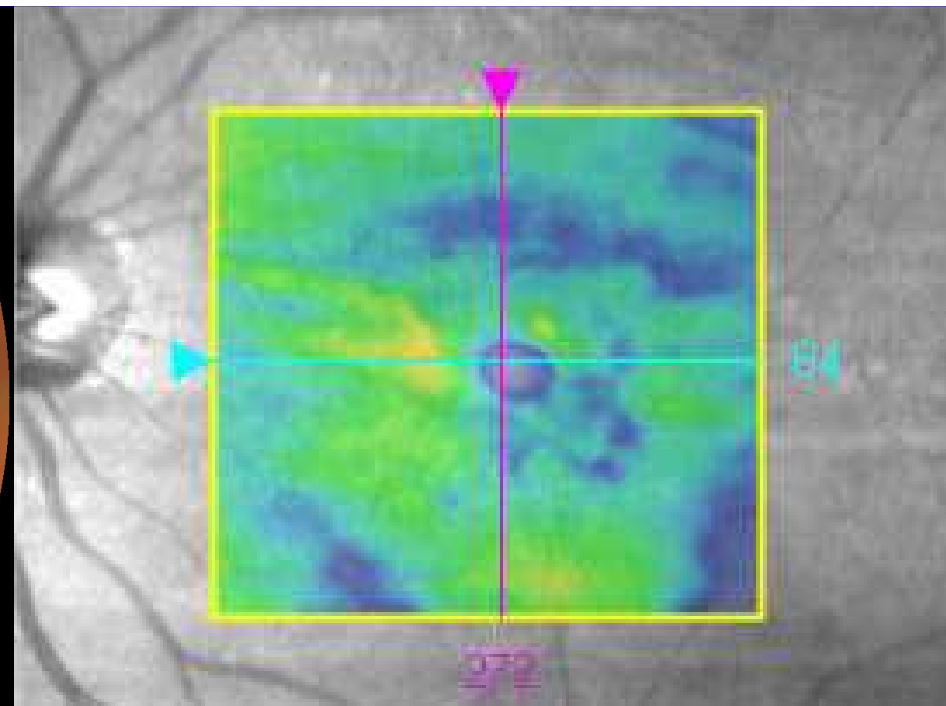


22/04/2008



Couleur (comp.

09/09/2009



Evolution cyclique

Tendance à la fibrose

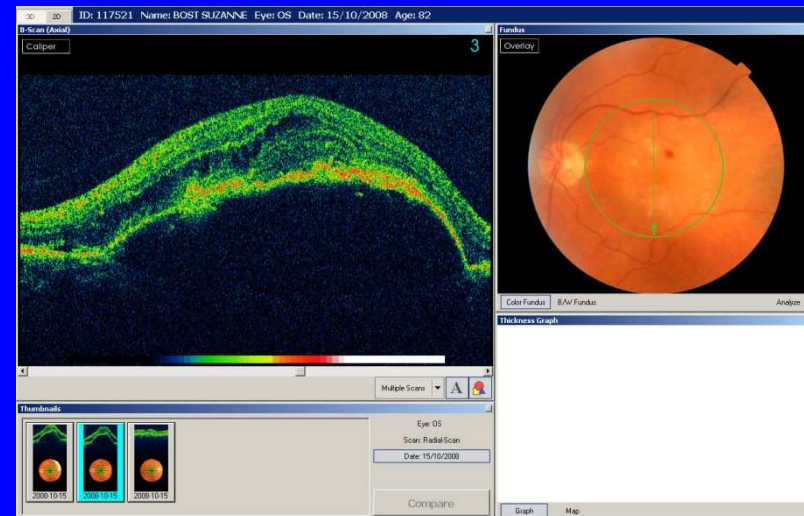
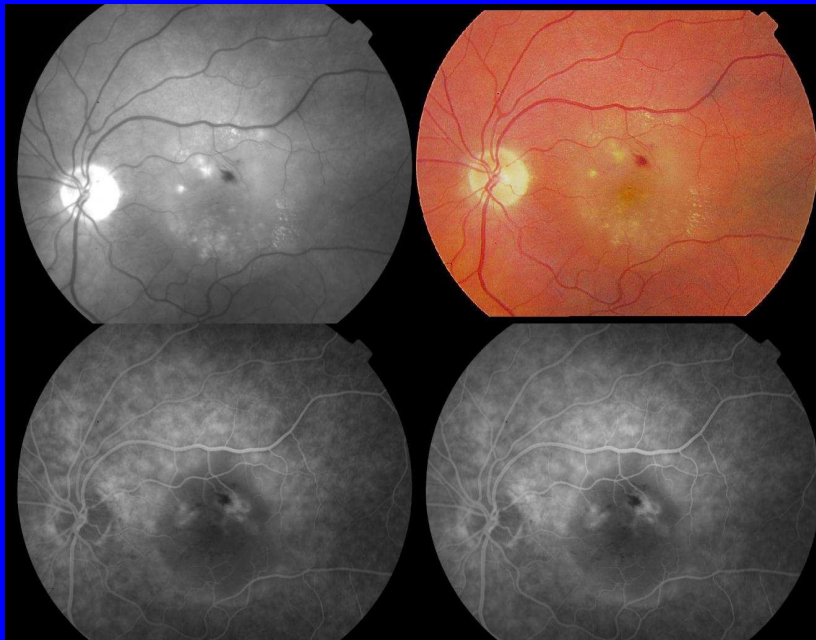
AV = 20/80 après 9 IVT

Continuer ?

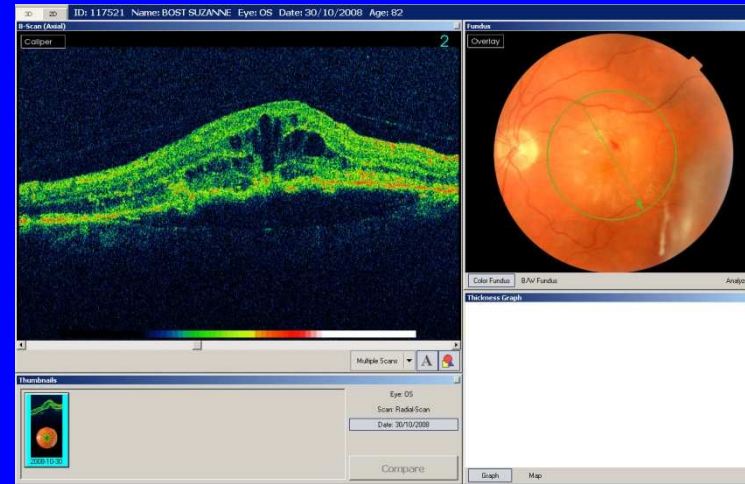
Peut-on faire mieux ?

Dr Sam Razavi (Tours)

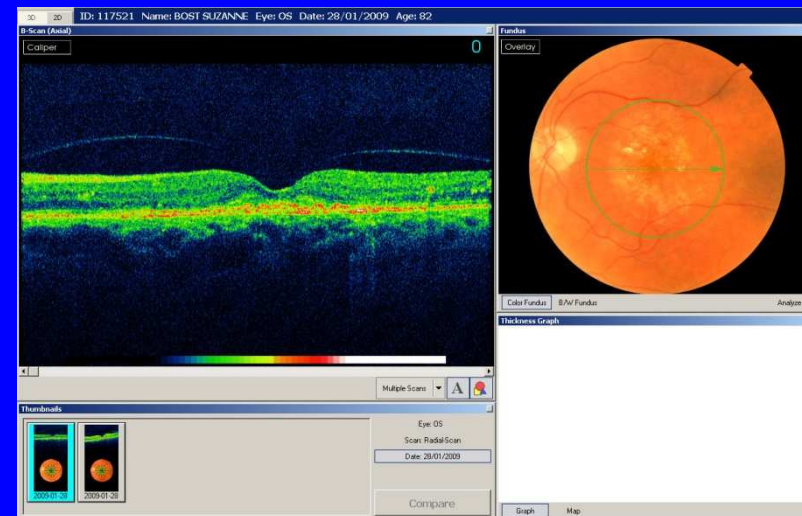
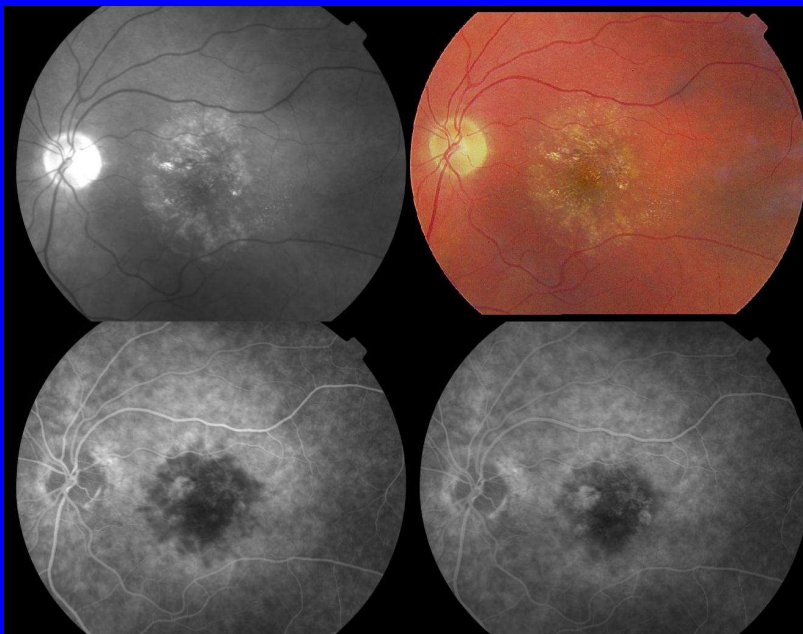
[illegible]



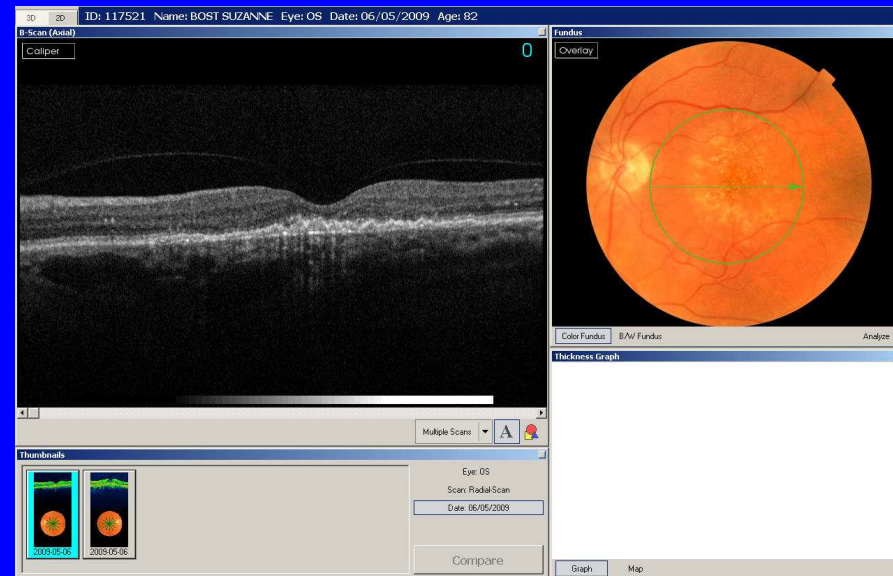
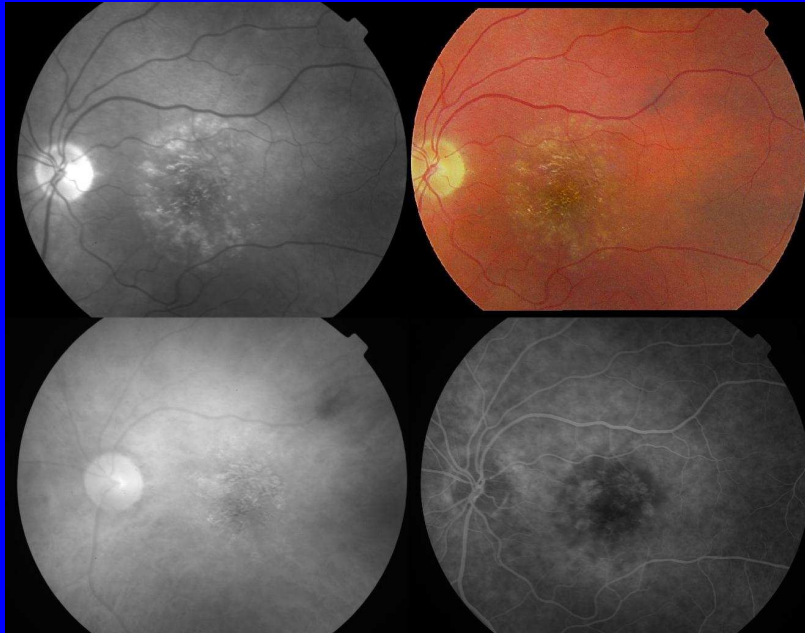
Persistence ACR après 4 IVT Lucentis



J10 POST Triam + Lucentis >>> PDT



M3 post ttt Triple



M6 post ttt Triple

21/02/2007



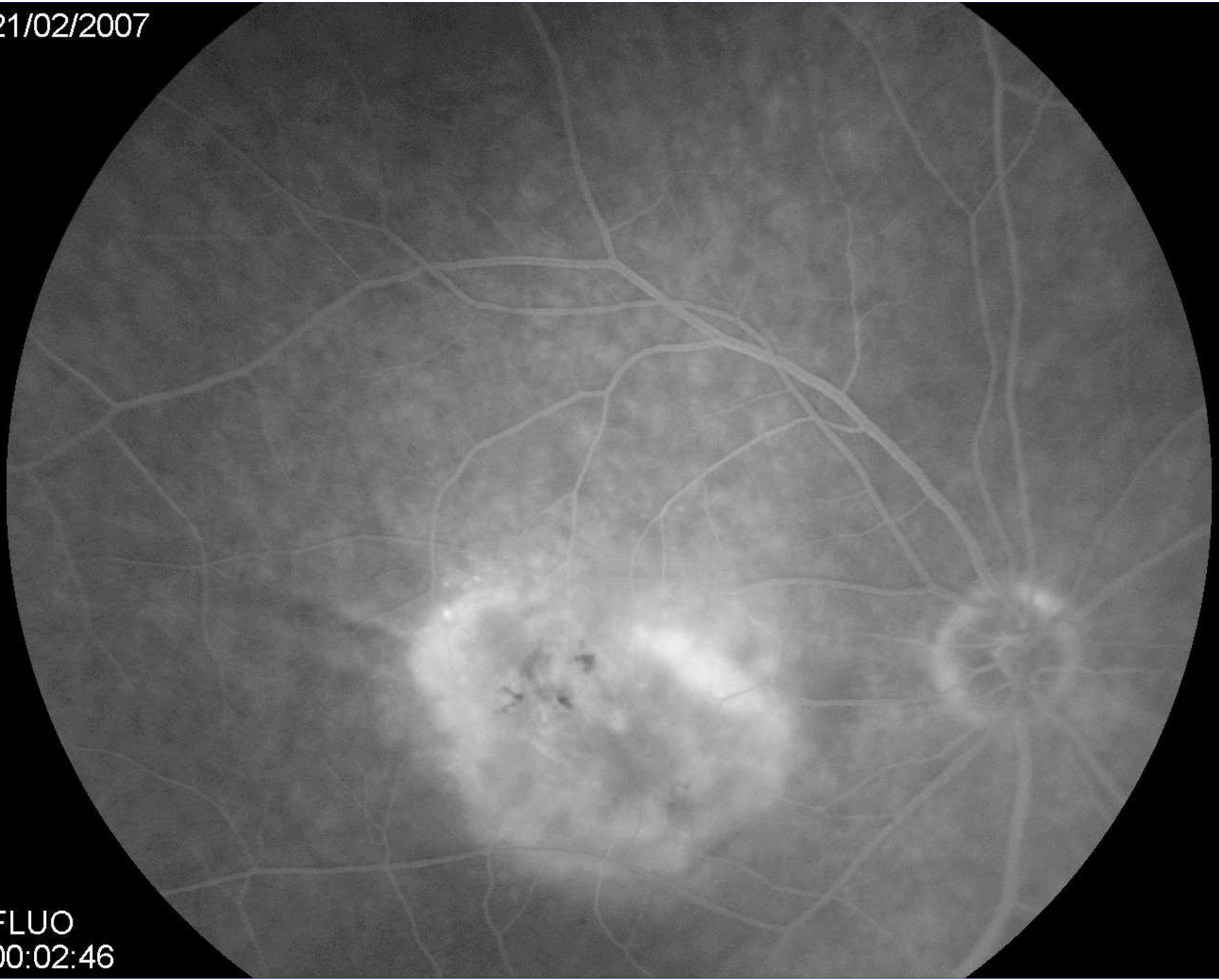
Couleur (comp.

21/02/2007

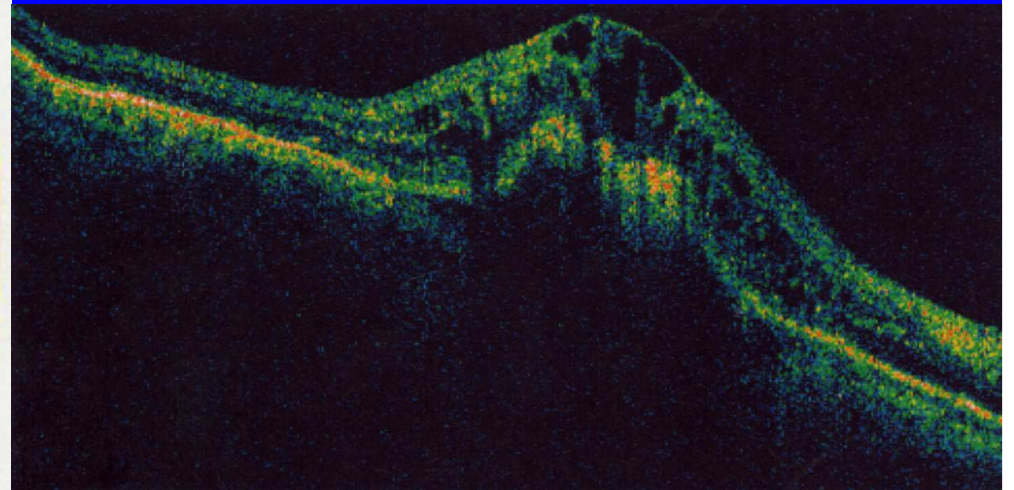
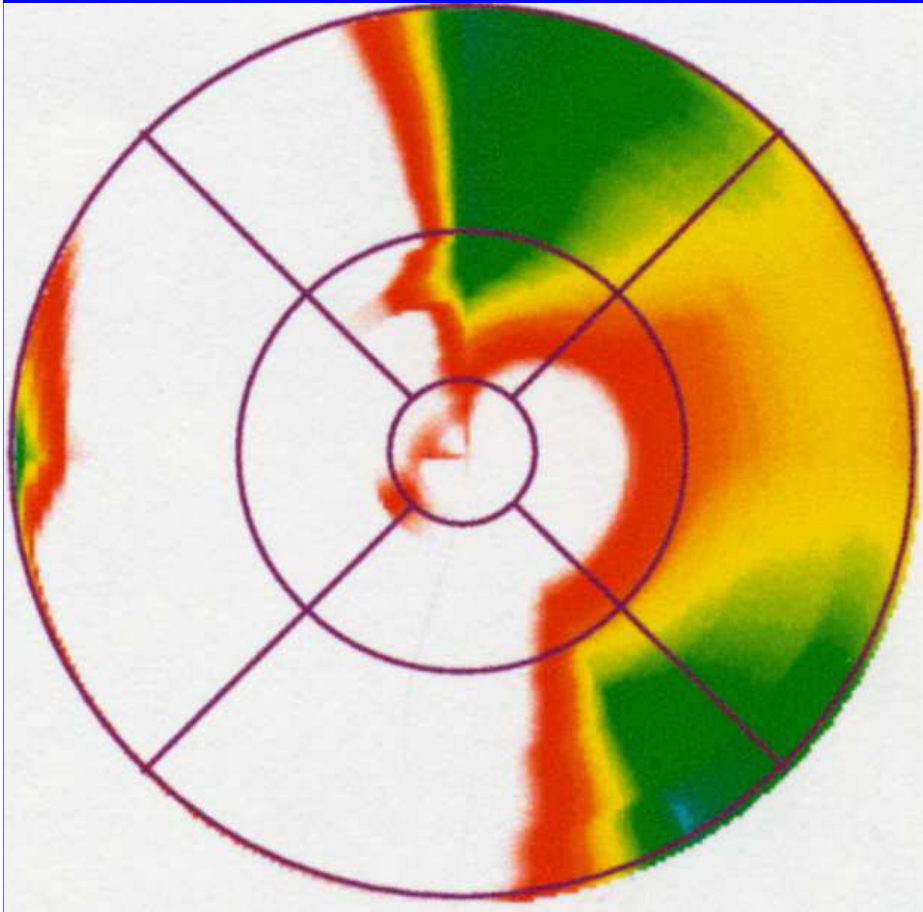


FLUO
00:00:24

21/02/2007



FLUO
00:02:46

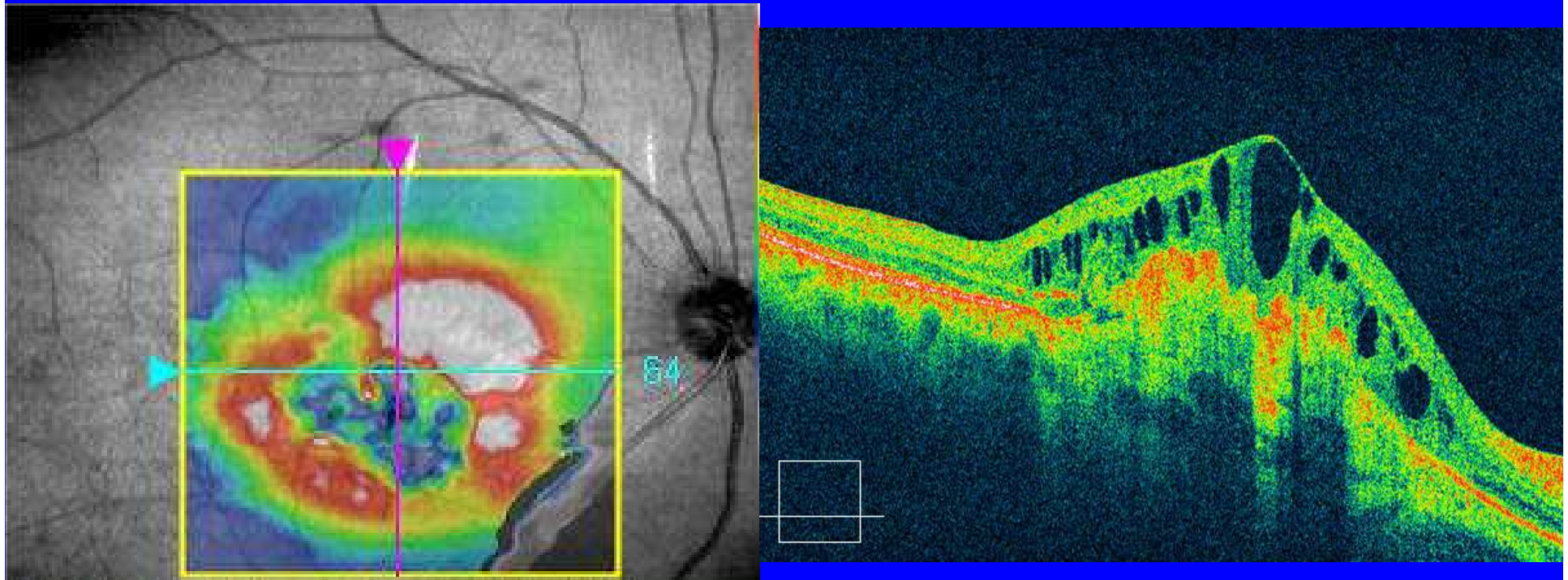


3 IVT, puis espacement progressif des contrôles et des IVT

10/09/2009

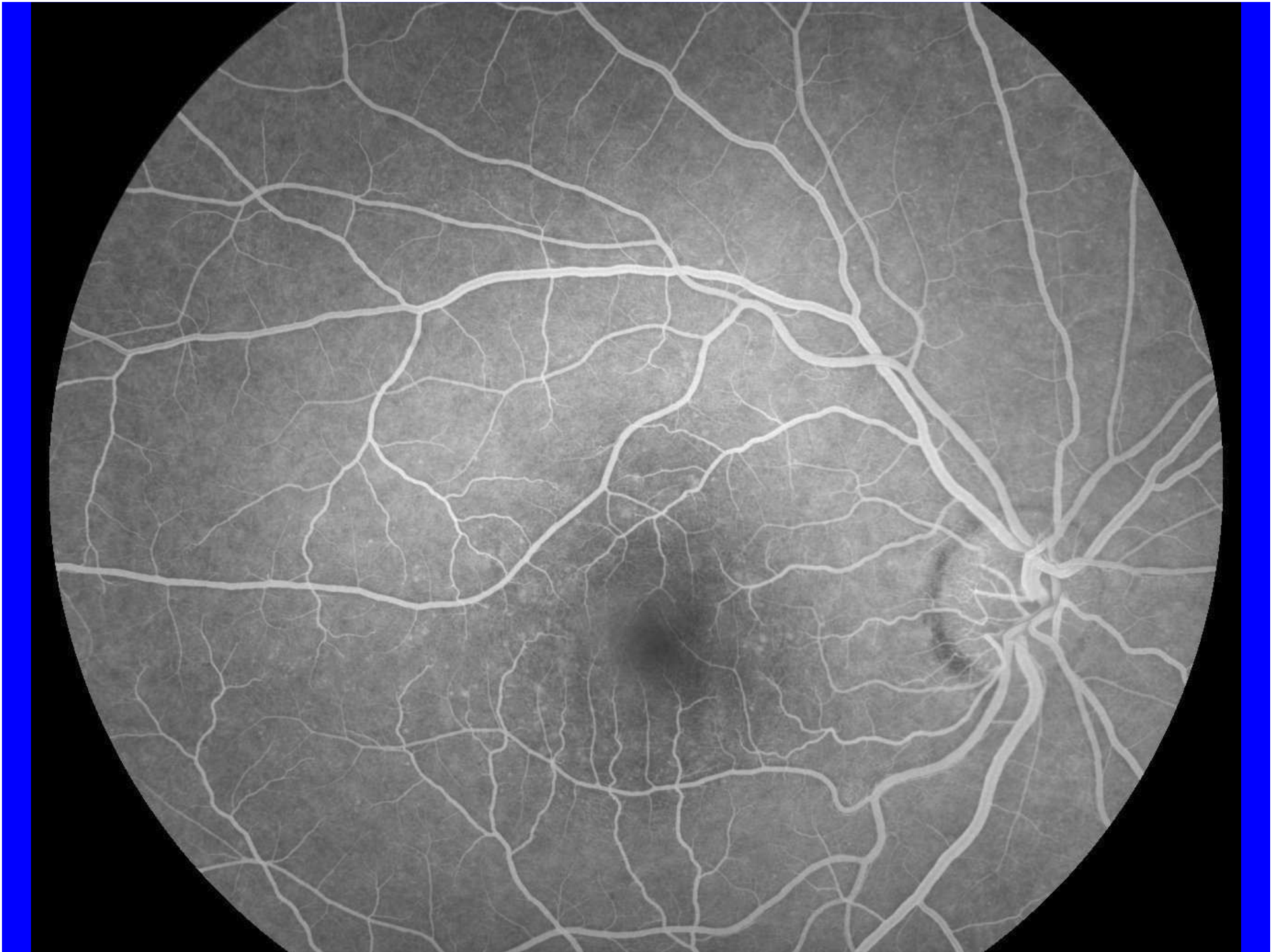


Couleur (comp.

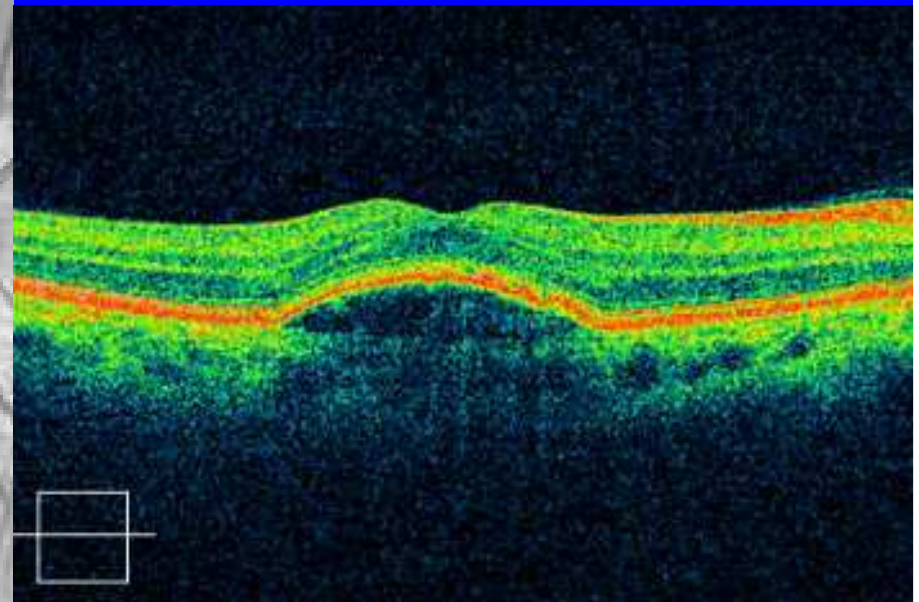
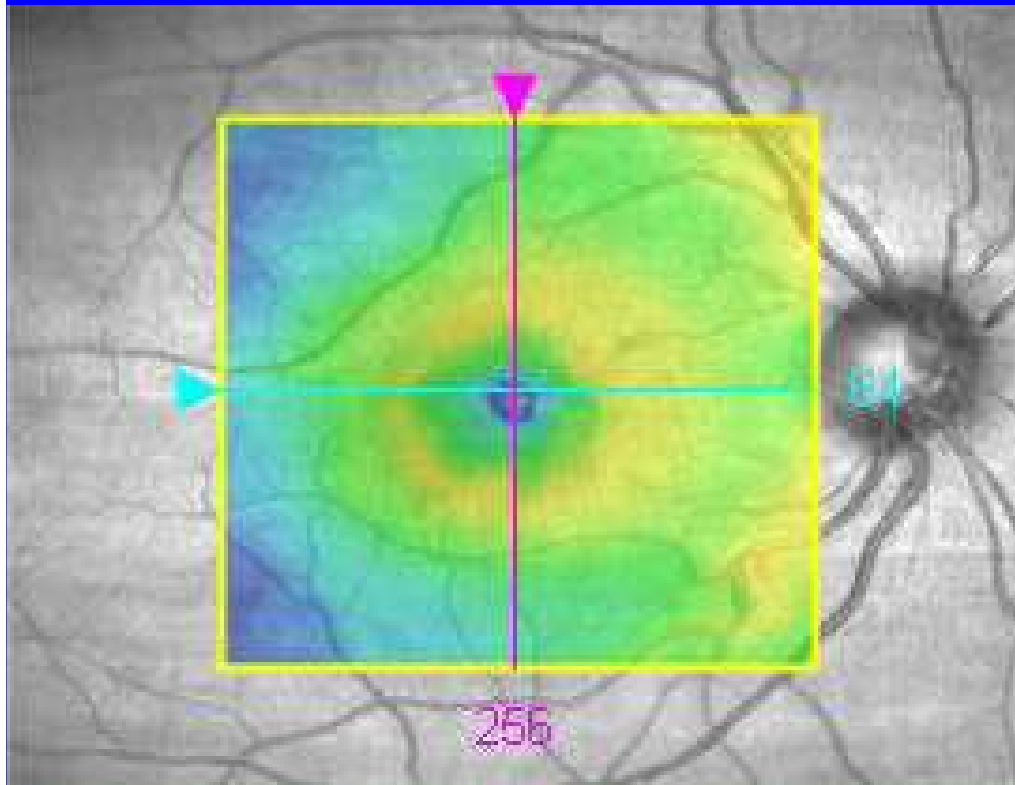


Acuité 20/100 meilleur œil, 12 IVT, 1 IVT tous les 3 mois
Retraitements systématiques / 3 mois ?



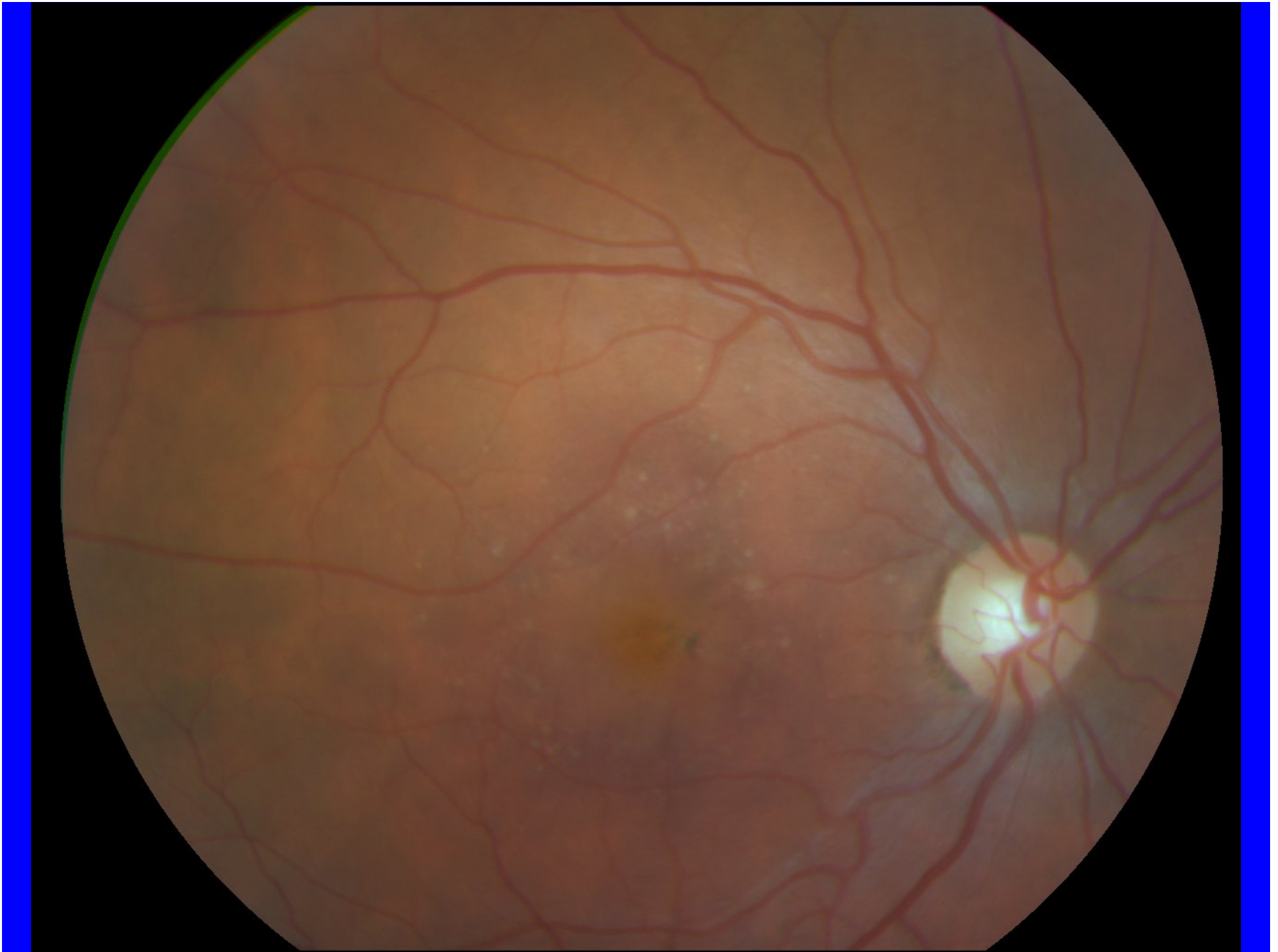




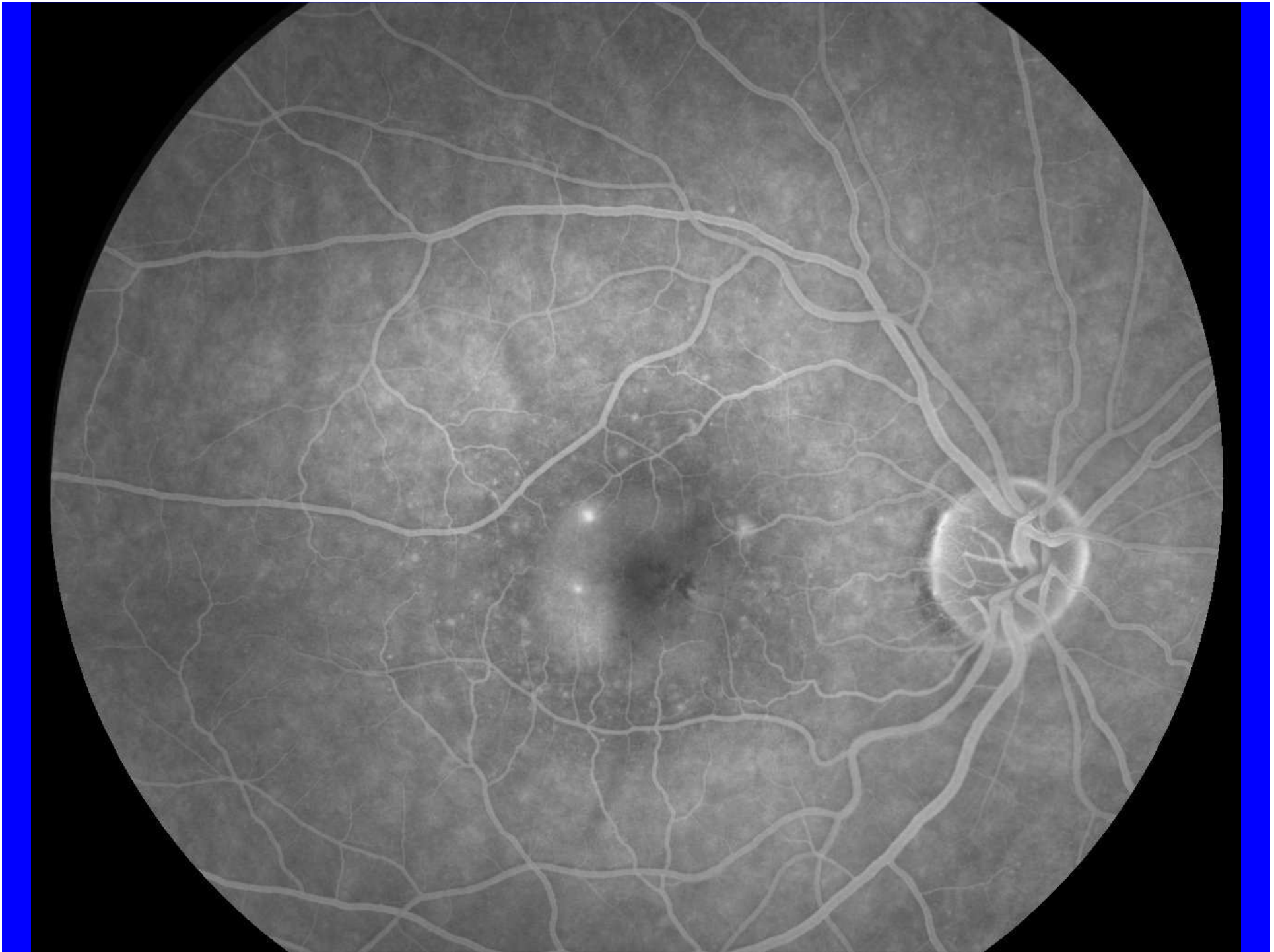


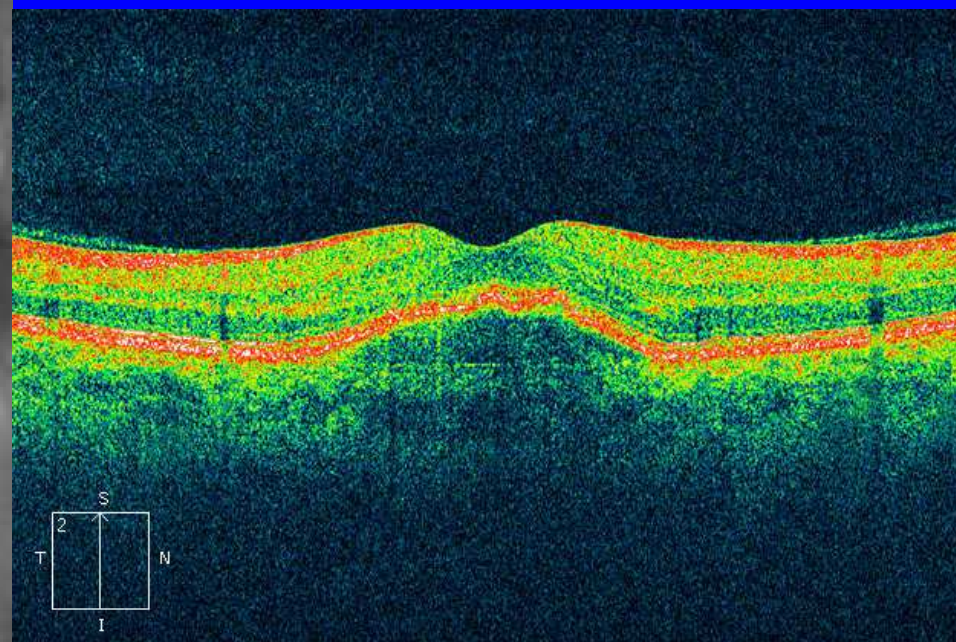
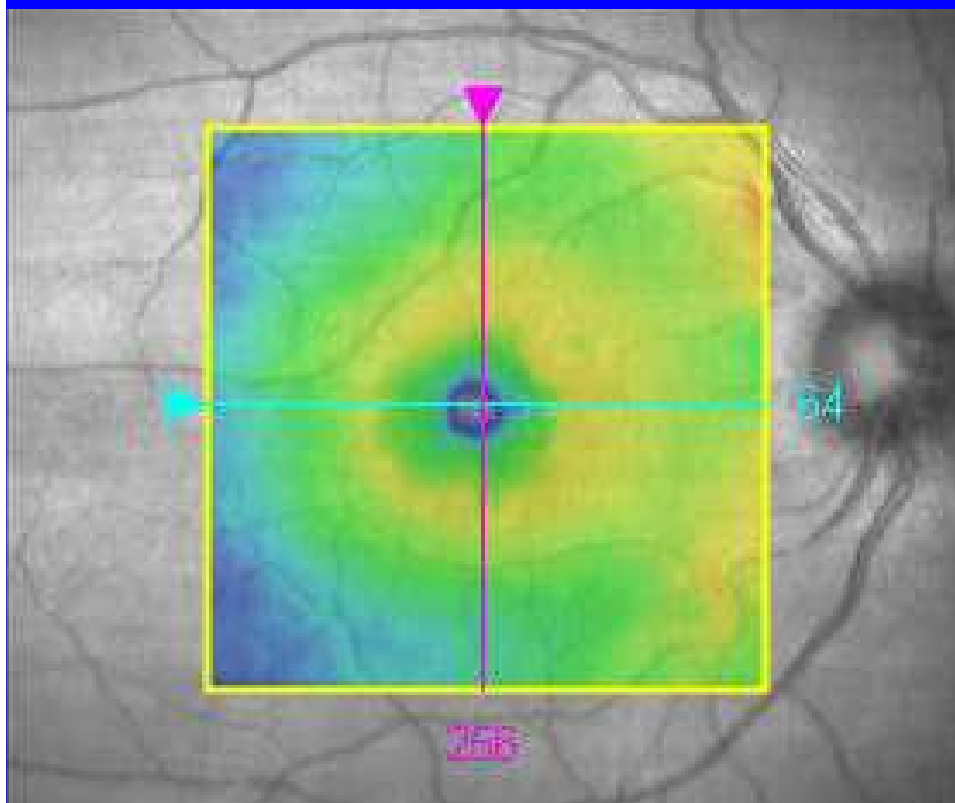
Gêne modérée, AV = 20/20 (85 lettres)

Décision de surveillance









Petite modification fonctionnelle: 20/20 (82 lettres)

Angio: NVO, Pas d'exsudation significative à l'OCT