



## Intravitreal Anti-VEGF Injection Treatment

This information sheet is written for patients who might undergo treatment with anti-angiogenic (anti-VEGF) drugs. This treatment involves having an injection into your eye to treat certain retinal conditions that cause abnormal blood vessels to grow and leak under the retina.

Patients with these conditions can lose vision when abnormal blood vessels bleed or leak fluid under the retina at the back of the eye. A series of injections of anti-VEGF medicines are given into the back of your eye to stop these blood vessels growing and help control the leakage. This treatment is highly effective in preserving vision and slowing down progression of disease process in many people.

### In which common conditions it is used as treatment?

- Wet age-related macular degeneration
- Myopic choroidal neovascularization
- Diabetic macular oedema
- Retinal vein occlusion
- Any other retinal conditions that cause fluid to leak under the retina

### How does an injection of these antiVEGF medicines prevent visual loss?

Anti-VEGF medicines stop the abnormal blood vessels growing and stop them from leaking and bleeding under the retina. This prevents or limits damage to the retinal light receptors and loss of central vision. These medicines are effective in preventing and slowing down progressive vision loss in up to 90% of treated eyes.

### Is anti-VEGF treatment right for you?

Your ophthalmologist will advise if the treatment is appropriate for you and which anti-VEGF will be used. Only patients with active leaking of blood and fluid can benefit from it. The treatment that's right for you will depend on the specific condition of your retina (macula), your vision and whether there is scarring at the macula. We perform scans and photographs of the eye which show us the different layers of the retina. These scans can show us if there is blood or fluid present within the retinal layers and help decide on treatment.

### How is the treatment given?

The drug is injected into your eye with a fine needle. Minimal discomfort is to be expected (equivalent to having blood taken from your arm). The procedure takes five to seven minutes, but the injection itself is over in less than 20 seconds. The

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injection is given with you lying down comfortably on the couch. Local anaesthetic drops are applied to numb your eye and minimise discomfort. Your eyelids and surface of the eye are cleaned to prevent infection.

Your face and the area around your eye will be covered by a small surgical sheet (a drape) to keep the area sterile.

A small clip (speculum) will be used to keep the eye open. The injection site is marked with callipers and your eye is stabilised with forceps or a cotton bud. A few seconds later, the injection is given. The injecting clinician might use antibiotic drops after your injection to prevent infection. Your vision is assessed post injection by checking you can see hand movements or can count fingers.

### Who will give the injection?

These injections will be given either by an ophthalmologist, registered nurse or a trained practitioner.

### What happens after the treatment?

The injecting clinician might use antibiotic drops after your injection as necessary to prevent infection, but you do not require any antibiotic drops to take home. You may be offered lubricant drops to take home. These will provide some comfort after the injection, and you may use this as often as necessary. You might have to wait to have your pressure checked. Your next appointment will be sent to you by post.

Also, your GP is sent a letter after every visit. Many patients require multiple injections at regular intervals of minimum four weeks. Patients will need to be reviewed at regular intervals in clinic or virtually by assessing the vision and images recorded at each visit. Further treatment might be given to maintain the benefits of therapy.

### Who should not be treated with antiVEGF?

**You should not be given anti-VEGF if you have any of the following conditions:**

- Allergy to anti-VEGF or any of its ingredients
- If you have an infection in or around either eye or severe infection anywhere in your body
- If you are trying to become pregnant, are already pregnant, or are breastfeeding

**Anti-VEGF should be used with caution in patients with the following conditions:**

- If you have had a heart attack or stroke in the last three months

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- If you have uncontrolled angina or uncontrolled high blood pressure, Please inform the doctor if there are any changes in your medical condition.

### **Pregnancy and breast-feeding**

If you are pregnant or planning to become pregnant, please discuss this with your doctor before your intravitreal injection treatment. Anti-VEGF medicines should not be used during pregnancy. Women of child-bearing potential should use effective contraception during their treatment and for at least three months after the last intravitreal injection. If you do become pregnant whilst undergoing intravitreal injections, please inform your doctor immediately. Anti-VEGF medicines are not recommended during breast-feeding because it is not known whether the medicine passes into human milk. Ask your doctor for advice before treatment.

### **What are the risks with these injections?**

As with any medical procedure, there is a small risk of complications following antiVEGF treatment. Most complications that might occur are from the injection itself, rather than the drug. For most patients, the benefit of the treatment outweighs the small risk of injection injury. For a list of rare and common side effects of the drugs, please see the individual drug patient information leaflets.

Serious or frequently occurring risks related to the procedure or medication given:

Less than 10% Likelihood

Conjunctival haemorrhage

Pain

Irregularity or swelling of conjunctiva

Visual disturbances (floaters)

1 in 400 risk of inflammation inside the eye (Uveitis)

1 in 200 risk of loss of sight due to retinal vascular inflammation.

### **Less than 3%**

Cataract formation

Eyelid oedema

Allergy related symptoms

Corneal Abrasion

### **Less than 1%**

Loss of vision due to serious infection (1 in 4500)

Retinal Detachment

Blood in anterior chamber

Corneal Oedema

Blood clots (such as those causing heart attack or stroke)

High intra-ocular pressure.

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### **Any extra procedures that may become necessary:**

Release of intraocular fluid by corneal incision

The patient agrees that information including photography, angiography and OCT may be used for teaching purposes and then later publication

This procedure will involve

Local anaesthesia

### **Can other medicines or food affect anti-VEGF treatments?**

Tell your eye doctor about all the medicines you take, whether prescription or non-prescription medicines, including blood pressure medication, warfarin, aspirin, and vitamins. Also inform the doctor if any medication has changed since your last visit.

### **Other information**

You might notice some discomfort and redness for the first few days after your treatment. If your eye becomes progressively red, sensitive to light, swollen and painful, or your vision gets worse after the anti-VEGF treatment, you must seek medical help from an ophthalmologist. This might indicate infection and normally occurs within the first week after the injection, but the risk is minimal. There are no special precautions following intravitreal injections and you can travel but please avoid getting water into your eye or swimming for the first few days.

### **What should I do if I am worried after receiving my treatment?**

**Clinic Contact Numbers:**

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#### **Appointments:**

#### **Nurses answer phone:**

**Heartlands      0121 424 0545**

**Solihull        0121 424 4463**

**Good Hope     0121 424 9651**

**0121 424 1536**

**0121 424 4456**

**0121 424 9533**

### **Resources:**

Information booklets are available for treatment of Wet age-related macular degeneration, Myopic choroidal neovascularization, Diabetic macular oedema, Retinal vein occlusion. Ask your doctor to provide you with one for more information.

If you require this information in another format, such as a different language, large print, braille or audio version please ask a member of staff or email

[interpreting.service@uhb.nhs.uk](mailto:interpreting.service@uhb.nhs.uk)