

What will happen to me if I agree to be treated with Avastin®?

You will be asked to sign a consent form to say that you are happy to be treated with Avastin®.

Your doctor will tell you how often you need to come back to the clinic and how frequently you will need an injection. At each follow-up appointment your doctor will decide whether you need another injection.

If you start treatment in only one eye affected, but then develop wAMD in your other eye, your doctor will assess your second eye to determine if it can also be treated with Avastin®. If your second eye is suitable, you will start treatment with three monthly injections in that eye and then continue to be followed up as before.

Choosing Avastin® as your treatment will help the region's NHS save millions of pounds which we can use to improve other health services.



What are the possible risks of taking Avastin®?

Your doctor will tell you about the general risks of having injections to treat your wAMD and possible side effects of any tests you may have. The risk of side effects is small (about one in a hundred patients over a course of treatment) and, based on evidence currently available, there is no difference in the risk of side effects between Avastin® or any of the other drugs available.

What will happen if my vision becomes worse while treated with Avastin®?

Your vision will be assessed at each follow-up appointment. If your vision has deteriorated, your doctor will discuss alternative treatment options with you.

What will happen if I decide I no longer want to be treated with Avastin®?

If having started treatment with Avastin® you decide that you want to switch to one of the other two drugs, you are free to do so at any time.

Further information

You can obtain advice on macular degeneration and its treatment from the Macular Disease Society

Helpline: 0845 241 2041

email: help@maculardisease.org

website: www.maculardisease.org

If you have questions, please ask your Optometrist or GP. You can also ask your consultant questions when you see him or her in the clinic.

Treatment for Wet Age-Related Macular Degeneration





Why do I need to read and understand what is in this leaflet?

You have been diagnosed with wet age-related macular degeneration (“wAMD” for short) which affects your vision. In wAMD, abnormal blood vessels grow under the central retina, the part of the eye that sees detail. These blood vessels are fragile, leak fluid and bleed easily, quickly causing you to lose the ability to see detail. There are two drugs, anti-VEGFs (vascular endothelial growth factors) that are currently used in standard NHS treatment, called Eylea® and Lucentis®. These drugs are injected

into the eye and work by stopping the abnormal blood vessels from growing. With Lucentis® patients need to be followed up in the eye clinic every month to see if they need an injection. With Eylea®, injections will be given into your affected eye once a month, for three months and following this, injections will then be given once every two months for at least the first year. These treatments have been shown to prevent further severe sight loss in about 95 of every 100 patients who are treated. The NHS in the North East of England has decided to include another drug called Avastin® as a treatment option.

What is Avastin®?

Avastin® is widely used to treat wAMD instead of Lucentis® and Eylea® in the USA and several countries in Europe. This is because it is equally safe and effective and is considerably cheaper than the other two drugs. It is also commonly used in private practice in the UK.

Avastin® is licensed for the treatment of cancer but it does not currently have a marketing license for the treatment of wAMD. This is due to commercial reasons as the company that holds the patent for Lucentis® also owns the patent for Avastin®.

Large scale, international clinical trials have demonstrated Avastin® is safe and clinically effective to treat wAMD patients.

Several research studies have compared how well Avastin® and Lucentis® work for wAMD. All these studies have concluded that the two drugs “had equivalent effects on visual acuity” when used in the same way. Side effects were also similar.

The Cochrane Collaboration is a well-respected international organisation whose aim is to help patients make well-informed decisions by preparing and maintaining high quality scientific reviews of research. It has undertaken a review of all the research studies and concluded that Avastin® and Lucentis® are equally safe.

Why is Avastin® being offered as a treatment option now?

NHS doctors and managers in the North East have agreed that because Avastin® is as effective and as safe as other drugs that are licensed for treating wAMD, then Avastin® should be available as a treatment option.

The result is the NHS in the North East of England could save up to £13.5 million a year within the next 5 years. This could be used to treat more patients with wAMD or could potentially fund for example an extra 270 nurses or 266 heart transplants.

Although Avastin does not have a marketing authorisation, sometimes known as a license, for the treatment of wAMD, this only affects how the drug is marketed and sold, not how it can be used by clinicians.

Do I have to accept Avastin® as the treatment for wet AMD?

As a patient, you can discuss your options with your doctor and decide which treatment is right for you. You can decide that you would prefer to be treated with one of the licensed drugs. It will make no difference to your care. If you decide to accept Avastin® as your treatment, then you will receive the same care as any other patient. If your doctor decides that Avastin® is not the right treatment for you, then you will be switched to one of the other drugs available.

