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Discussion and debate:

Use of topical antibiotics with intravitreal injections

Professor Anat Loewenstein

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Session aims

- To debate and discuss evidence 'for' and 'against' the use of topical antibiotics with IVT injections
- To provide a summary of the Vision Academy's Viewpoint on the use of topical antibiotics with intravitreal injections
 - The Viewpoint can be found in your symposium pack

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Debate:

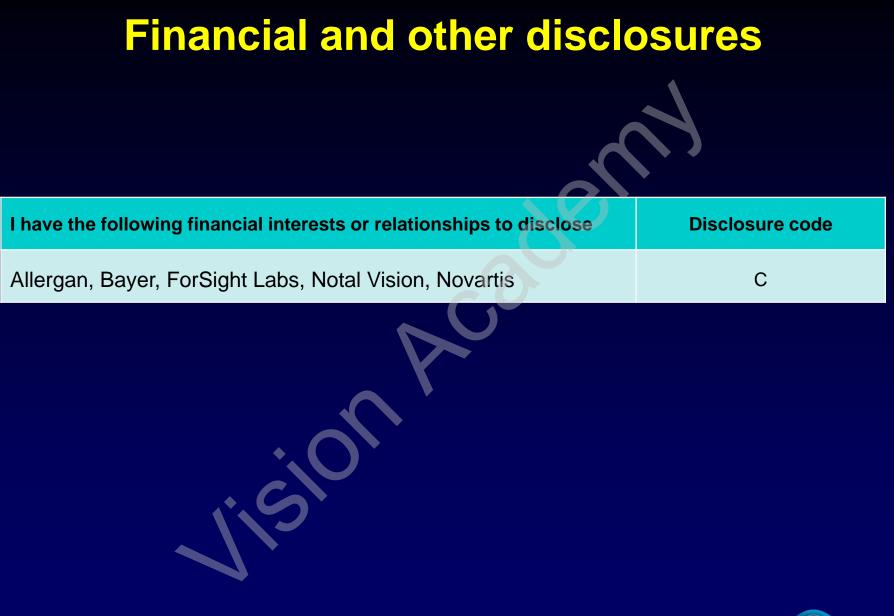
Is there a case <u>FOR</u> topical antibiotics with intravitreal injections?



Professor Anat Loewenstein

Tel Aviv Sourasky Medical Center, Israel

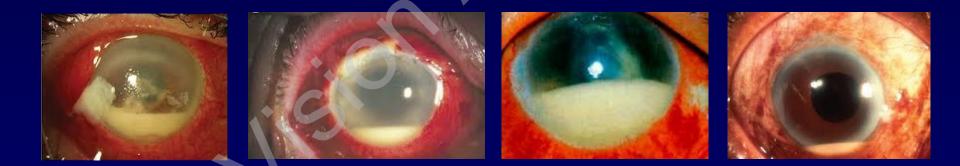






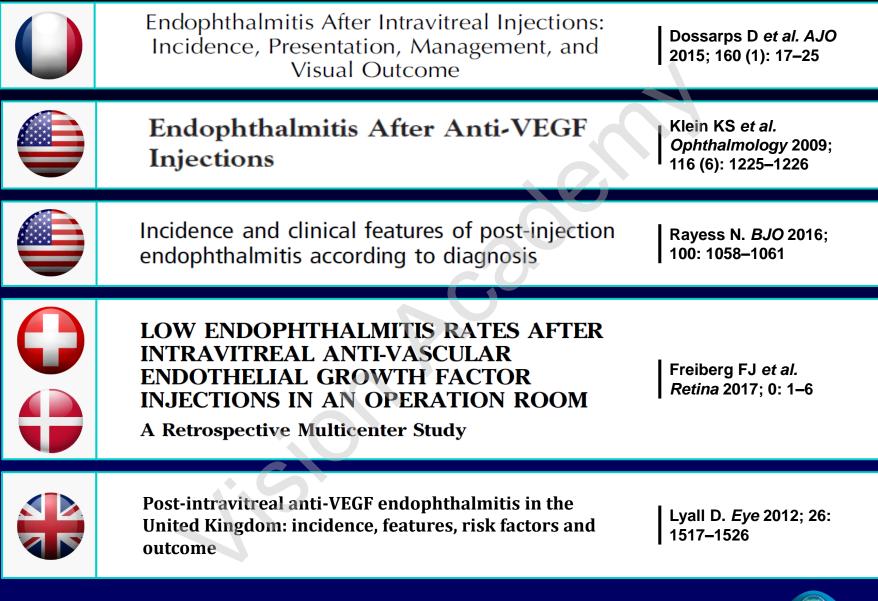
Risk of endophthalmitis with IVT injections

- Endophthalmitis is an uncommon, potentially devastating complication of IVT injection¹
 - Occurrence of endophthalmitis ranges from 1 in 1000 to 1 in 5000 injections²
 - Despite appropriate and prompt therapy, visual outcomes are often poor³
- Risk reduction strategies for the prevention of endophthalmitis are particularly important for improving overall patient outcomes³





IVT, intravitreal. 1. Sachdeva MM *et al. J Ophthalmic Inflamm Infect* 2016; 6 (1): 2. 2. Sigford DK *et al. Clin Ophthalmol* 2015; 9: 773–781. 3. Schwartz SG *et al. Curr Pharm Des* 2015; 21 (32): 4703–4706.





Precautions for endophthalmitis prevention



General consensus on:

- Meticulous preparation
 - Avoidance of needle contact with eyelashes
 - Eyelid speculum
 - Drapes
- Careful attention paid to aseptic technique
- Povidone-iodine use
 - On ocular surface, in conjunctival cul-de-sac

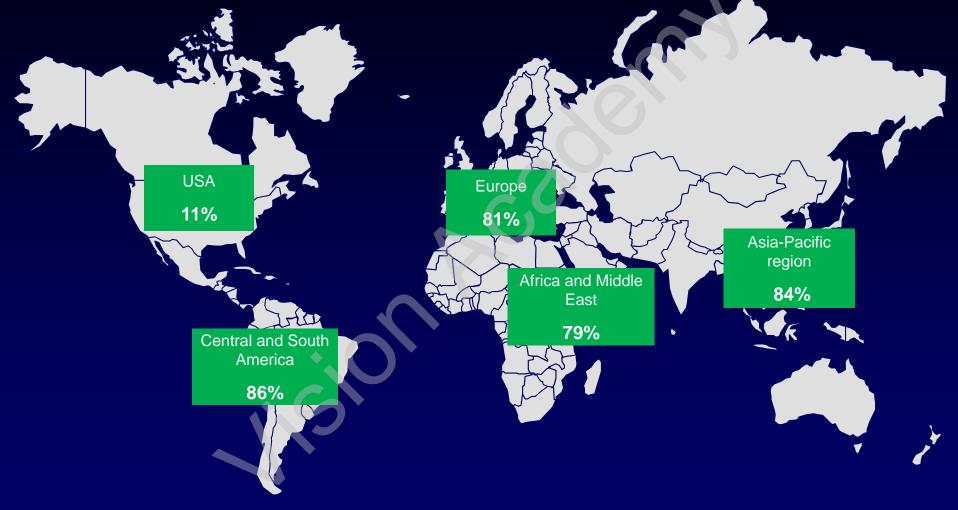
Lack of consensus on:

- Use of sterile gloves
- Movement of conjunctiva over injection site
- Use of pre- or post-injection antibiotics



2014 ASRS PAT survey:

Percentage of physicians using topical antibiotics with IVT injections*





*Total percentage of physicians who prescribe topical antibiotics only in selected patients, or at any stage of the intravitreal injection process. ASRS, American Society of Retina Specialists; IVT, intravitreal; PAT, Preferences and Trends. Rezaei KA *et al.* 2014 Global Trends in Retina Survey. American Society of Retina Specialists; Chicago, IL, USA.

2015 ASRS PAT survey:

Percentage of physicians using topical antibiotics with IVT injections*

Rest of the world **59.8%**



*Total percentage of physicians who prescribe topical antibiotics only in selected patients, or at any stage of the intravitreal injection process. ASRS, American Society of Retina Specialists; IVT, intravitreal; PAT, Preferences and Trends. Stone TW *et al.* 2015 Preferences and Trends Membership Survey. American Society of Retina Specialists; Chicago, IL, USA.

USA

9%

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Regional considerations

Possible reasons for regional variations

- Perceived as the standard of care in some regions
- Personal preference
- Medico-legal considerations
- Mandated by label in some regions (e.g., Japan)
- Resources and conditions vary between countries





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IVT injection technique and monitoring: Updated guidelines from an expert panel

- The dramatic increase in the number of IVT injections has been accompanied by a comparable increase in evidence surrounding IVT practice patterns and techniques
- An expert panel of ophthalmologists performed a review of the literature regarding IVT injections and concluded that:



IVT injection technique and monitoring: Updated guidelines from an expert panel

- The dramatic increase in the number of IVT injections has been accompanied by a comparable increase in evidence surrounding IVT practice patterns and techniques
- An expert panel of ophthalmologists performed a review of the literature regarding IVT injections and concluded that:
 - There was a lack of evidence to support the routine use of pre-, peri-, and post-injection antibiotics to reduce the risk of endophthalmitis
 - There was a lack of evidence to support the role of aerosolized droplets containing oral contaminants from the patient and/or providers as a potential source of infection
- The panel emphasized the continued importance of applying povidone-iodine and avoiding eyelid contact with the intended injection site and needle



IVT injection technique and monitoring: Updated guidelines from an expert panel

The dramatic increase in the number of IVT injections has been accompanied by a comparable increase in evidence surrounding

Antibiotic Use

There is insufficient evidence to support the routine use of pre-, peri- or postinjection on antibiotics to reduce the rate of endophthalmitis. of the

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Is there a case for using topical antibiotics with IVT injections?

Study	Injections	Retinal diseases treated	Endophthalmitis rate with topical antibiotics	Endophthalmitis rate without topical antibiotics	Statistical significance
Bhatt <i>et al.</i> 2011	4767	Multiple	0.22%	0.20%	Not significant
Bhavsar <i>et al.</i> 2012	8027	DME and PDR	0.13%	0.03%	Not significant
Bhavsar <i>et al.</i> 2015	18,839	Multiple	0.005%	Not applicable	Not applicable
Cheung et al. 2012	15,895	Multiple	0.061-0.084%	0.038%	Not significant
Falavarjani <i>et al.</i> 2013	5901	Multiple	0.10%	0%	Not significant
Falavarjani <i>et al.</i> 2015	8037	Multiple	0.01%	0%	Not significant
Meredith <i>et al.</i> 2015	18,509	Neovascular AMD	0.04–0.08%	0.15%	Not significant
Park <i>et al.</i> 2013	17,332	Multiple	0%	0.035%	Not significant
Porteous <i>et al.</i> 2014	6957	Not specified	Not applicable	0.04%	Not significant
Ramel <i>et al.</i> 2014	11,450	Not specified	0.03%	0.23%	p=0.024
Storey <i>et al.</i> 2014	117,171	Multiple	0.049%	0.032%	Not significant

AMD, age-related macular degeneration; DME, diabetic macular edema; IVT, intravitreal; PDR, proliferative diabetic retinopathy. Schwartz SG *et al. Curr Pharm Des* 2015; 21 (32): 4703–4706.



Summary

- A meta-analysis and consensus paper did not find any harm in prescribing antibiotics, and in some analyses, a lower risk for endophthalmitis was demonstrated
- On a large-scale basis, and in various societies with diverse sanitary conditions, the need for antibiotics may vary and should still be considered



Debate:

Topical antibiotics <u>SHOULD NOT</u> be used alongside intravitreal injections



Rajavithi Hospital, Thailand



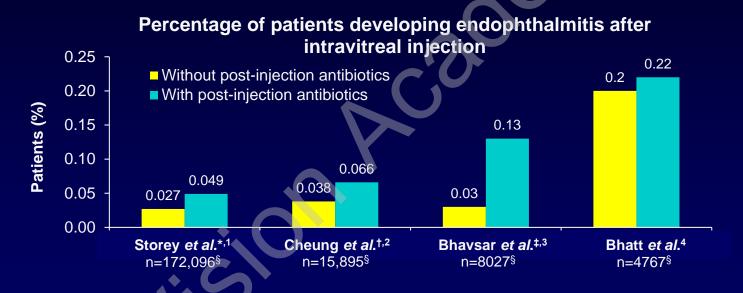






Post-injection antibiotics have no effect on the rate of endophthalmitis

Large studies have shown that the use of post-injection antibiotics does not reduce the incidence of endophthalmitis^{1–4}



A similar outcome was also reported in one of the largest (316,576 injections) retrospective, nationwide studies conducted in France⁵

*For the Post-Injection Endophthalmitis Study Team. †8259 patients were given antibiotics for 5 days after injection; 2370 patients received antibiotics immediately after injection. ‡For the Diabetic Retinopathy Clinical Research Network. §Injections.

1. Storey P et al. Graefes Arch Clin Exp Ophthalmol 2016; 254 (2): 235–242. 2. Cheung CS et al. Ophthalmology 2012; 119 (8): 1609–1614.

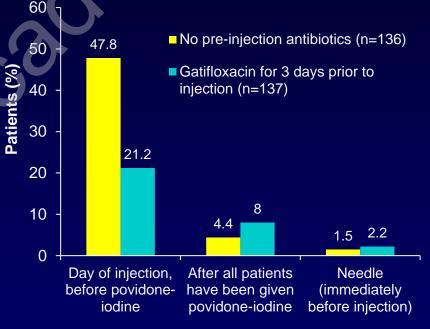
- 3. Bhavsar AR et al. Arch Ophthalmol 2012; 130 (6): 809–810. 4. Bhatt SS et al. Retina 2011; 31 (10): 2032–2036.
- 5. Dossarps D et al. Am J Ophthalmol 2015; 160 (1): 17–25.e1.



Pre-injection antibiotics are not associated with lower bacterial loads at the injection site*

- The use of topical antibiotics (combined with povidone-iodine) before cataract surgery has been shown to result in reduced bacterial colony counts¹
- This benefit does not appear to translate to the use of topical antibiotics administered before an IVT injection
- There is no additional benefit of pre-injection antibiotic use when combined with povidone-iodine
 - Povidone-iodine reduces the number of bacterial colonies by 91%³
 - Povidone-iodine lowers the risk of endophthalmitis to 0.06% (vs. 0.24%)⁴

Percentage of patients with conjunctival culture positivity with and without pre-injection antibiotics²



Culture collection time point



*When given in addition to povidone-iodine.

IVT, intravitreal.

1. Isenberg SJ et al. Arch Ophthalmol 1985; 103 (9): 1340–1342. 2. Moss JM et al. Ophthalmology 2009; 116 (8): 1498–1501. 3.

Apt L et al. Arch Ophthalmol 1984; 102 (5): 728–729. 4. Speaker MG et al. Ophthalmology 1991; 98 (12): 1769–1775.

Pooled incidence of endophthalmitis

Review

POOLED ESTIMATES OF INCIDENCE OF ENDOPHTHALMITIS AFTER INTRAVITREAL INJECTION OF ANTI-VASCULAR ENDOTHELIAL GROWTH FACTOR AGENTS WITH AND WITHOUT TOPICAL ANTIBIOTIC PROPHYLAXIS

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Purpose: To assess the effect of topical antibiotic prophylaxis on postoperative endophthalmitis after intravitreal injection of anti-vascular endothelial growth factor agents.

Methods: A systematic literature search was performed from inception to March 2016 using PubMed, Medline, Web of Science, Embase, and the Cochrane Library, to identify articles that reported cases of endophthalmitis after intravitreal injection of anti-vascular endothelial growth factor agents. We used a pooled analysis to estimate the incidence of cases of endophthalmitis who developed after injections performed with and without topical antibiotic prophylaxis. We used regression analysis to explore the effects of study characteristics on heterogeneity.

Results: From our search of electronic databases, we identified and screened 4,561 unique records. We judged 60 articles to have reported findings for cohorts of patients who met our inclusion criteria, (12 arms of randomized clinical trials, 11 prospective cohort studies, and 37 retrospective cohort studies), which included 244 cases of endophthalmitis and 639,391 intravitreal injections of anti–vascular endothelial growth factor agents. The final pooled estimate endophthalmitis proportions were 9/10,000 (95% confidence interval,



Pooled incidence of endophthalmitis

- The review paper by Reibaldi et al. identified and screened 4561 records; 60 articles met the inclusion criteria (12 arms of RCTs, 11 prospective cohorts, and 37 retrospective cohorts) and included 244 cases of endophthalmitis and 639,391 IVT injections of anti-VEGF
- > The final pooled estimate of endophthalmitis proportions were:
 - 9 / 10,000 (95% CI, 7 / 10,000–12 / 10,000) in the antibiotic-treated group
 - 3 / 10,000 (95% CI, 2 / 10,000–5 / 10,000) in the untreated group



Use of antibiotics can interfere with models of care

- For patients on a PRN regimen with monthly monitoring, a requirement for pre-injection antibiotics would mean that IVT injections could not take place during the monitoring visit¹
 - Increased burden of appointments for patients and clinics
- Post-injection antibiotics have been estimated to increase the financial burden on the US healthcare system by an additional \$64 million per year²



Burden on the patient

Additional clinic visits may affect adherence to treatment

Burden on clinic capacity

Increased clinic visits require resources and clinician time



Burden on the healthcare system

Increased costs of delivering IVT therapy



IVT, intravitreal; PRN, *pro re nata* (as needed). 1. Hunyor AP *et al. Acta Ophthalmol* 2016; Epub ahead of print (DOI: 10.1111/aos.13417). 2. Chen RW *et al. JAMA Ophthalmol* 2013; 131 (7): 840–842.

Use of topical antibiotics increases antibiotic resistance

Percentage of conjunctival bacterial isolates resistant to fluoroquinolones, before and after 3

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intraocular injections with post-injection antibiotics² colonies resistant to fluoroquinolones¹ ercentage of bacterial isolates (%) p=0.04 100 100 p=0.003 p=0.003 87.5 85 90 p<0.001 90 77 p=0.009 80 80 67 70 70 Patients (%) 60 60 52 50 50 39 40 34 40 25 30 30 20 20 10 10 0 0 N=22 Levofloxacin Ofloxacin Gatifloxacin Moxifloxacin No post-injection antibiotics Before antibiotic treatment (n=23) With post-injection fluoroquinolone After antibiotic treatment (n=48) Use of povidone-iodine alone with IVT injections does not lead to bacterial resistance³

Percentage of patients with ocular

IVT. intravitreal.

1. Milder E et al. Ophthalmology 2012; 119 (7): 1420–1424. 2. Kim SJ et al. Ophthalmology 2011; 118 (7): 1358–1363. 3. Hsu J et al. Am J Ophthalmol 2014; 157 (3): 514-518.e1.

Lack of antibiotic penetration into the vitreous

- A prospective randomized study demonstrated that topical antibiotic administration leads to effective levels in the aqueous but not in the vitreous
 - The concentrations in the vitreous did not exceed the MIC₉₀ for the most common bacterial pathogens causing acute postoperative endophthalmitis

	Mean vitreous concentration ± SD (µg/mL)		MIC ₉₀ (μg/mL)		
Topical antibiotic	3-day pre-surgery regimen* (n=3)	1-hour pre-surgery regimen [†] (n=3)	Staphylococcus aureus	Staphylococcus epidermidis	Staphylococcus pneumoniae
Moxifloxacin 0.5%	0.011 ± 0.008	0.012 ± 0.011	0.064	0.047	0.125
Gatifloxacin 0.3%	0.008 ± 0.006	0.001 ± 0.0003	0.11	0.09	0.22

*Four doses per day for 3 days prior to surgery (patient-administered; 100% patient compliance); [†]One drop every 15 minutes for a total of three doses administered 1 hour prior to surgery. MIC₉₀, minimum inhibitory concentration for 90% of isolates; SD, standard deviation. Costello P *et al. Retina* 2006; 26 (2): 191–195.



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What is the Vision Academy's position?

Use of topical antibiotics with intravitreal injections

Based on an extensive literature search, the Vision Academy <u>does not</u> recommend the use of topical antibiotics alongside IVT injections



There is **no evidence** for the prevention of infection¹



There is **no evidence** for a reduction in infection-related morbidity²



Repeated use of antibiotics is proven to **increase** the occurrence of **antibiotic resistance** and can potentially increase virulence¹



There is an **additional and unnecessary cost and burden** to patients, physicians, and healthcare systems¹



Use of topical antibiotics with intravitreal injections

Topical antibiotic use prior to IVT injection

- Most infections result from inoculation of organisms at the time of injection
- No prospective studies demonstrating that pre-injection antibiotics reduce the risk of endophthalmitis¹

Topical antibiotic use **concurrent with** or **after** IVT injection



No additional benefit of post-injection antibiotics in preventing endophthalmitis^{2,3}



General

consensus



opinion



Variation in

IVT, intravitreal.

1. Merani R et al. Int J Retina Vitreous 2015; 1: 9. 2. Li AL et al. Retina 2016; 36 (7): 1349–1356.

3. Storey P et al. Ophthalmology 2014; 121 (1): 283–289.

Use of topical antibiotics with intravitreal injections

Antibiotic resistance



Several studies have demonstrated increasing resistance of conjunctival flora to topical antibiotics^{1,2}

Resistance to fluoroquinolones, the most commonly used topical antibiotics in many regions, may have serious ramifications in other procedures (e.g., cataract surgery)

Antibiotic penetration



Topical administration leads to effective antibiotic levels in the aqueous but not in the vitreous³





1. Merani R *et al. Int J Retina Vitreous* 2015; 1: 9. 2. Milder *et al. Ophthalmology* 2012; 119: 1420–1424. 3. Costello P *et al. Retina* 2006; 26 (2): 191–195.

Use of topical antibiotics with intravitreal injections

Significant regional differences



- Reasons for continued use of topical antibiotics with IVT injections include:
 - Personal preference
 - Peer pressure
 - Medico-legal concerns

Challenge in changing clinical practice



Changes in practice habits may be achieved through the revision of drug labels and the amendment of local and professional society guidelines







Summary



The Vision Academy does not recommend the use of topical antibiotics alongside IVT injections



There is a lack of evidence supporting any benefit for topical antibiotic prophylaxis against post-injection endophthalmitis



There is a growing body of evidence detailing **increased antibiotic resistance** in patients receiving topical antibiotics



Product information for IVT medications should be updated to reflect this recommendation and to remove barriers to clinicians wishing to change their practice

