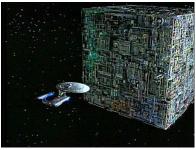
OCT Fundal Angiography Initial Experience

The new era in Medical Retina Imaging Based on Cirrus 5000 AngioPlex 2016 Model RCOPhth Presentation 24 May 2016 Nicholas Lee

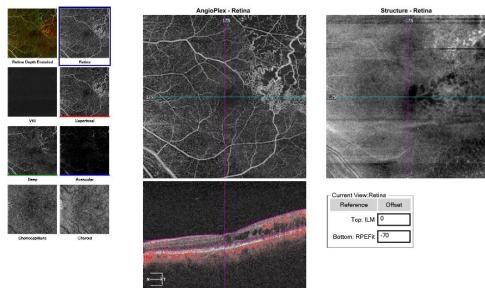
Consultant Ophthalmologist at The Hillingdon Hospital and The Western Eye Hospital in London UK

Features of AngioPlex

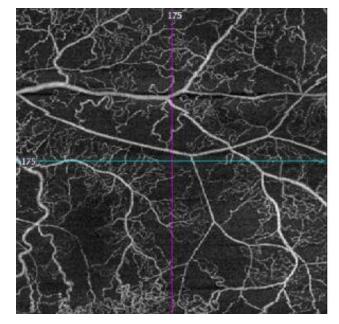
- Termed OCT-A for Optical Coherence Tomography Angiography
- High speed 27,000 to 68,000 Hz
 - 2.6 for 512 image, 1.8 for 200 image and 0.8 for Raster
- 840um for resolution
- 5um and 15um resolution
- 36 x 30 degree view
- >67 Million data cube points for Cube data analysis

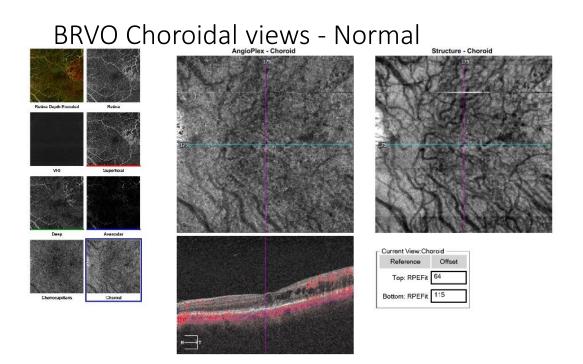


Branch retinal vein occlusion - Collaterals

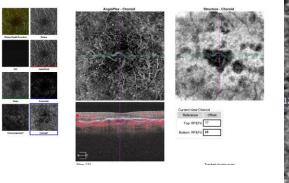


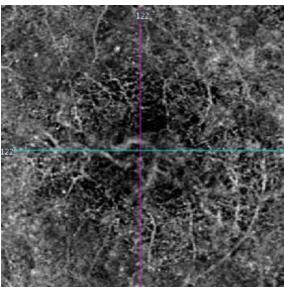
Detail Better than Fundus Fluorescein Angiography



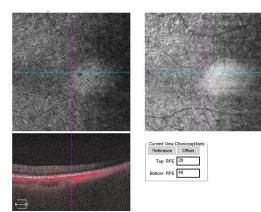


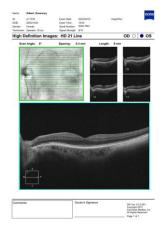
Established Wet age related macular degeneration



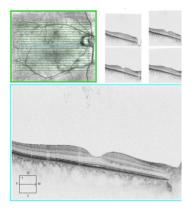


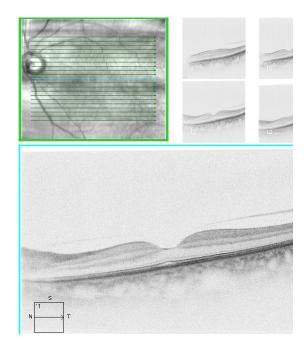
Naevus

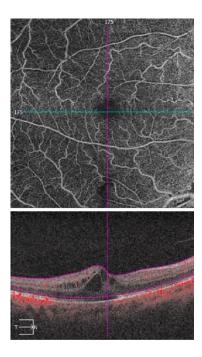




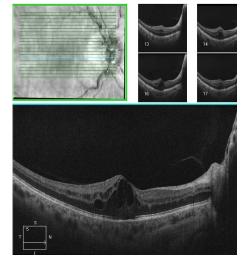
PVD Negative Image helps Visualise Vitreous



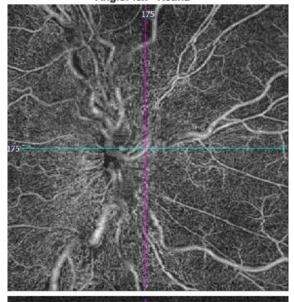


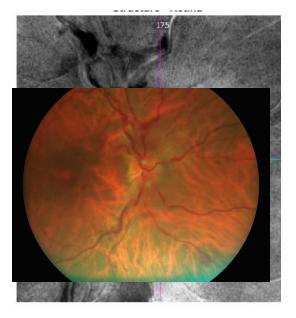


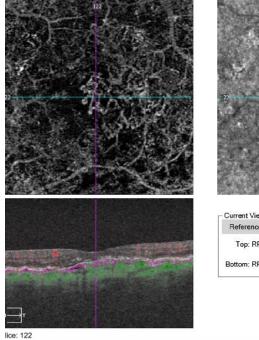
Hypertesnive partial Central Retinal Vein Occlusion 55 200/100 – Required Anti-VEGF

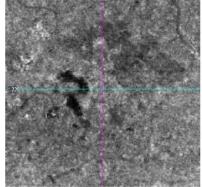


CRVO disc swelling

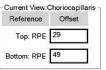








Tracked during scan



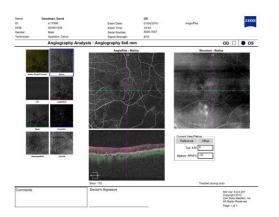
High quality Definition of SRNVM in AMD

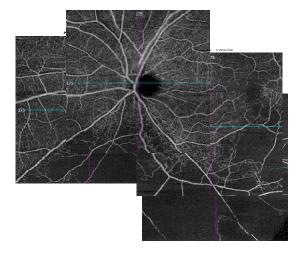
IRFANVIEW

What is IrfanVie

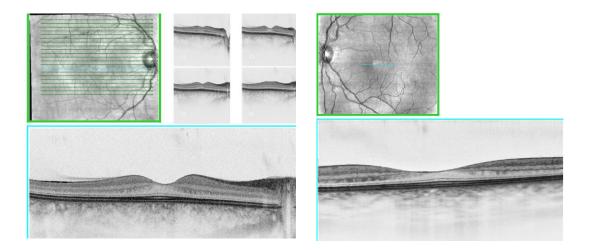
Making a Collage

- Capture Multiple images 6x6 or 3x3 or comination
- Use "Irfanview" Free image software to Crop image
- Use Power point to Collage the images
- Use Group function to lock all the images together



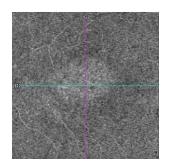


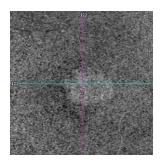
28 year old Stargardt's 6/6 and 6/5



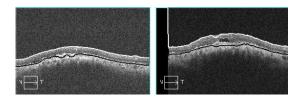
Choroidal Naevus

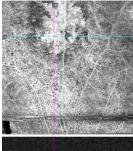
Evaluate if any unsual blood flow which might indicate Malignant change = 1 in 3,800 risk

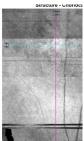




Naevus change to Melanoma Change over one year Previously recommended observation Now see Vascularisation present For Plaque Changed management

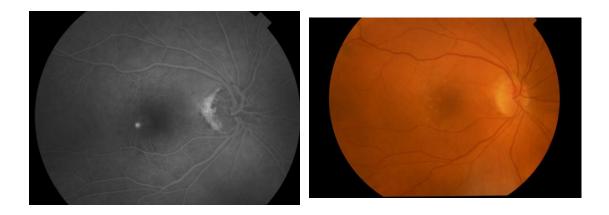




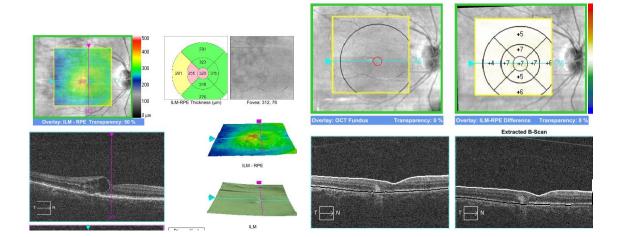


Current View:Choriocapillaris Reference Offset Top: RPE -55 Bottom: RPE 49

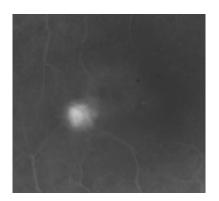
? On presentation is this Wet AMD or something else?

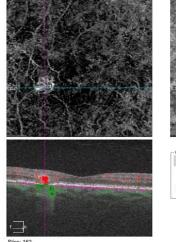


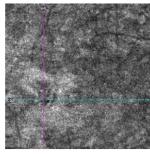
OCT image of Patient



OCT-A shows this is Retinal to Choroidal Anastomosis - RAP



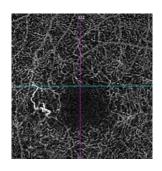


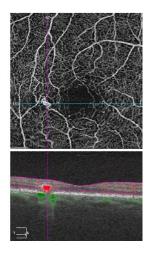


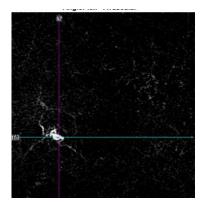


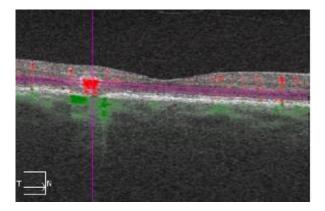
Tracked during scan

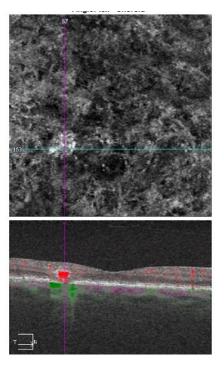
Move cursor to look at blood flow





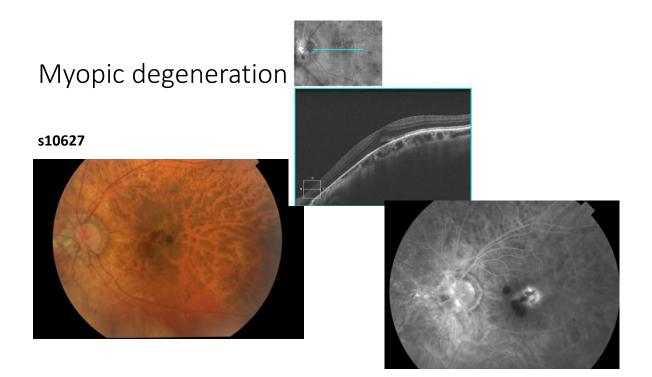




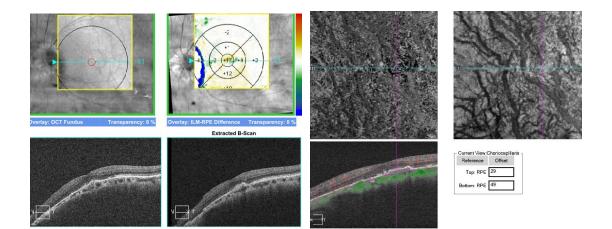


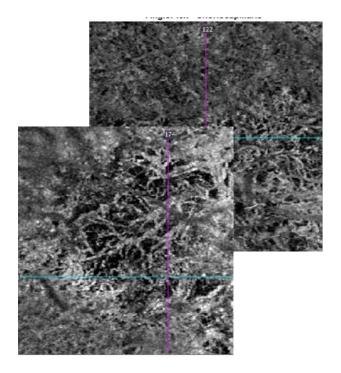
RAP lesion

- Doppler Blood Flow
- Red is Retinal
- Green Is choroidal
- Can place cursors on the lesion to identify on OCT the location of the blood flow

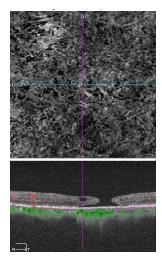


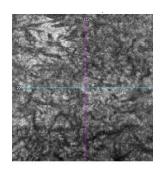
Myopic degeneration





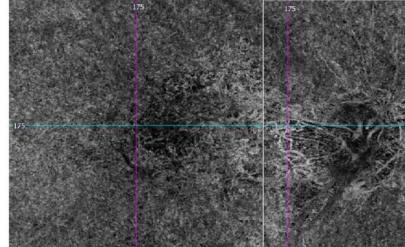
SRNVM

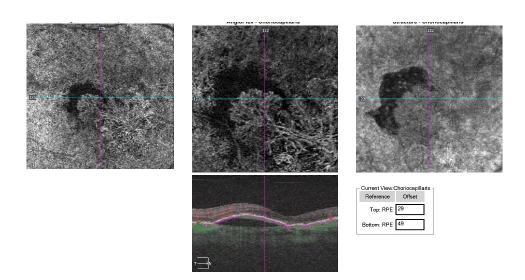






SRVM Spreading from the disc to the macular



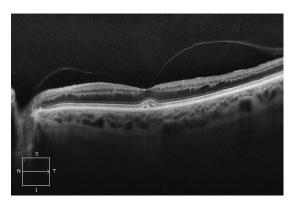


Classical SRNVM that has been treated and a new recurrence has fanned out from the edge of the old lesion

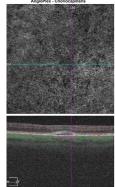
These originate from one central vessel growth and spread like petals of a flower

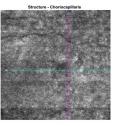
Vitreo macular traction and CSR like formation Shows though the Pigment elevation is not WET age related macular degeneration formation

0.36



New symptoms

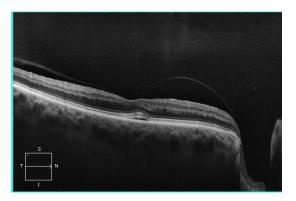


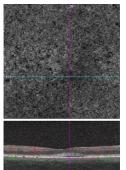


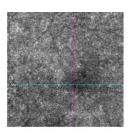


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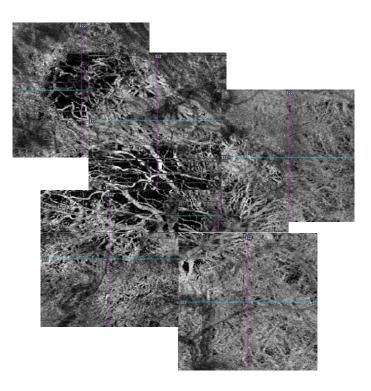
0.36



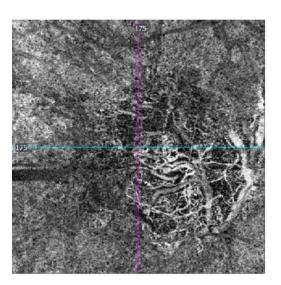




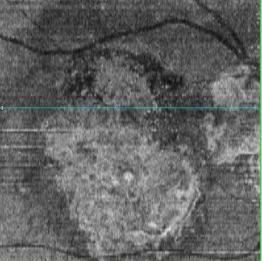




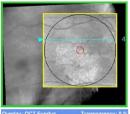
AngioPlex

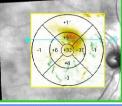


& Enface Analysis on Macular Cubes



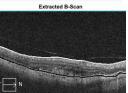
Macular cube vs Enface image Enface may be done on Older Macular Scans

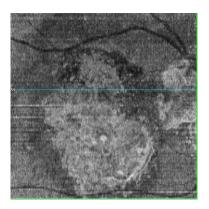


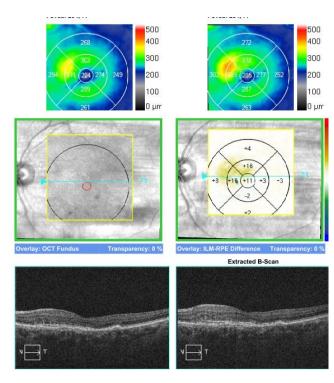


Overlay: ILM-RPE Difference Tran

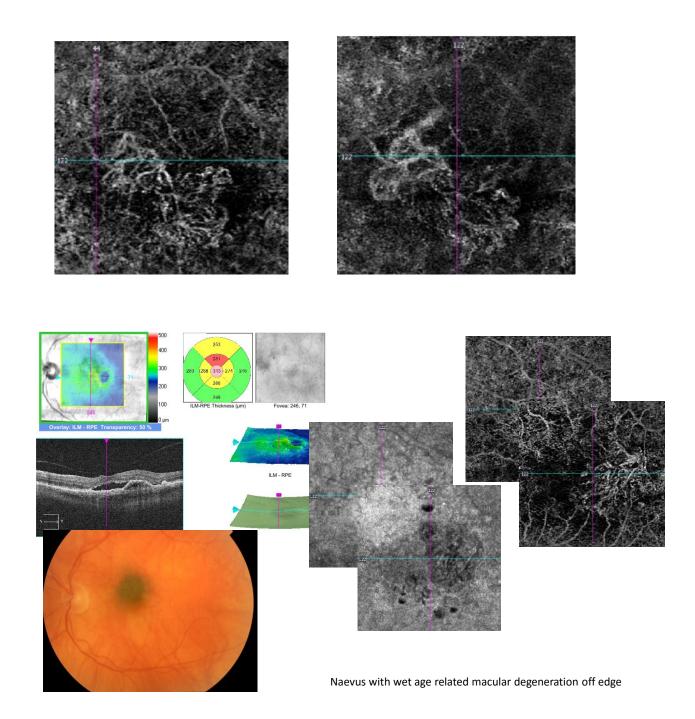


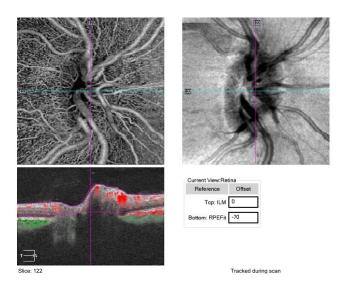




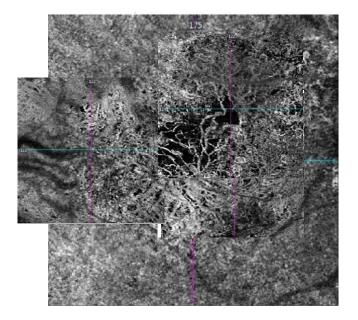


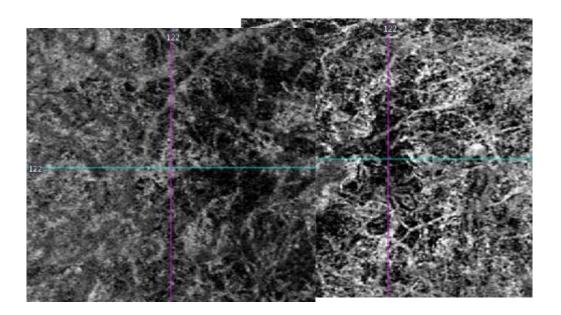
One Month apart – Dilation of the blood vessels Possibility to monitor change/growth

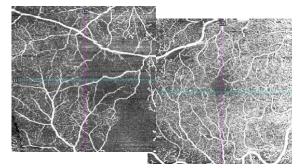




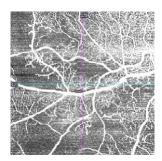
Overlay 3x3 on to 6x6 to enhance the detail

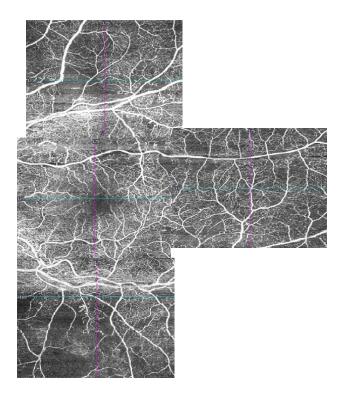




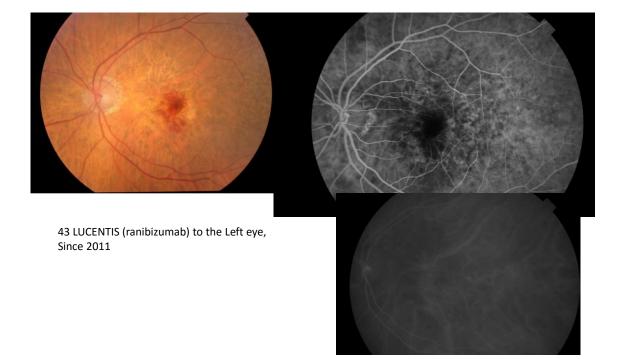


Diabetic Collage Shows ischaemia very well New vessels seen on VRI image as highlighted black areas



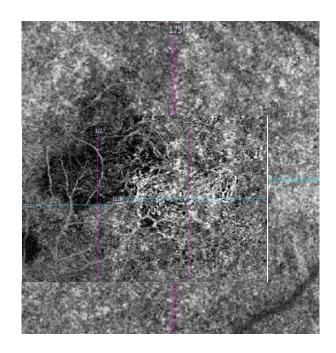


Diabetic Collage

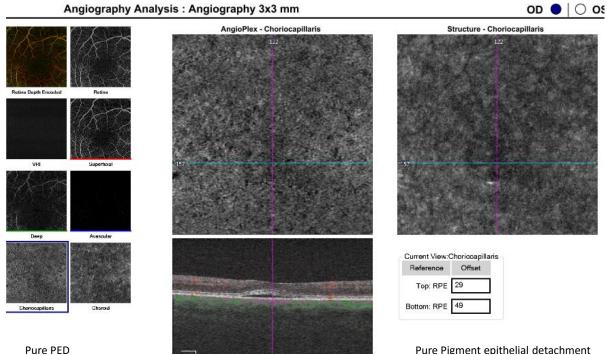


OCT-A shows good definition This is 6x6 with inserted/overlayed 3x3 images

3x3 give high definition than 6x6



Angiography Analysis : Angiography 3x3 mm



Pure PED

Cost Saving Vs FFA

- FFA
- 2 nurses & 1 Photographer
- Fluorescein and ICG Vials, Cannulars
- Time 1 1.5 hours for patient
- Side effects
 - Nausea
 - 1 in 300 Skin reaction
 - 1 in 1000 allergy1 in 250,000 death
 - 1 m 250,000 death
- View on line only
- Costs
 - Capital ++ (50K)
 - Staff +++
 - Consumables ++

- OCT A
- 1 operator HCA to Photographer
- 2.8 seconds per scan
 Full survey 9 fields under 5 minutes
- Non invasive
- No side effects
- Time few minutes only
- View options
 - On line with Forum
 - On line on machine
 - Comprehensive Print outs/PDF
- Costs (80K)
 - Capital +++
 - Staff +
 - Consumables Nil

Dawn of a New Era in Imaging

