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REAL-WORLD EXPERIENCE WITH FARICIMAB IN NEOVASCULAR AMD AND DIABETIC MACULAR EDEMA: A 4-MONTH PROSPECTIVE STUDY FROM QATAR

Almuhtaseb H.*

The View Hospital in affiliation with Cedars Sinai ~ Doha ~ Qatar

To evaluate the short-term efficacy, safety, and treatment burden of Faricimab, a bispecific antibody targeting VEGF-A and Ang-2, in patients with nAMD and DME in a Qatari cohort.

A prospective, single-center study of 50 eyes (30 nAMD, 20 DME) treated with intravitreal Faricimab between. Patients received a loading dose (4 injections at 4-week intervals) followed by individualized treat-and-extend protocols. Outcome measures included:

Visual acuity (VA) (ETDRS letters or Snellen converted).

Central subfield thickness (CST) on OCT.

Injection frequency and treatment intervals.

Adverse events (intraocular pressure, inflammation, systemic effects).

At 4 months:

VA improvement: Mean gain of +8.2 letters in nAMD (baseline: 54.5) and +10.1 letters in DME (baseline: 48.3).

Anatomical response: CST reduced by 152 µm (nAMD) and 189 µm (DME) ($p<0.01$).

Treatment interval: 75% (nAMD) and 80% (DME) achieved ≥6-week dosing by Month 4.

Safety: No intraocular inflammation, sustained IOP spikes, or systemic adverse events.

In this Qatari cohort, Faricimab demonstrated rapid anatomical stabilization and significant functional gains in both nAMD and DME, with a favorable safety profile. Extended treatment intervals (>6 weeks) were achievable in most patients within 4 months, suggesting reduced treatment burden compared to traditional anti-VEGF therapies. These real-world data align with global trials and support Faricimab's role as a promising first-line option for retinal vascular diseases in diverse populations.