PROMOTING MULTINATIONAL CLINICAL RESEARCH TO ADVANCE UNDERSTANDING OF RETINAL PATHOLOGIES

THESE are exciting times in the field of retinal research, with a significant number of European-based projects and clinical trials helping to advance current understanding of a broad range of retinal pathologies, according to several speakers at the European Vision Clinical Research Symposium on Clinical Research in Retinal Diseases.

"We believe strongly that many of the developments in ophthalmology which made EURETINA grow from over 300 participants to over 5,000 today are mainly because we now have treatments options for our patients," said Prof Jose Cunha-Vaz, who chaired the session yesterday at the 16th EURETINA Congress in Copenhagen.

"These treatment alternatives have to be tested and evaluated, and for this we need the commitment of industry and physicians and we also need high-quality clinical trials," he added.

In support of these aims, Prof Cunha-Vaz said that the European Vision Institute Clinical Research Network ***(EVICR.net)*** has succeeded in building a network of more than 100 clinical sites in over 18 European countries, with the coordinating centre based in Coimbra, Portugal.

"The goal of ***EVICR.net*** is to promote multinational clinical research in ophthalmology within the European Union, and to guarantee a high level of quality and excellence in the clinical research performed," said Prof Cunha-Vaz.

"The network also helps to coordinate training activities for its members and serves as a resource for academia and industry in conducting multinational clinical research in ophthalmology," he added.

Prof Cunha-Vaz noted that there are currently seven ongoing multinational clinical research studies being supported by EVICR: two in age-related macular degeneration (AMD) and retinal dystrophies, four in diabetic retinopathy and retinal vascular diseases, and one in glaucoma.

One of those studies, the *EUROCONDOR (European Consortium for the Early Treatment of Diabetic Retinopathy)* clinical trial of neuroprotection for non-proliferative diabetic retinopathy, has already yielded some interesting findings, said Prof Simon Harding of the University of Liverpool, UK.

The therapeutic strategy of the *EUROCONDOR* project is based on neuroprotection to prevent or arrest retinal neurodegeneration in the early stages of the disease.

"It is a prospective and randomised study in 450 type 2 diabetic patients of two neuroprotective agents, somatostatin (SST) and brimonidine (BRIM), administered topically through eye drops," he said.

Some of the preliminary key findings from the clinical trial include the fact that neurodegeneration is not present in one-third of type-2 diabetic patients with early microvascular disease and that topical treatment with somatostatin and brimonidine seems not useful for preventing the development of neurodegeneration, at least within two years of follow-up, said Prof Harding.

Delegates at yesterday's European Vision Clinical Research Symposium

He noted that topical treatment with these agents appears to have an effect on the amplitude response in those patients in whom some degree of neurodegeneration is already present.

In a separate presentation, Jose Figueira MD, PhD presented preliminary data from the *PROTEUS* trial of ranibizumab plus panretinal photocoagulation (PRP) versus PRP in monotherapy in the treatment of subjects with high-risk proliferative diabetic retinopathy (HR-PDR).

The trial, carried out at 13 clinical sites in Europe, included 87 eyes of 87 patients with HR-PDR.

"We are still analysing the data, but the preliminary results seem to demonstrate that PRP associated with ranibizumab was more effective than PRP alone in the regression of neovascularisation area in HR-PDR eyes during one-year follow-up. The combination of PRP associated with ranibizumab also seems to be safe in this population," he said.