A study published in the American Journal of Ophthalmology found disease management was altered in 48% of uveitis patients when optomap ultra-widefield (UWF™) imaging was used.

Results from another published clinical study suggest that multi-modal UWF optomap® imaging may alter management decisions compared to standard of care imaging and clinical examination. UWF imaging was able to detect 23% more uveitic changes when compared to clinical examination and conventional fluorescein angiography (FA). The decision to alter management was made in 48% patients with UWF FA imaging compared to examination and simulated conventional FA alone. Another study from the same group found that when using UWF FA, treatment was altered 51% of the time in patients with vasculitis when compared to examination and traditional small field imaging.

Another recent study found that color optomap images could be used in place of traditional white light fundus photography for the assessment of vitreous haze.

“It is intriguing that though the determination of disease activity did not differ with the use of wide-field imaging, management decisions were significantly altered, suggesting that qualitative differences in the degree of disease activity seen on wide-field imaging may play a significant role.”

American Journal of Ophthalmology, 2014

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The index study indicates the use of optomap ultra-widefield imaging in the evaluation of uveitis to be beneficial because in 48% of the patients, management was altered due to the widefield findings.

- In another study optomap color images altered management in 19% (8 of 43 patients), optomap fa an additional 13% (6 of 43), combined color and optomap fa altered management in a total of 48% (21 of 43 patients) overall.

- Results from this study suggest that UWF cSLO imaging significantly altered management decisions compared to standard of care imaging and clinical examination. The differences are attributed to peripheral retinal imaging and angiographic findings not easily visualized or identified without UWF imaging.

- A number of studies have demonstrated evidence of disease activity on peripheral angiography which appeared to have inactive disease by examination alone.

- A paper by the same group published in the Journal of Ophthalmic Inflammation and Infection found similar results in a cohort of vasculitis patients. Disease activity was detected in 68% of patients using UWF imaging in comparison to 45% with conventional imaging and exam. The decision to alter management was made 65% of the time when compared to 10% with conventional imaging and exam.

- Another recent study found that color optomap images could be used in place of traditional white light fundus photography for the assessment of vitreous haze.