



OCT/OCTA: The What, When and How

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College of Optometry

Rodman Disclosures:

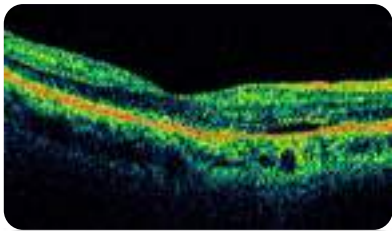


- Visionix
- iCare
- Apellis
- Iveric Bio
- LKC technologies

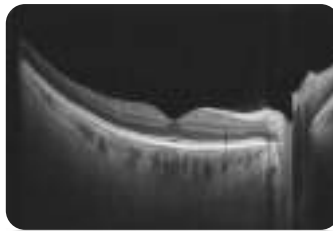
NSU Florida

OCT Angiography: *The Next Chapter in Posterior Imaging*

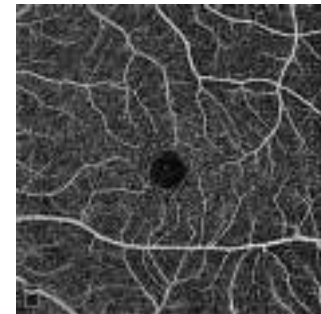
- Time Domain
- Spectral Domain
- OCT Angiography (OCTA)...THE NEXT CHAPTER!!



*2002: Time Domain
OCT*



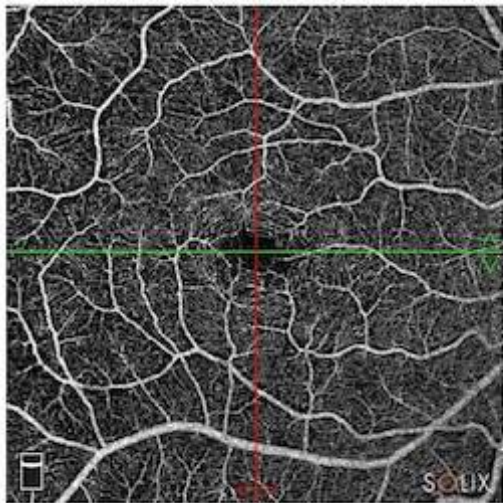
*2006: Spectral
Domain OCT*



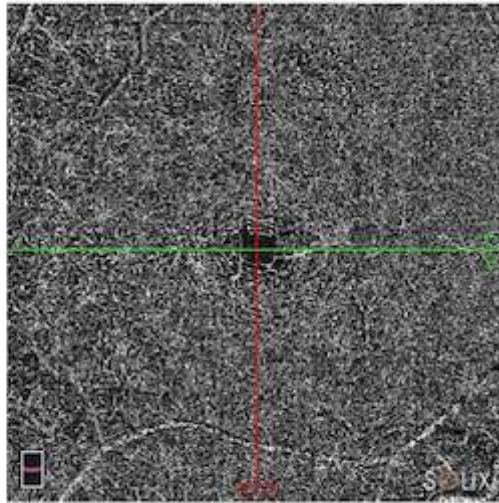
2014: OCTA

OCT Angiography

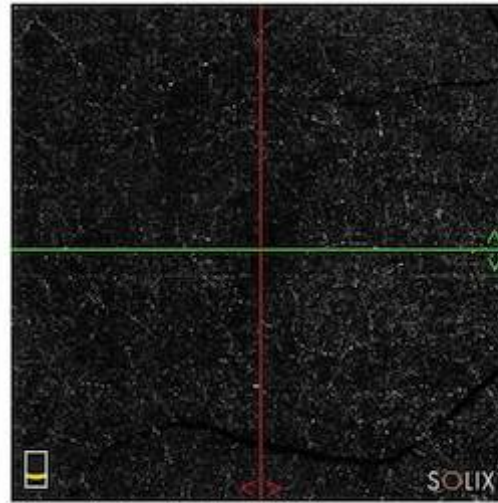
- See retinal vasculature without referring patients out of the practice
- Visualize signs of disease earlier and make more intelligent referrals
- Manage more pathology
- Elevate the practice with state-of-the art imaging technology



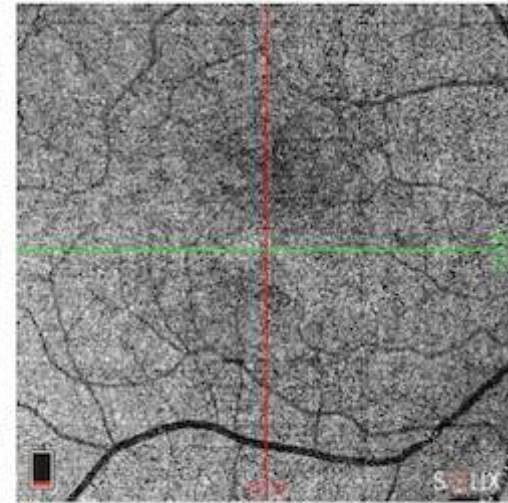
Superficial (ILM - IPL)



Deep (IPL - OPL)

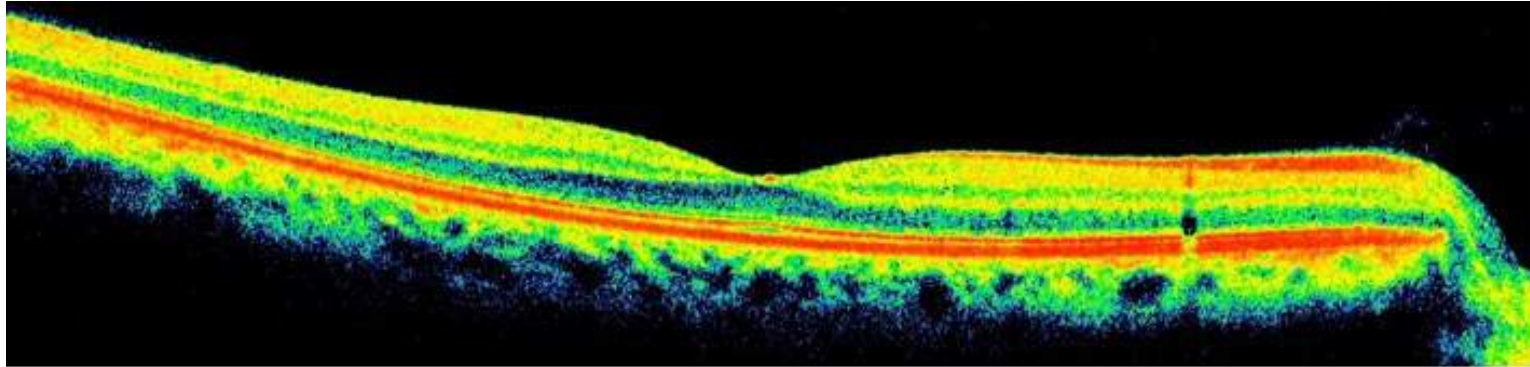


Outer Retina (OPL - BRM)



Chorocapillaris (BRM - BRM+30µm)

Optical Coherence Tomography

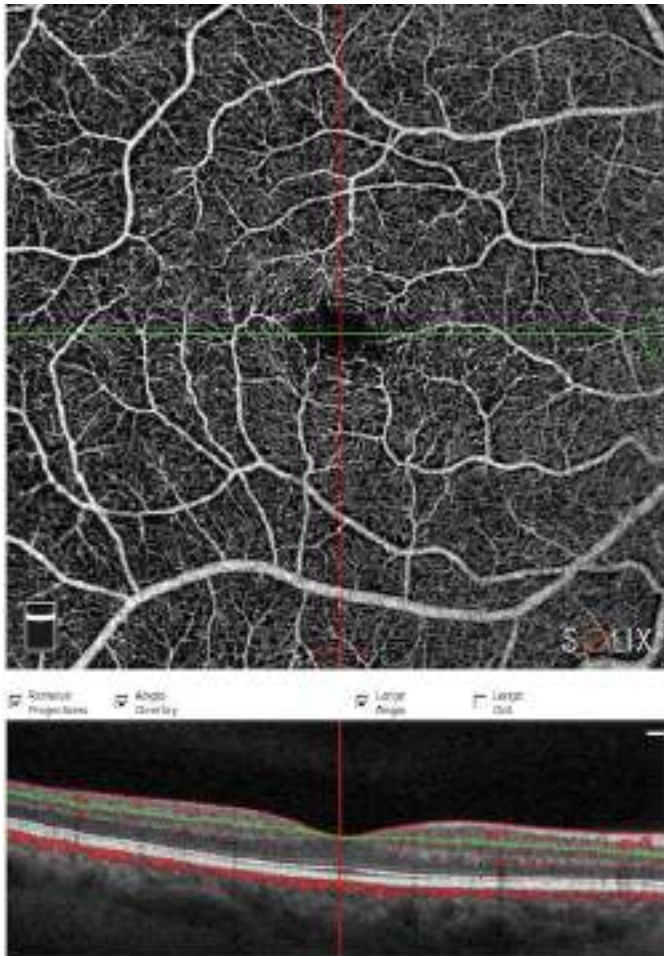


PROS:

- Excellent visualization of macular architecture
- Non-invasive
- Easy to perform

BUT.... UNABLE TO
VISUALIZE
VASCULATURE/
FLOW!!!

OCT with OCTA: A Match Made in Heaven



- **Conventional SD-OCT**
 - Stationary tissue (**structure**)
- **OCT Angiography**
 - Moving red blood cells (**function**)

OCT angiograms co-registered with OCT B-scans from the same area allows simultaneous viewing of structure and function.

OCT & OCTA Provide Different – but Complementary – Information

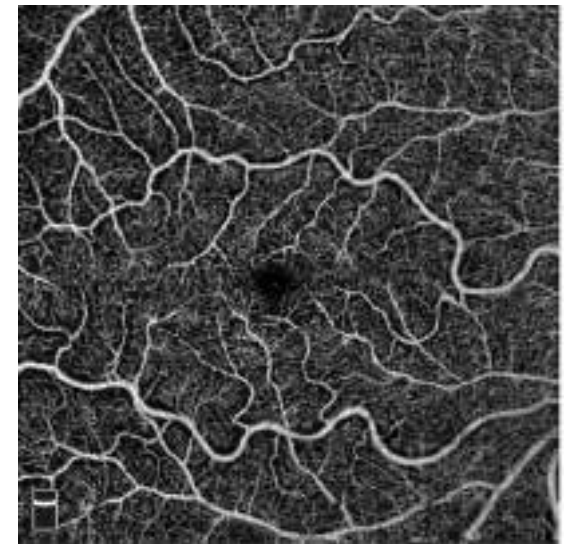
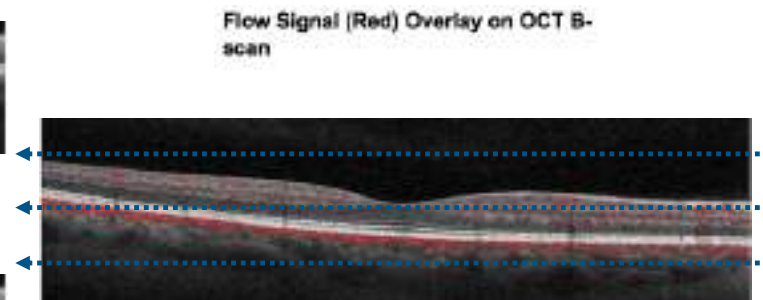
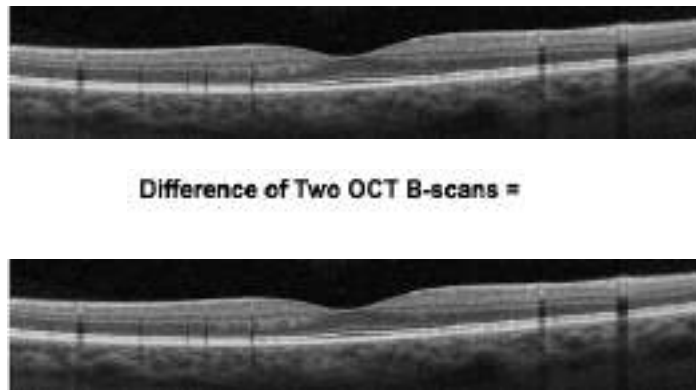
OCT: Structure	OCTA: Function
Visualize STRUCTURAL changes <ul style="list-style-type: none">• Drusen• Fluid• Elevations/disruptions in retinal layers	Visualize blood flow in the vessels <ul style="list-style-type: none">• CNVM
	Visualize ischemia/poor perfusion <ul style="list-style-type: none">• Diabetic retinopathy• Vascular occlusion

OCTA vs FA

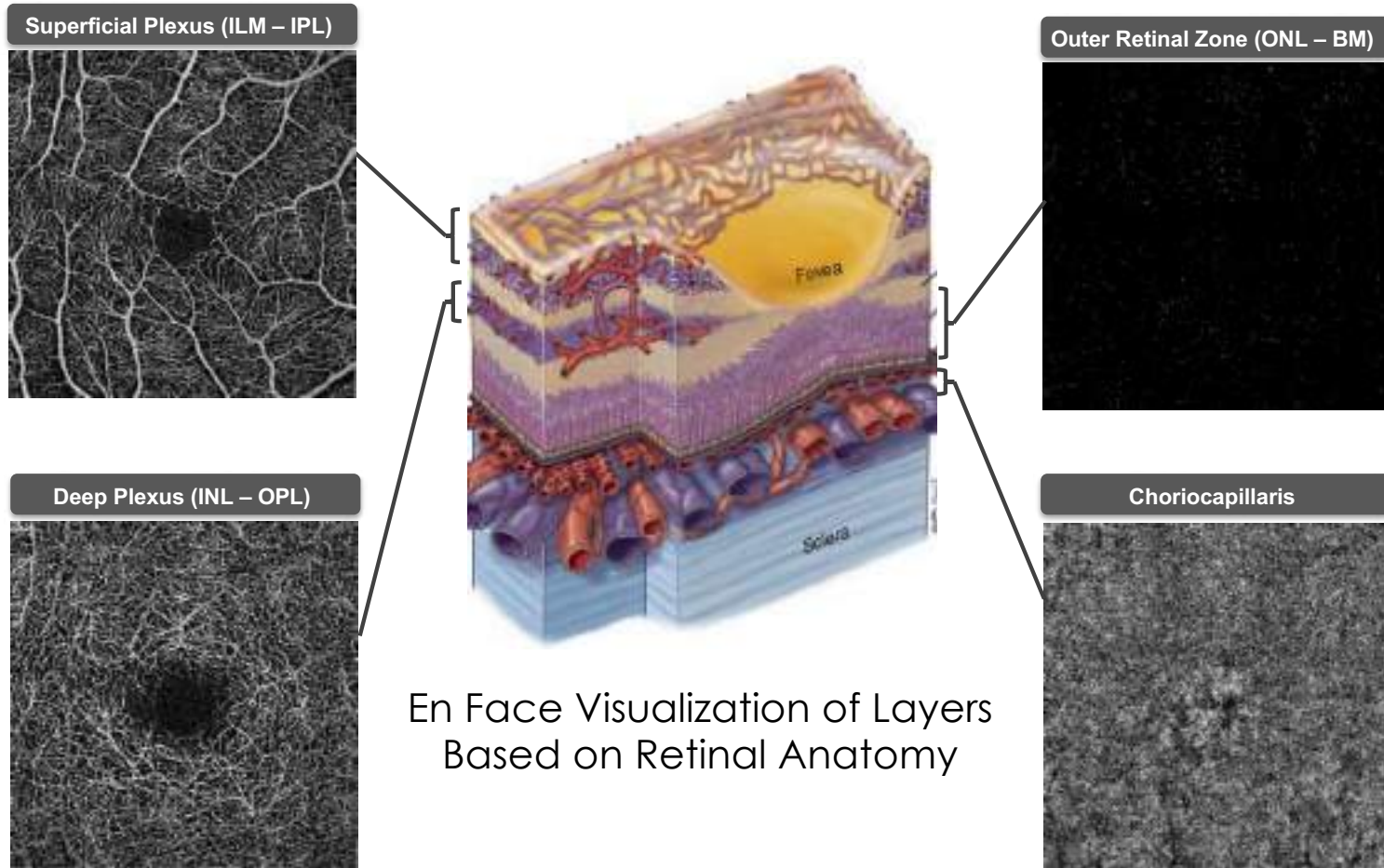
Fluorescein Angiography	OCTA
Wide field capabilities	Limited field of view
Invasive	Non-invasive
Dye Based	No dye used
Lower resolution	Higher resolution
Less affected by motion	More affected by motion
Two dimensional, no segmentation	Three-dimension, segmentation
Images superficial retina	Images sup, deep, outer retina and choroid
Dynamic blood flow information	Static blood flow information
Blood flow information	Structural and blood flow information
5-30 minutes of imaging time	5 minutes of imaging time

How does OCTA work?

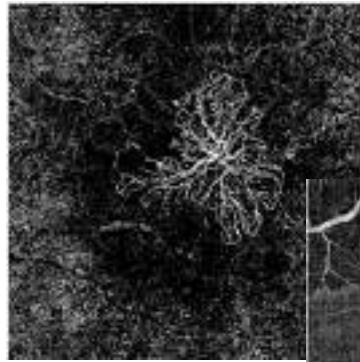
- OCTA uses motion contrast to detect flow from OCT data



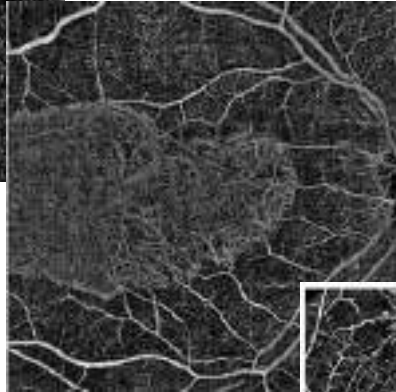
En-face OCTA Slabs: Based on Retinal Anatomy



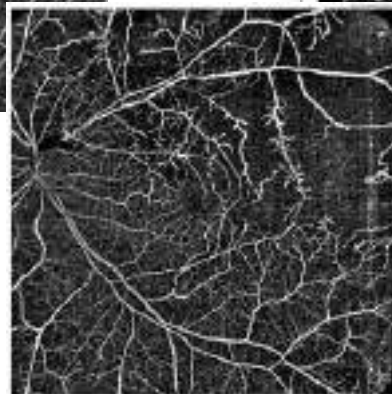
Various scan sizes available!



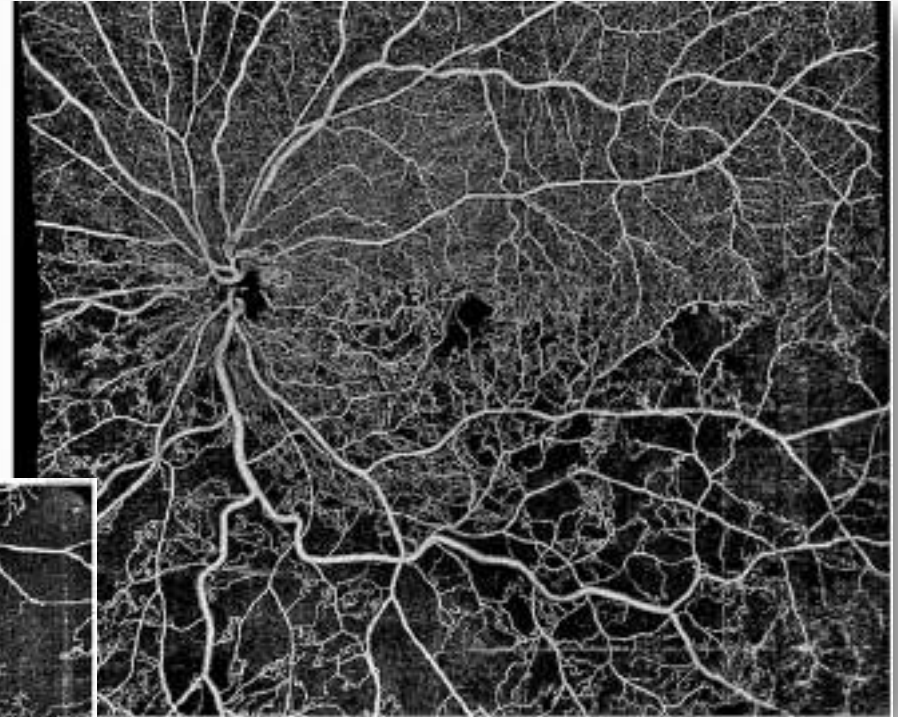
6.4 x 6.4mm



9 x 9mm



12 x 12mm

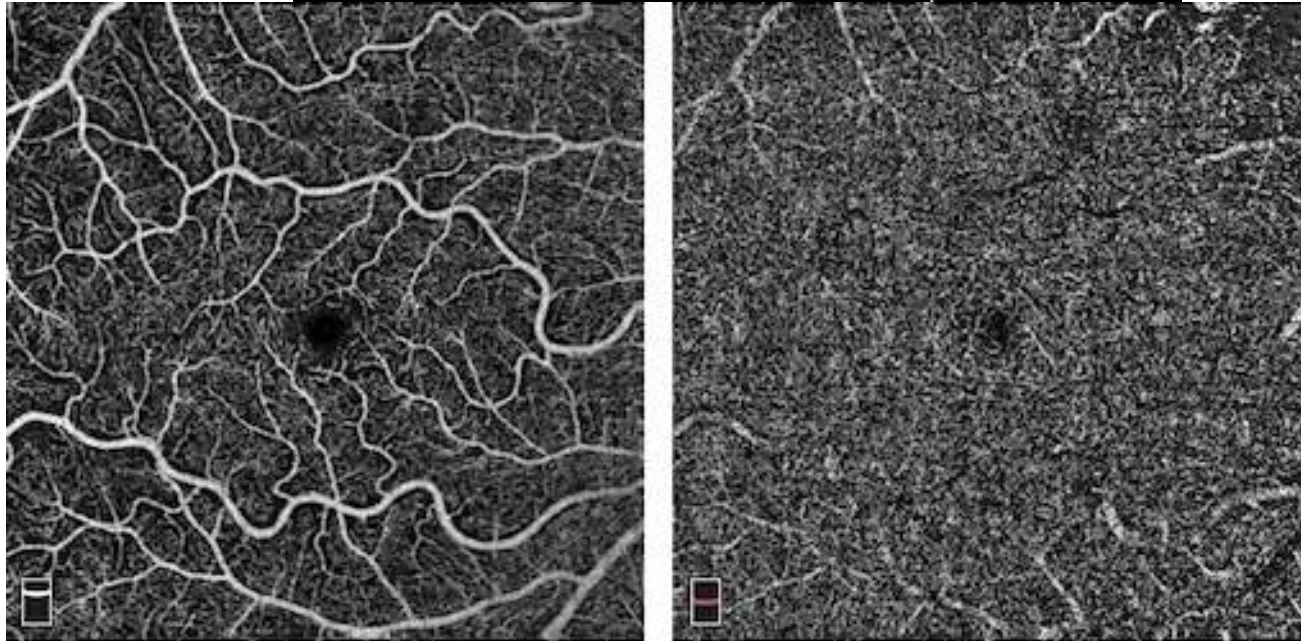




Apply This Clinically

Inner Retinal Disease

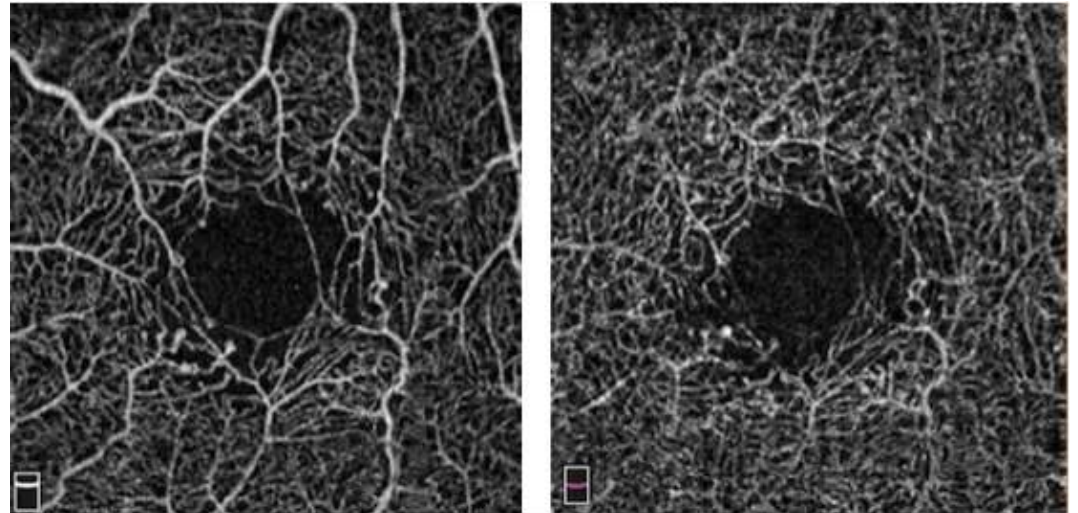
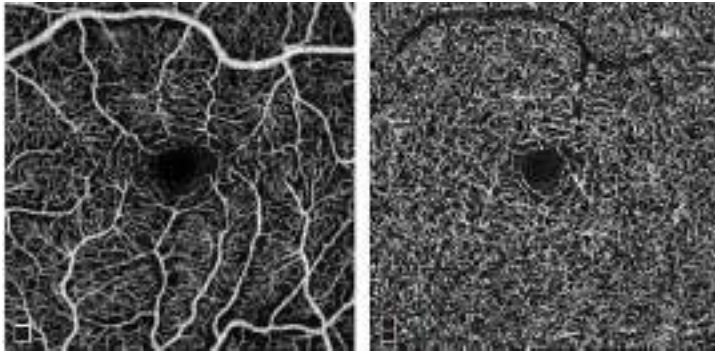
Inner Retinal Disease



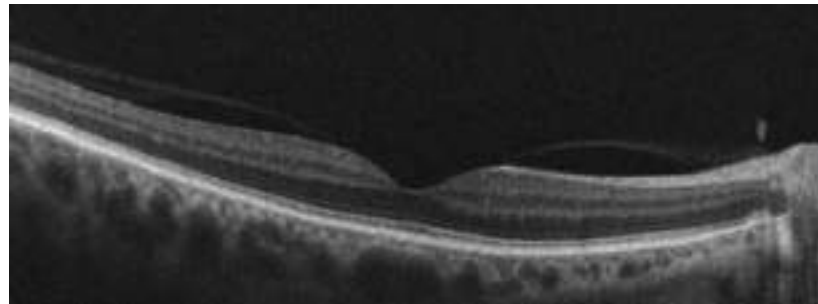
Diabetic Retinopathy

- **Positive Indicators**

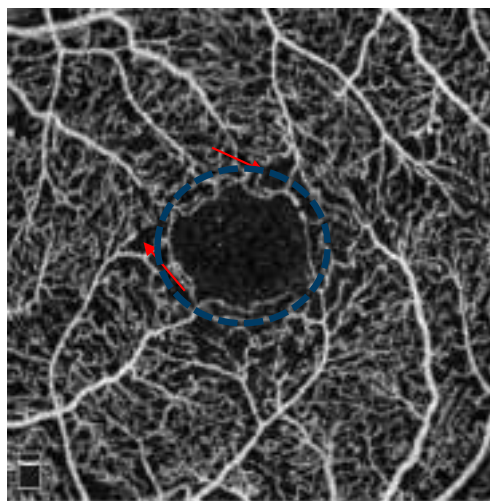
- Retinal capillary non-perfusion – seen as blackened area without blood flow outside FAZ
- Microaneurysms
- Enlarged FAZ



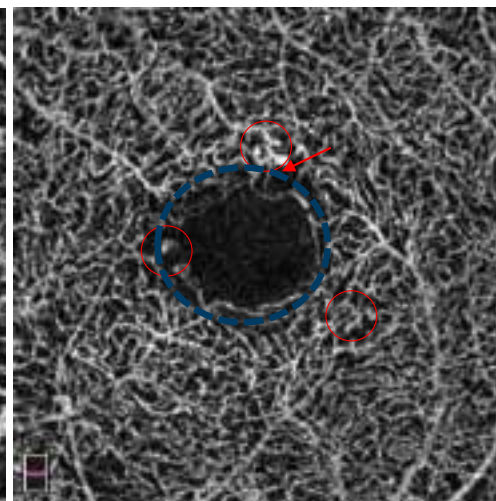
Meet Carla: A 45-year-old African American female



"My BS is excellent.... Can't remember the number But my A1C is 7!!! I'm so proud of myself"

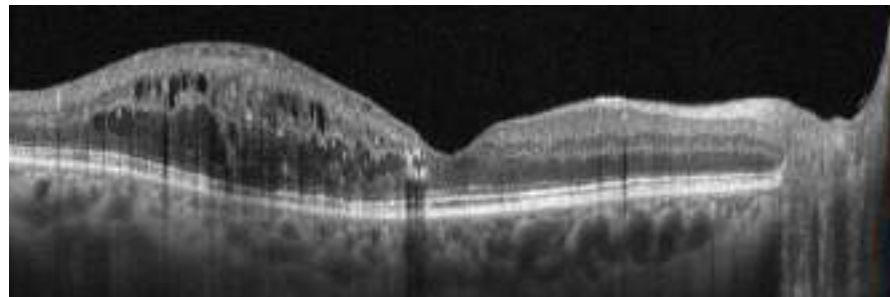
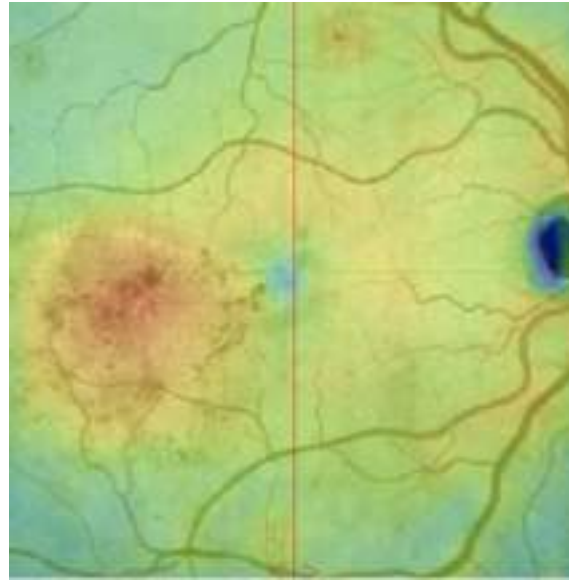
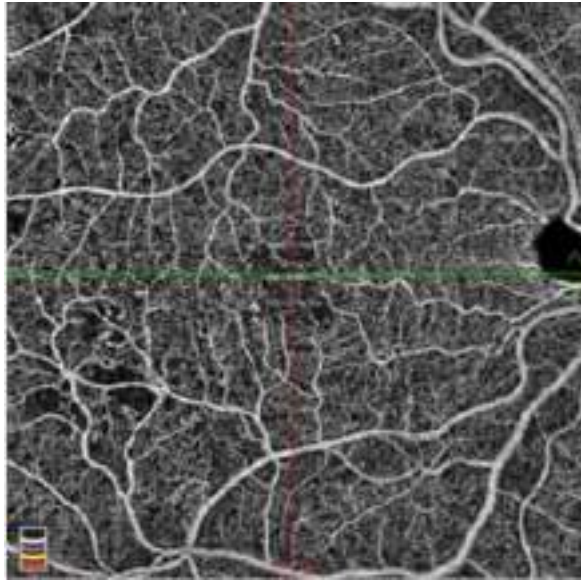


Superficial Capillary Plexus



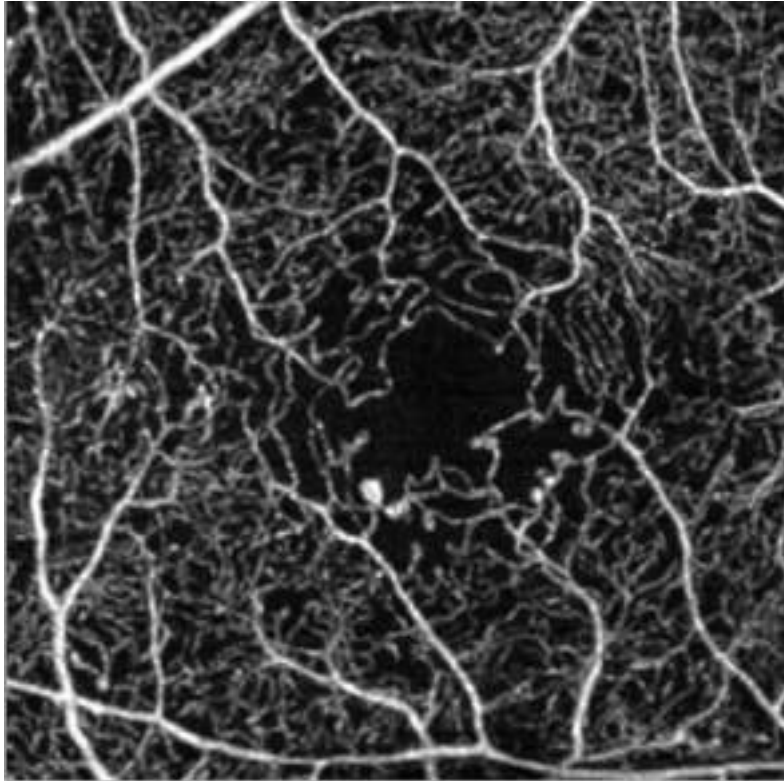
Deep Capillary Plexus

OCT Angiography: Taking the BEST care of our patients!



Diabetic macular
edema... but what
else???

Meet James: 55-year-old African
American male



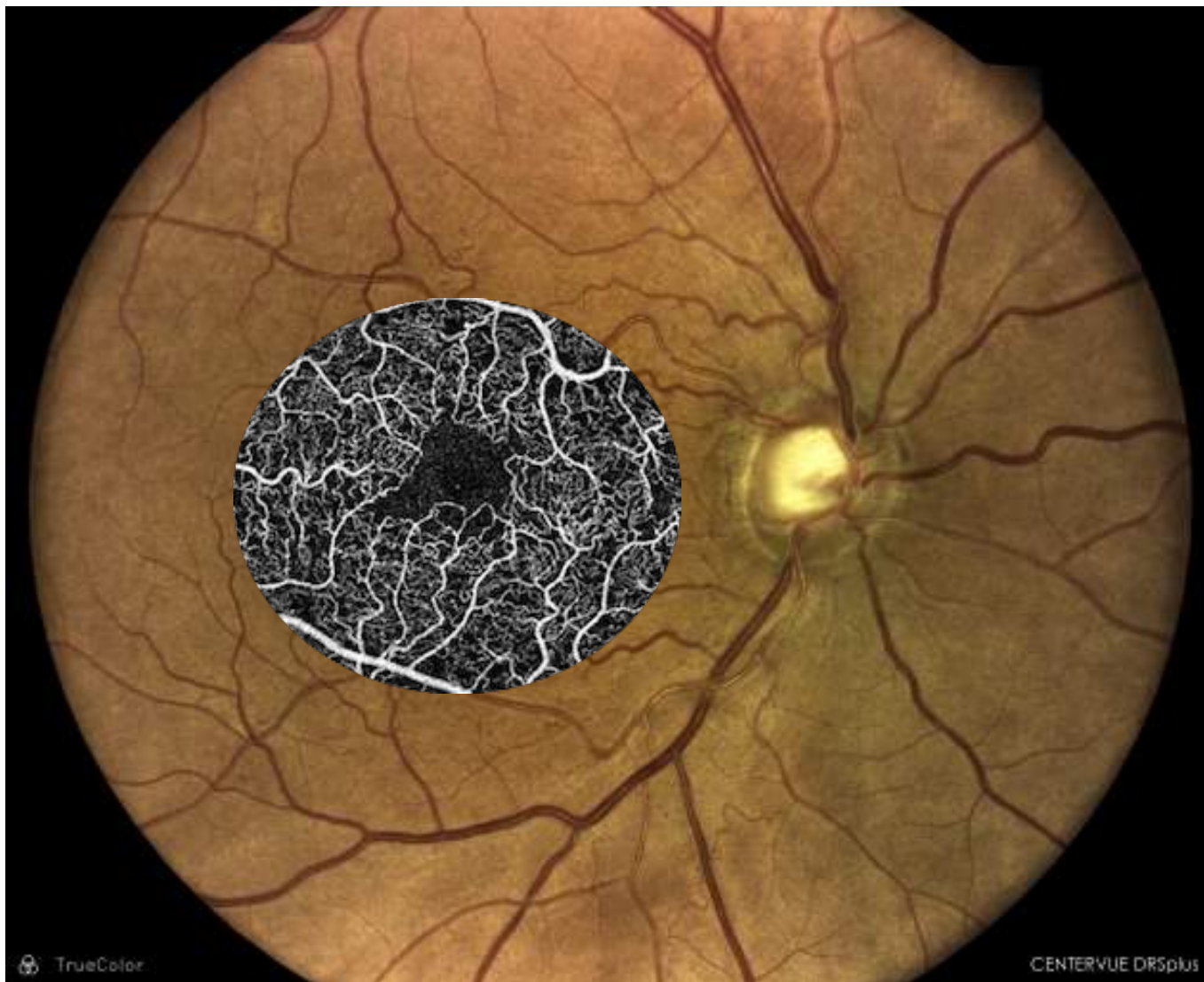
No diabetic retinopathy on fundus
exam; Decreased BCVA... 20/50!!

**OCT Angiography
provides the answer!!!**

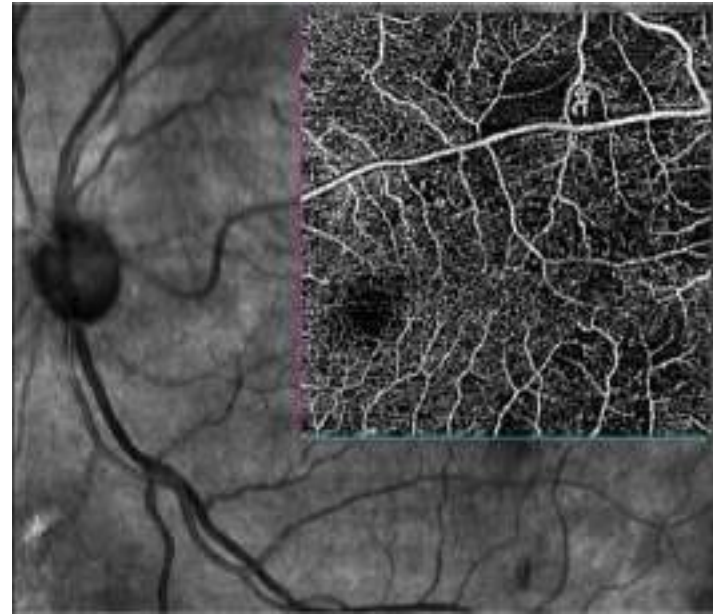
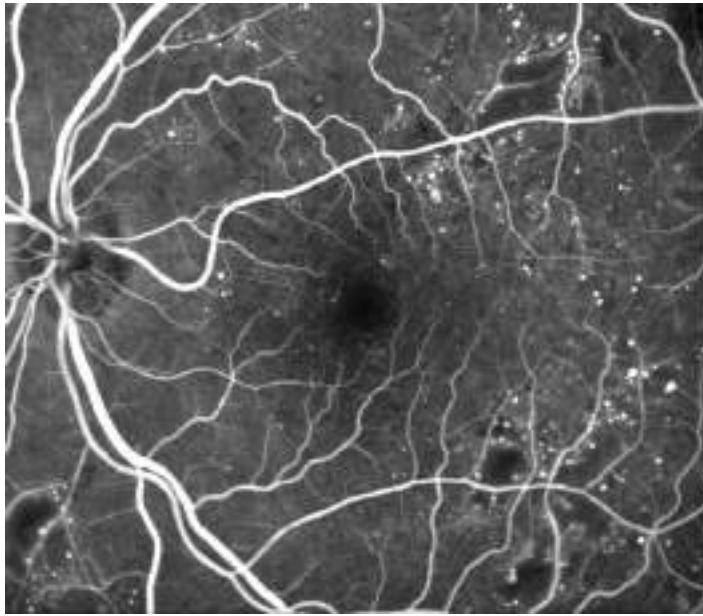
45-year-old glaucoma suspect; DM x 5 years



"Poorly controlled BS;
trouble with every
medication that his
PCP has put him on"

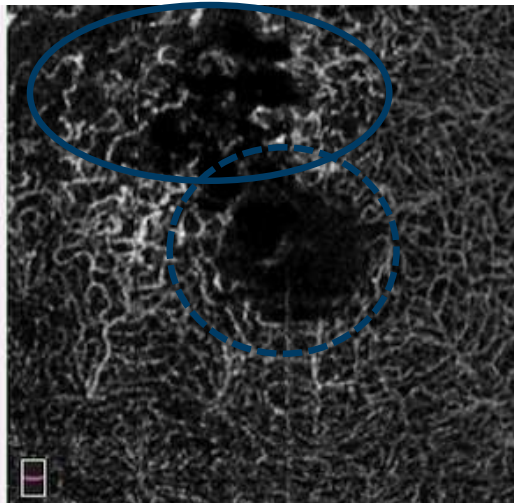
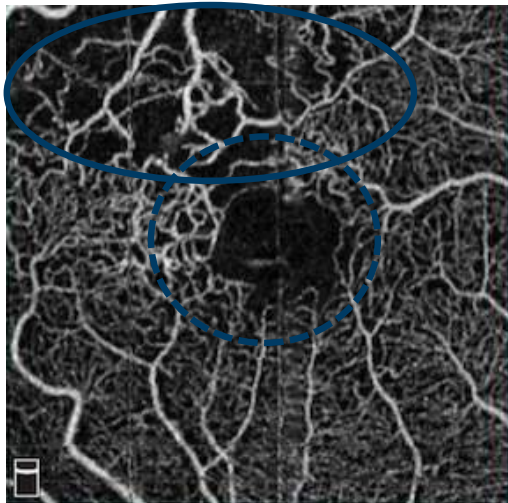
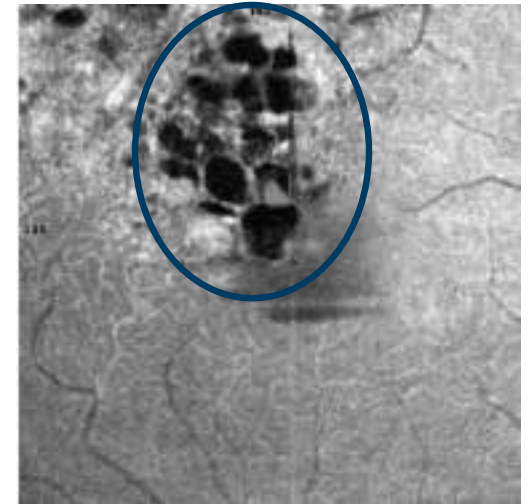
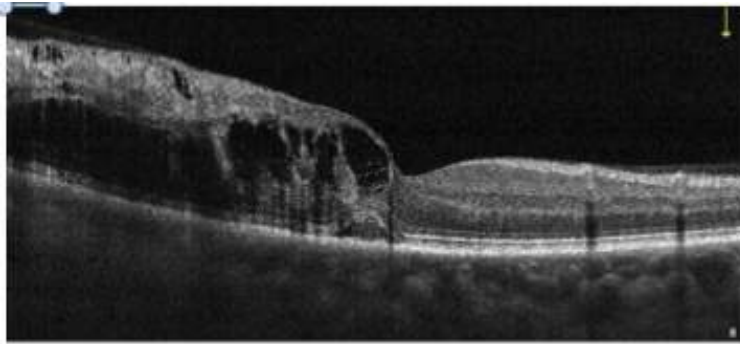


Non-proliferative diabetic retinopathy



OCTA Comparison to Fluorescein Angiography

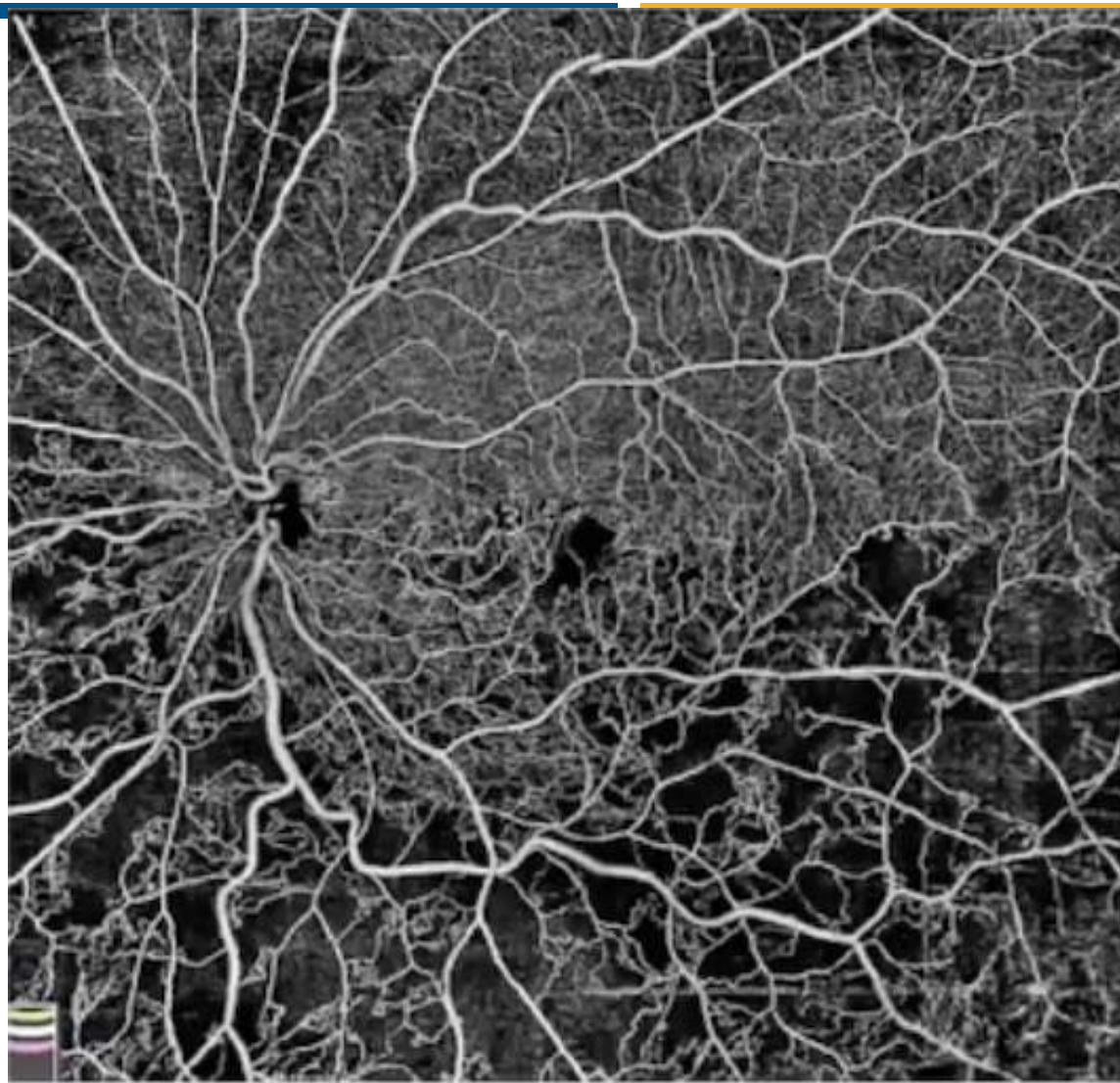
Branch Retinal Vein Occlusion



FAZ area in DCP positively correlated with a decrease in visual acuity; may be an indicator of visual prognosis



12x12 Scan: Increase image size; see the full extent of the occlusion



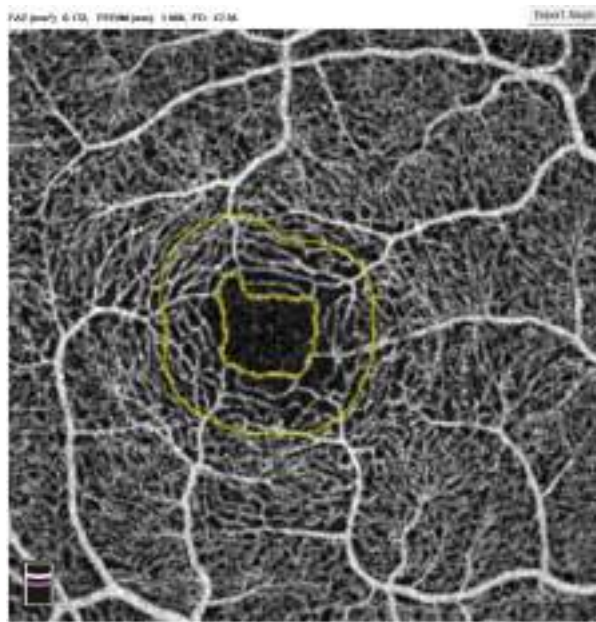
...and another!



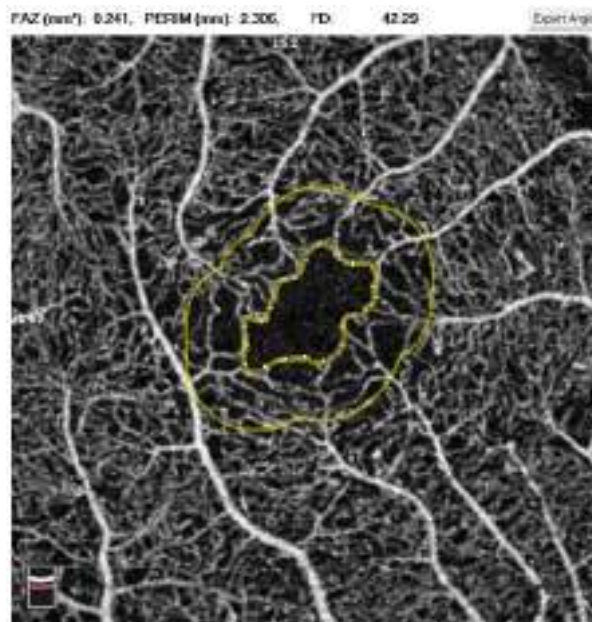
AngioAnalytics

Diabetic Eye Disease

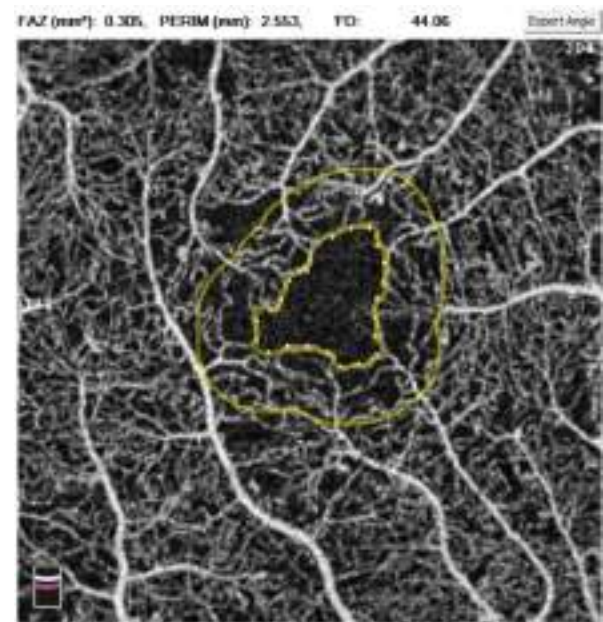
Foveal Avascular Zone in Normal & Diabetic Eyes



Normal Eye

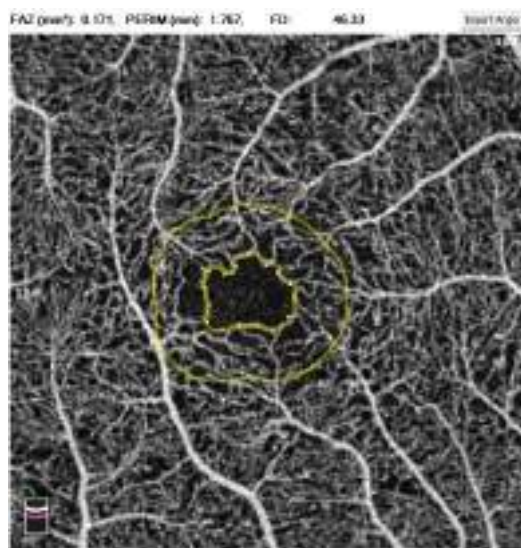


Diabetic Eye

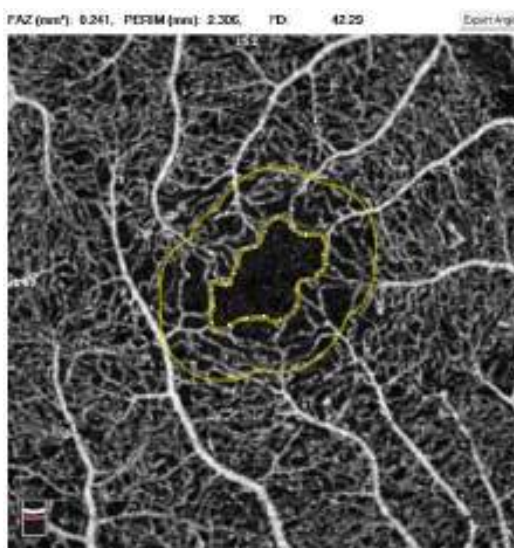


More Advanced Diabetic Eye

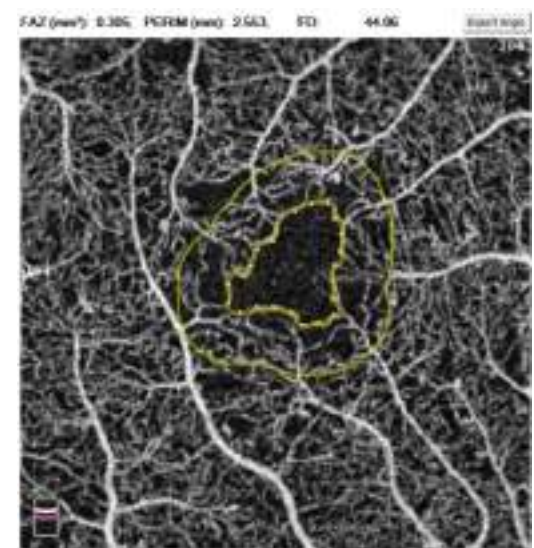
FAZ Change Analysis



2015



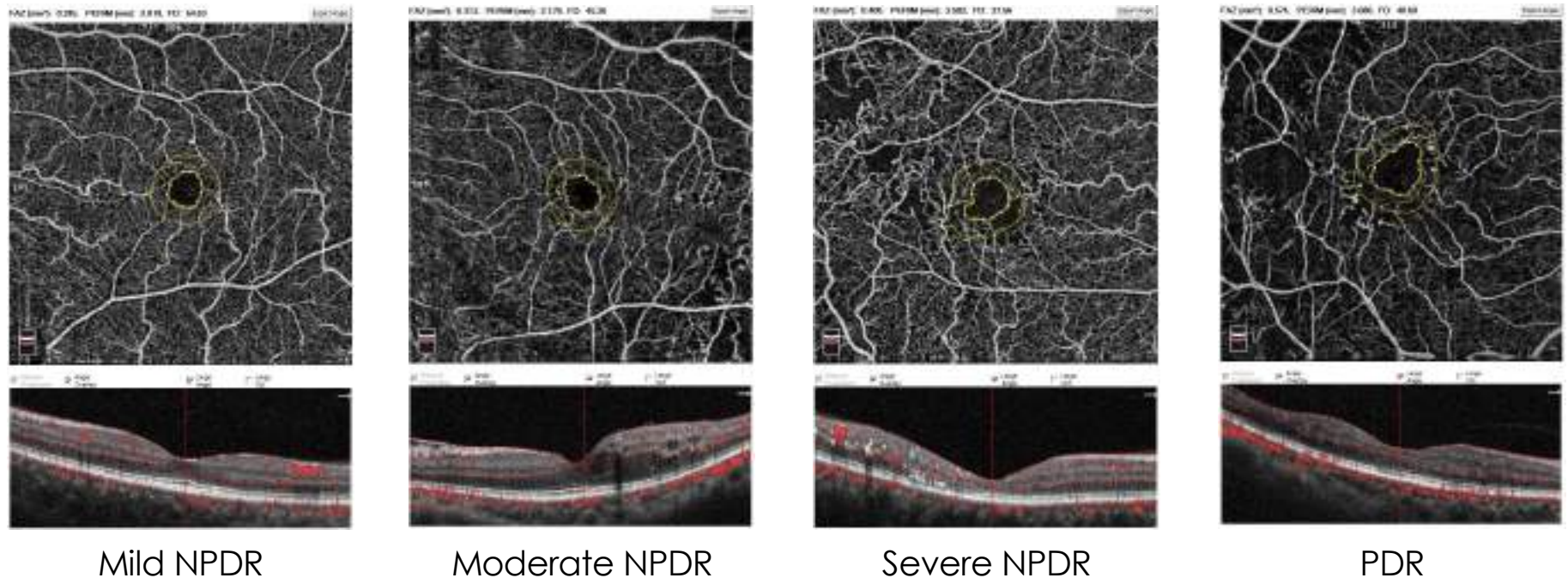
2016



2017

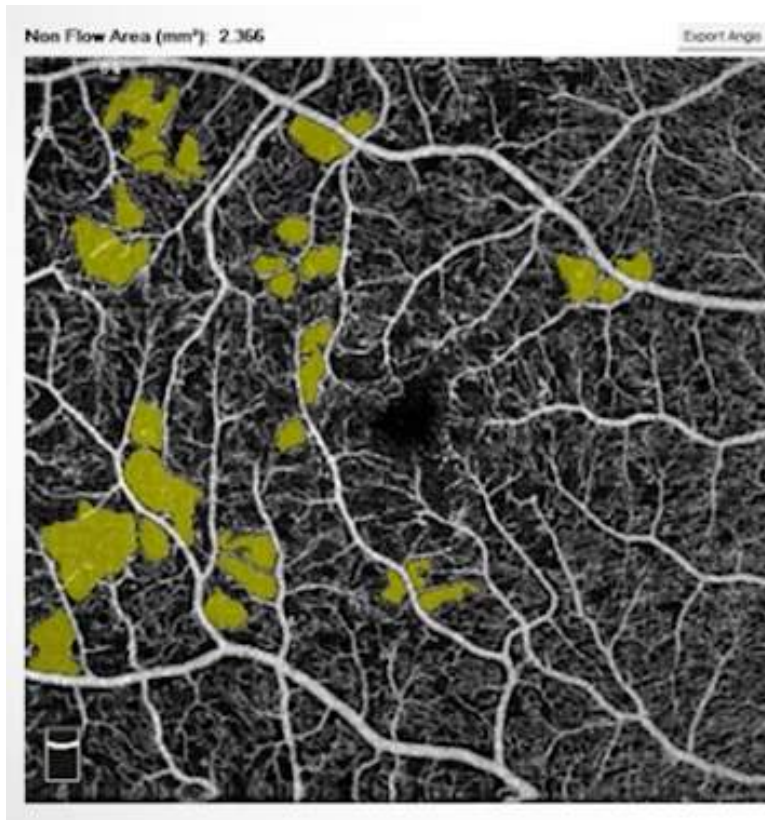
Aid in Disease Severity Assessment with FAZ Measurements

FAZ size and FAZ vessel density are correlated significantly with disease severity in DR.¹



1. Nesper PL, Roberts PK, Onishi AC, et al. Quantifying Microvascular Abnormalities With Increasing Severity of Diabetic Retinopathy Using Optical Coherence Tomography Angiography. Investigative Ophthalmology & Visual Science. 2017;58(6):BIO307-BIO315. doi:10.1167/iov.17-21787.

Non-Flow Area

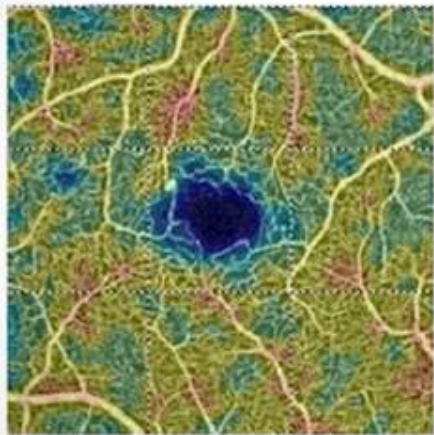


- Based on Superficial Capillary Plexus
- Click on area of interest

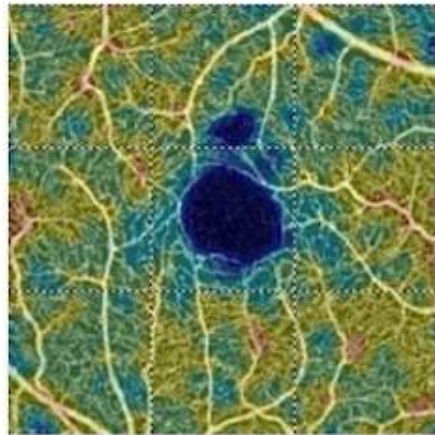
Measurement:

- Non-Flow Area: Total area of selected non-flow areas

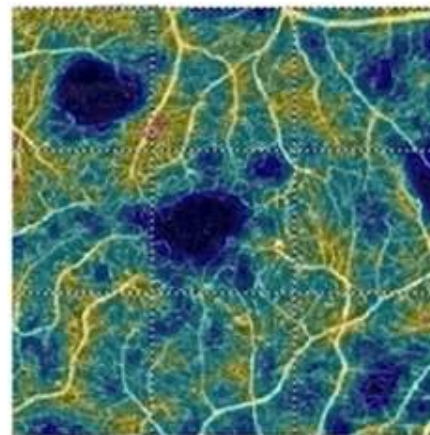
Vessel Density



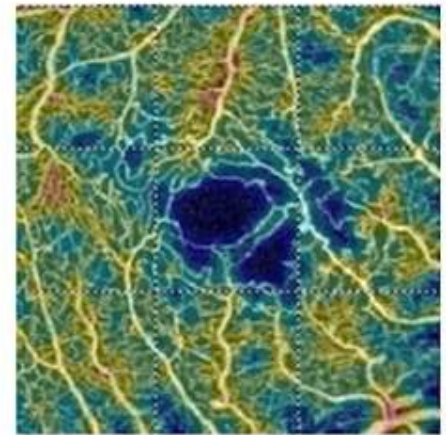
Mild NPDR
56.2%



Moderate NPDR
51.7%



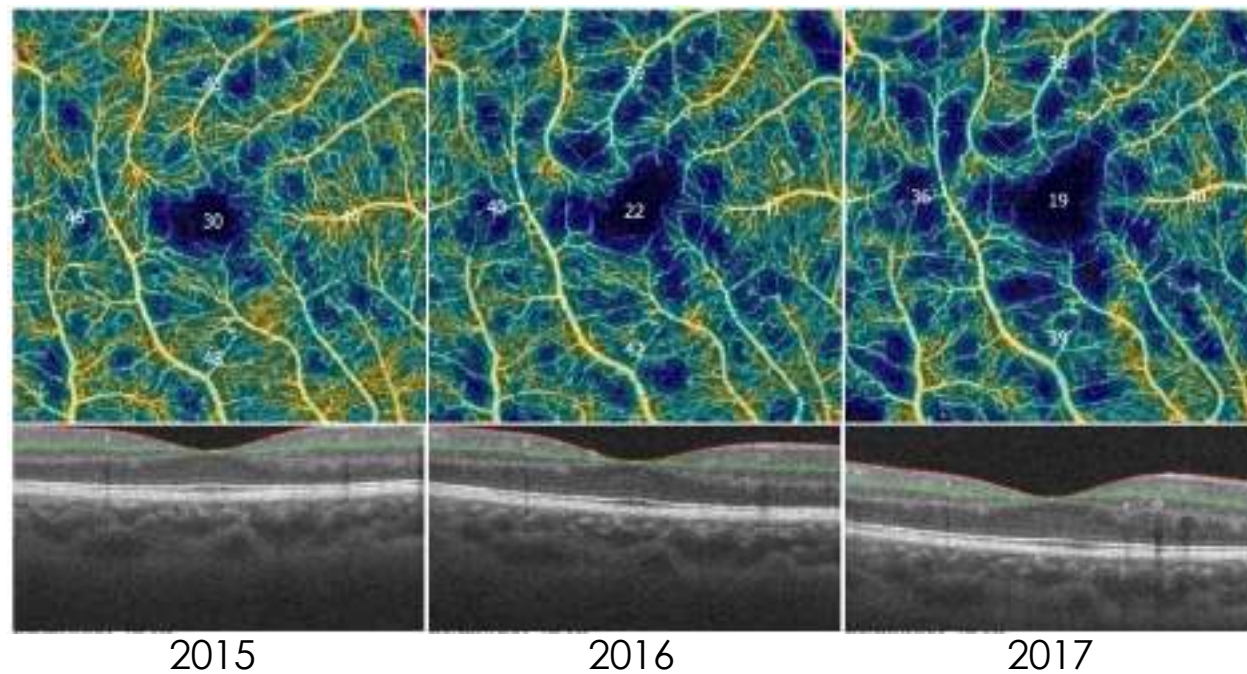
Severe NPDR
41.6%



PDR
47.2%

Assess Disease Progression with Multi-scan View

Vessel Density Decreases Significantly with Disease Severity⁴



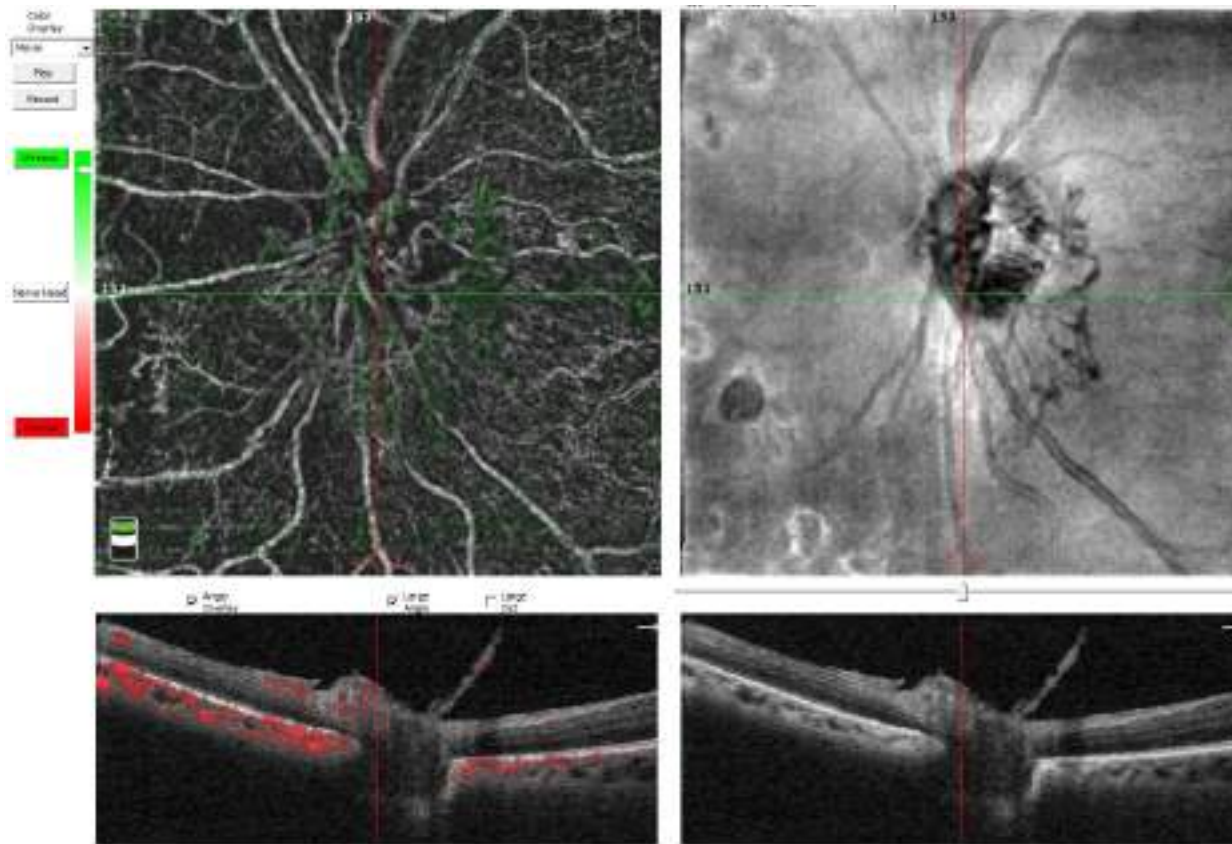
4. Nesper PL, Roberts PK, Onishi AC, et al. Quantifying Microvascular Abnormalities With Increasing Severity of Diabetic Retinopathy Using Optical Coherence Tomography Angiography. *Investigative Ophthalmology & Visual Science*. 2017;58(6):BIO307-BIO315. doi:10.1167/iov.17-21787.

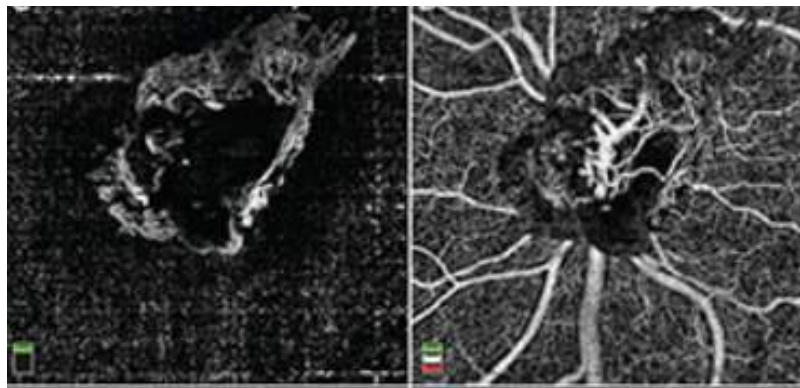
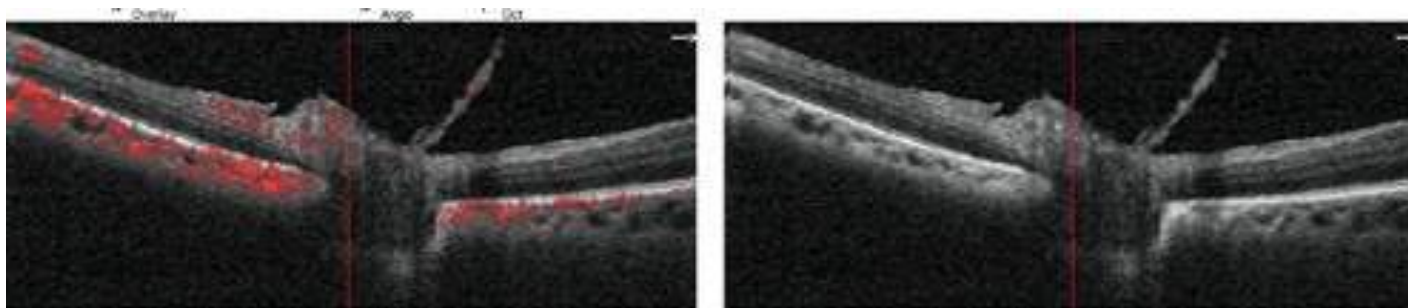
Meet Juan: A 67-year-old Hispanic male (14 years DM)



"The vision in my left eye is
"weird" x 2 months!!

Missed last 3 annual exams

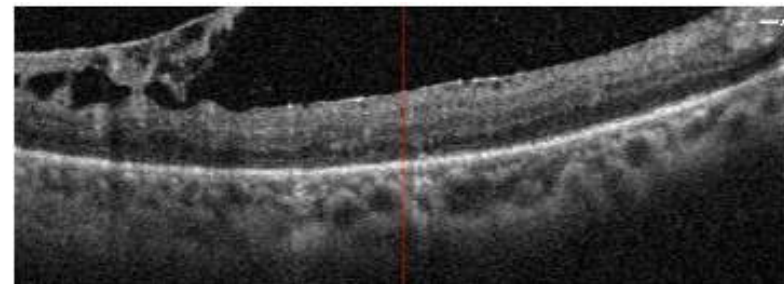
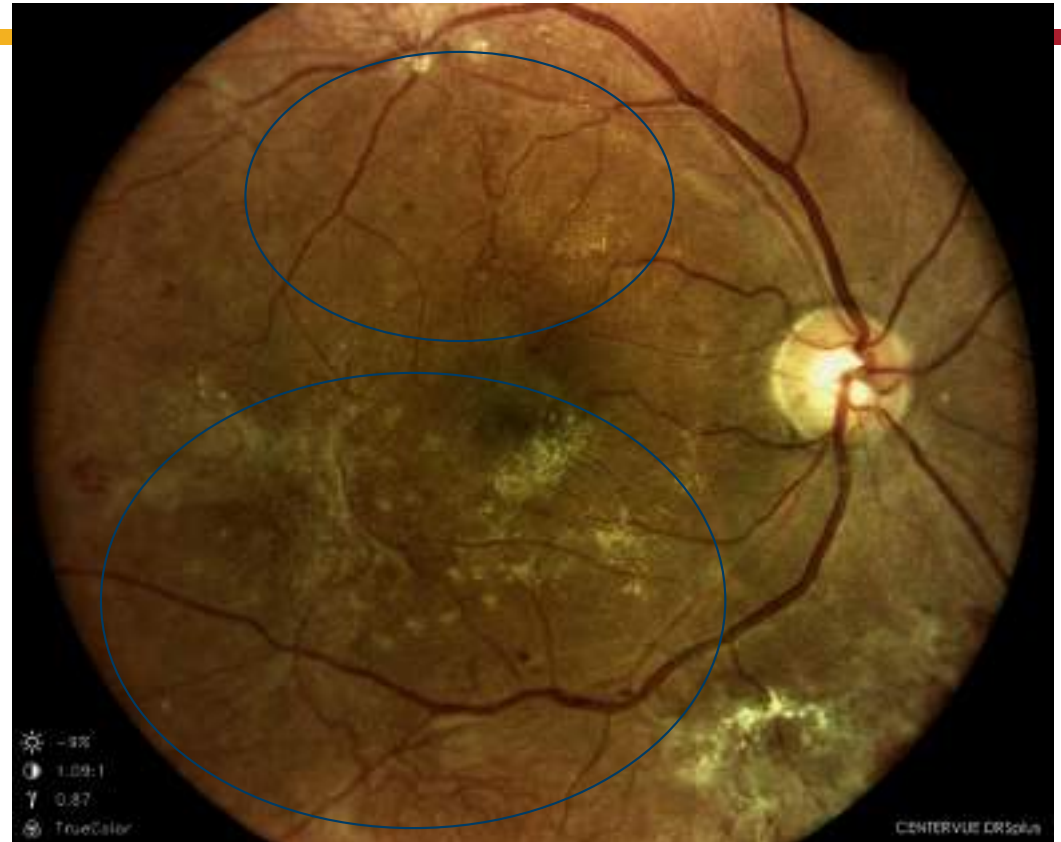
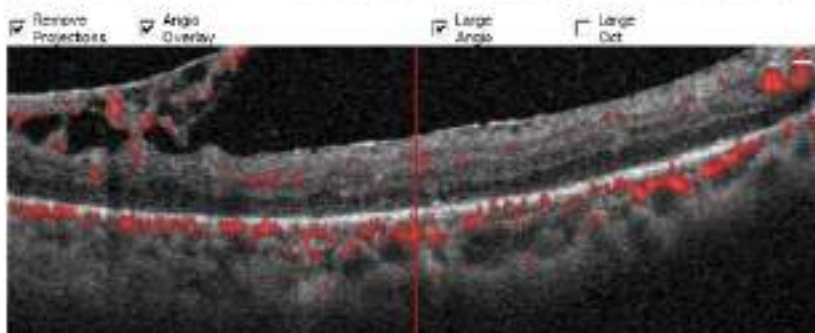
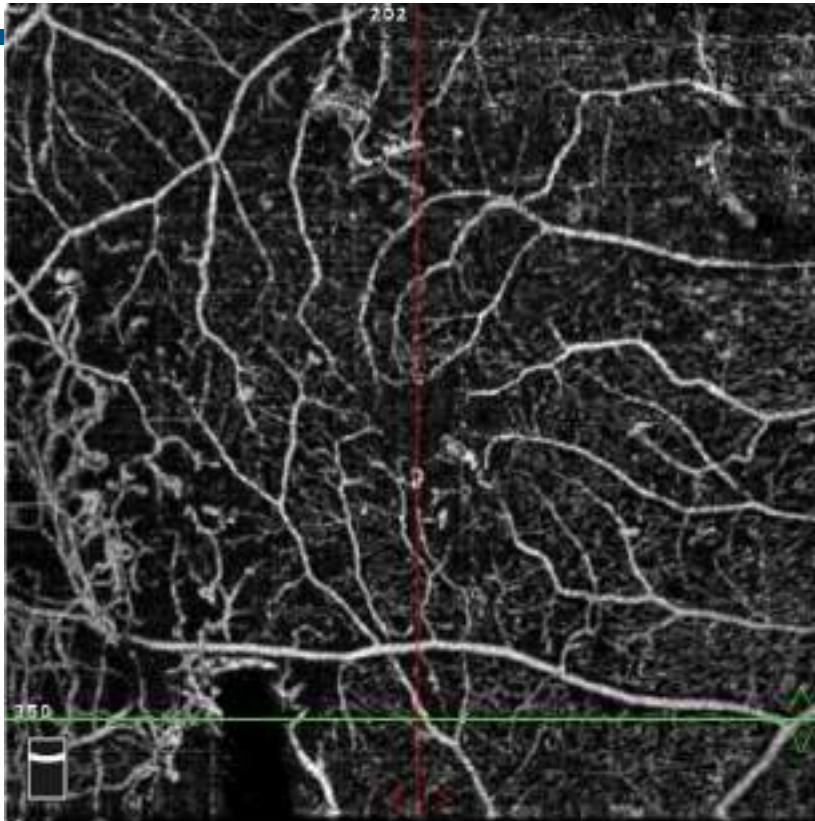


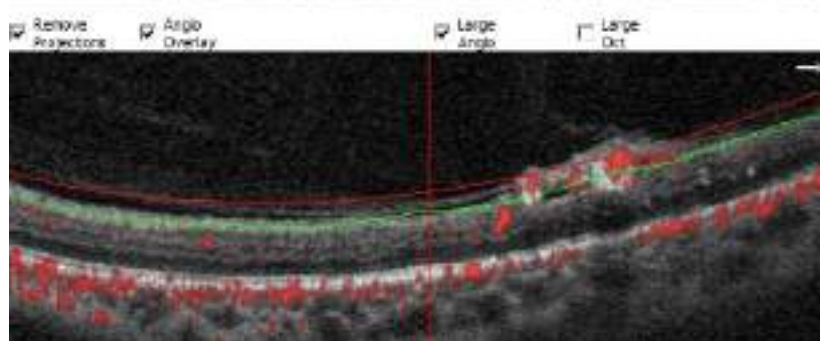
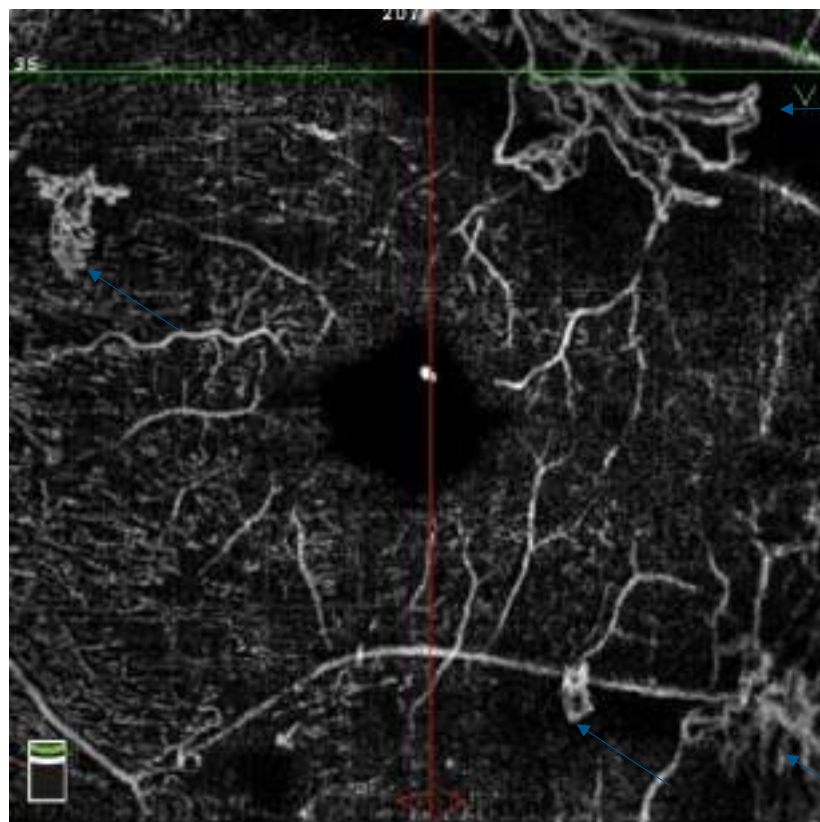


Position the scan at the
vitreoretinal interface

62-year-old Indian Male; DM2 x 20 years; “High BS levels”

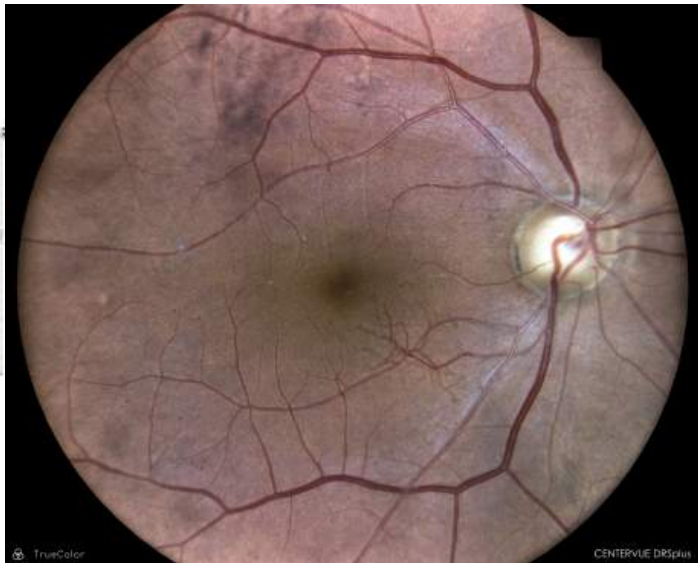
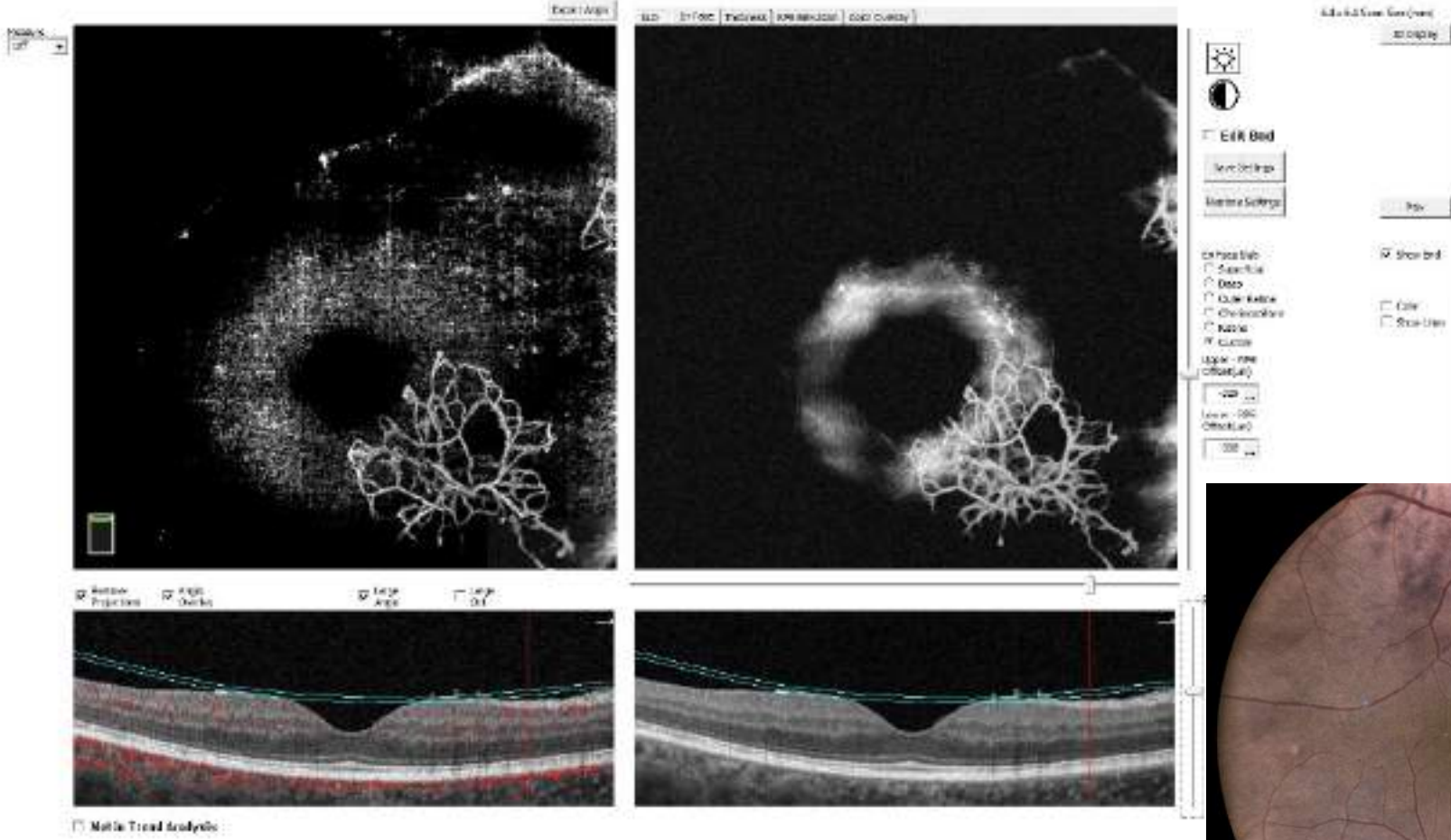






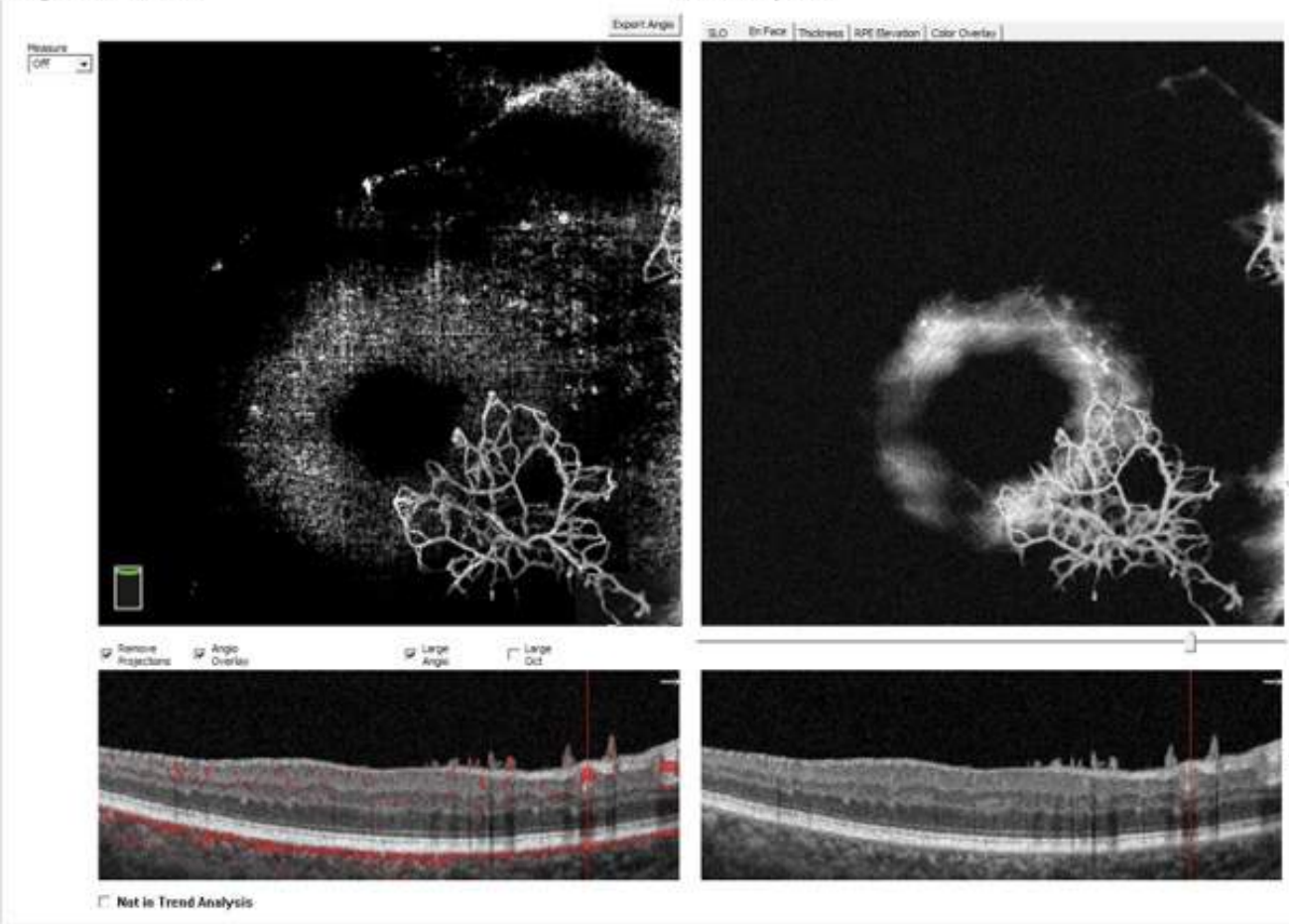
And yet another.... At fast glance, doesn't look too bad!! But does it???





AngioVue Retina

Scan Quality 9/10



Right / OD

6.4 x 6.4 Scan Size (mm)

3D Display

Edit Angio

Save Settings

Restore Settings

Plan

Show Angio

Color

Show Lines

En Face Slab

Superficial

Deep

Outer Retina

Choriocapillaris

Retina

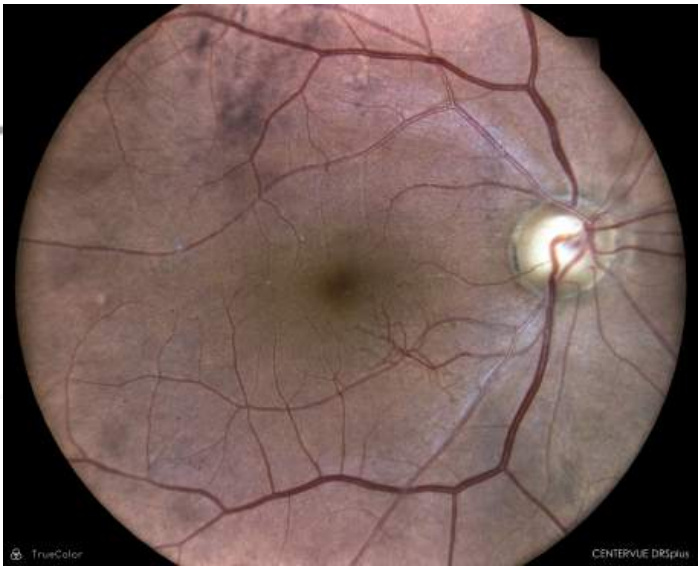
Custom

Upper - RPE Offset(um)

-320

Lower - RPE Offset(um)

-320



AngioVue Retina

Scan Quality 9/10

Right / OD

Color Overlay

Move

Play

Record

Vitreous

Superficial

Deep

Outer

Choroid

Export / Angio

SLO

En Face

Thickness

RPE Elevation

Color Overlay

6.4 x 6.4 Scan Size (mm)

3D Display

Play

Show Grid

Show Lines

Auto Zoom

Not in Trend Analysis

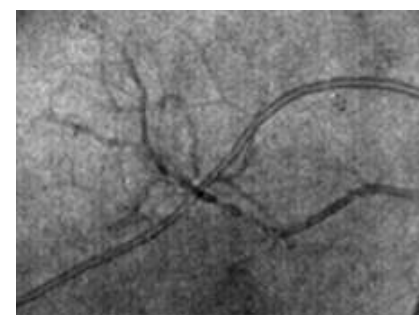
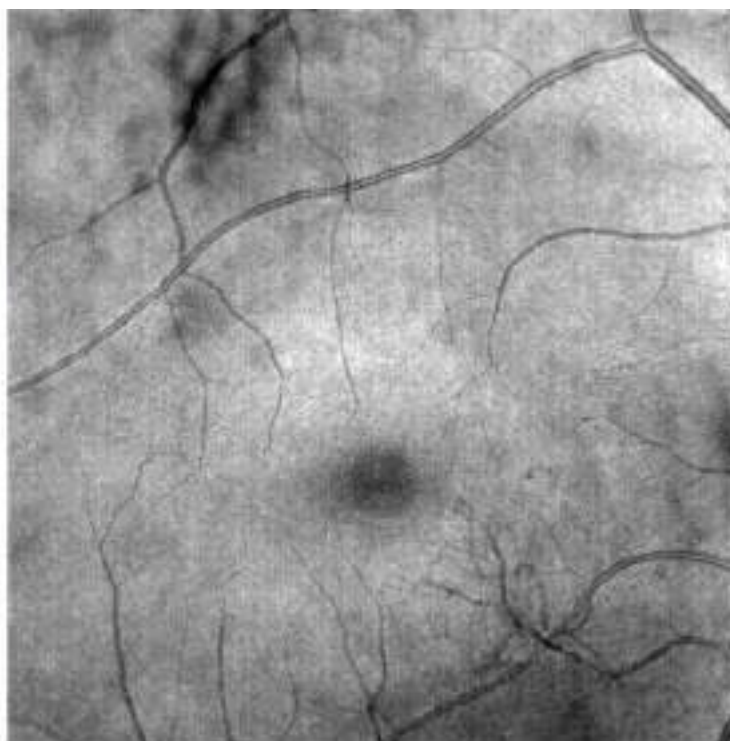
En Face

Angio Overlay

Large Angio

Large Oct

AngioVue

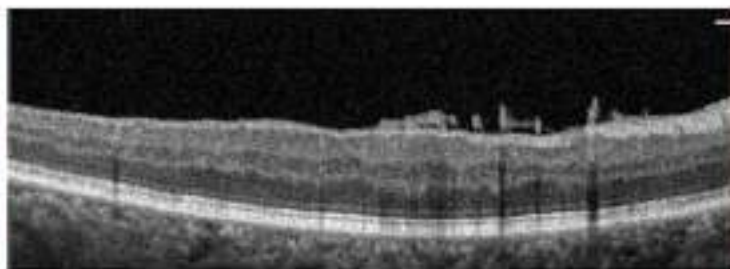
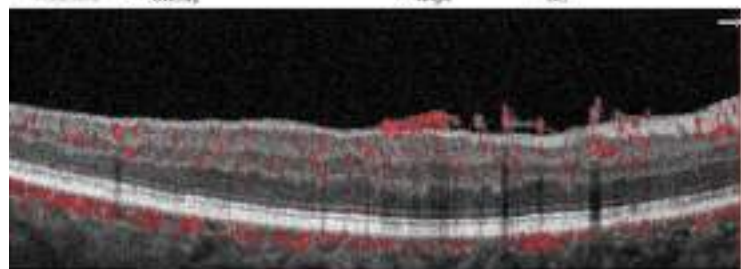


☒ Fundus
3/14/2022

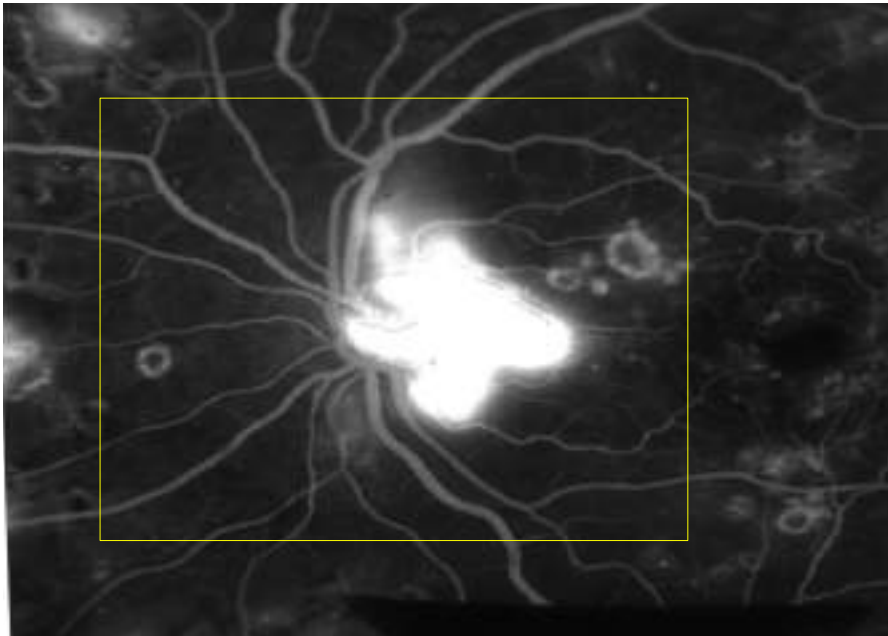
☒ Angio
Overlay

☒ Large
Angio

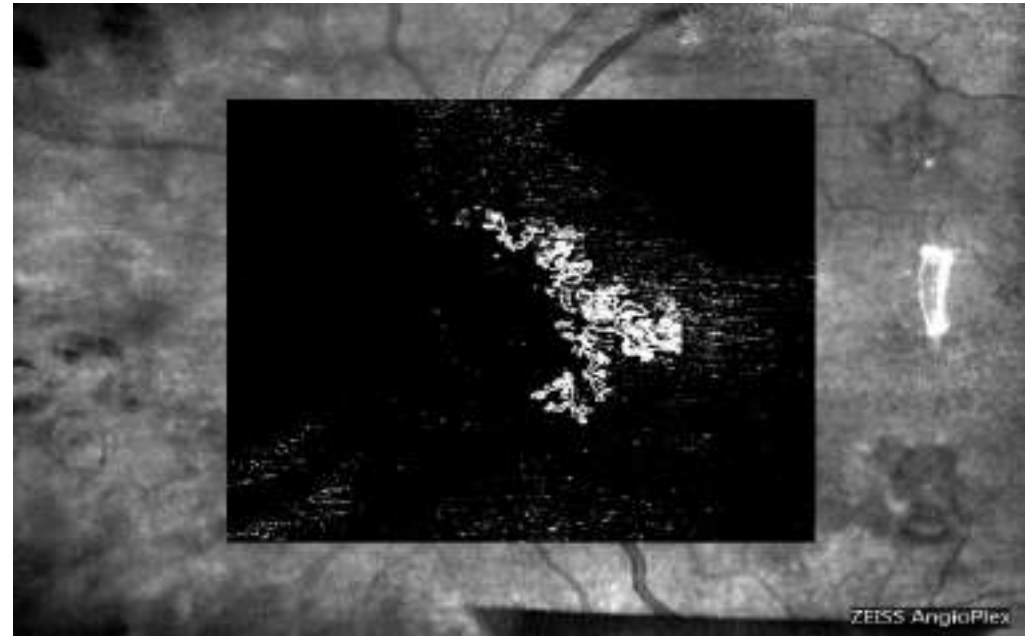
☐ Large
Oct



PDR



1:48 FA

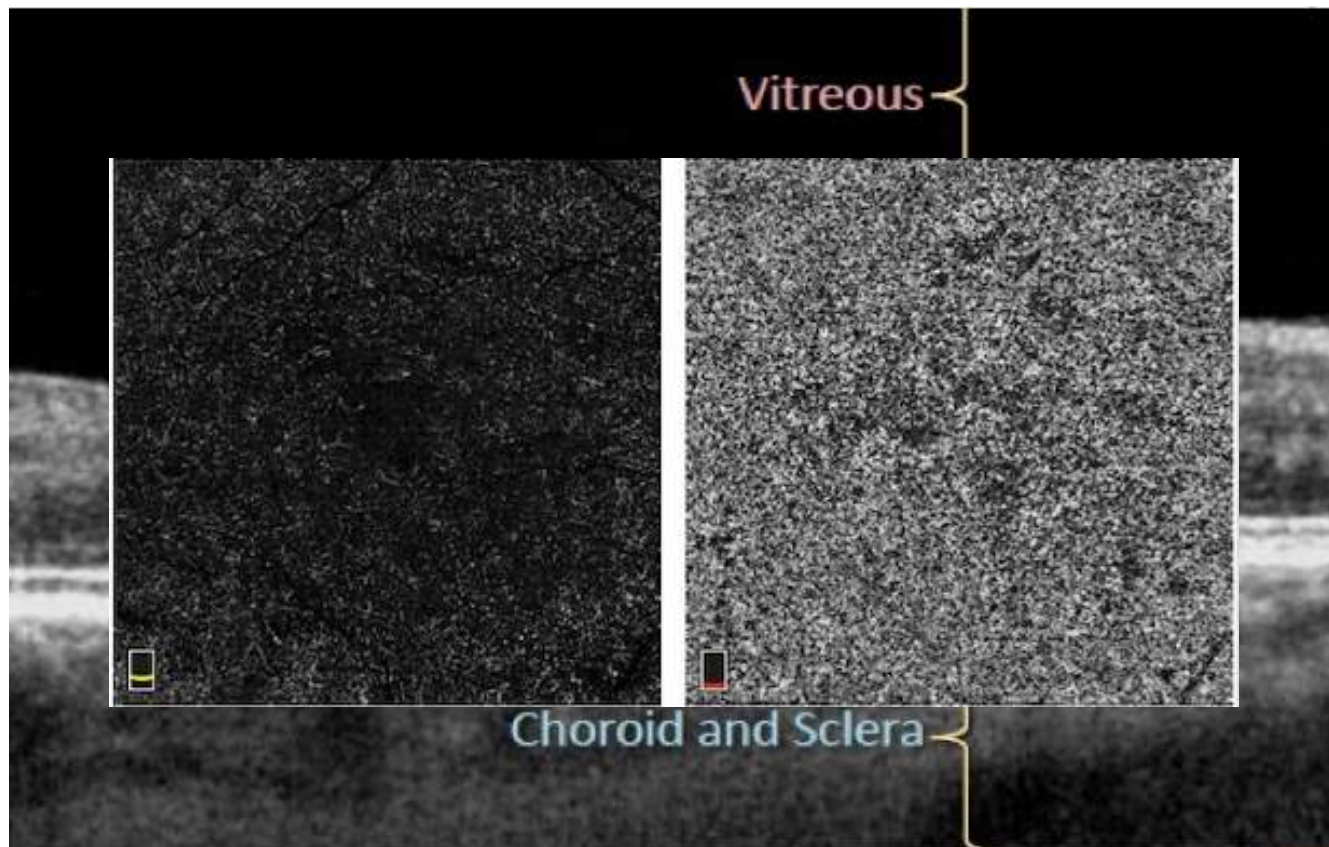


OCTA



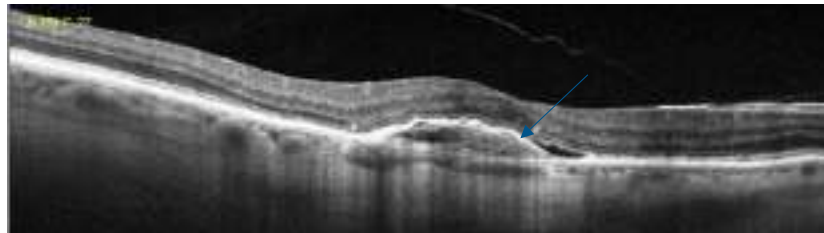
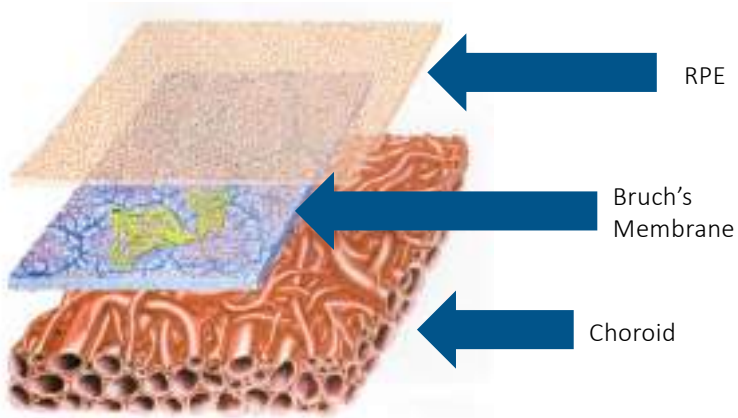
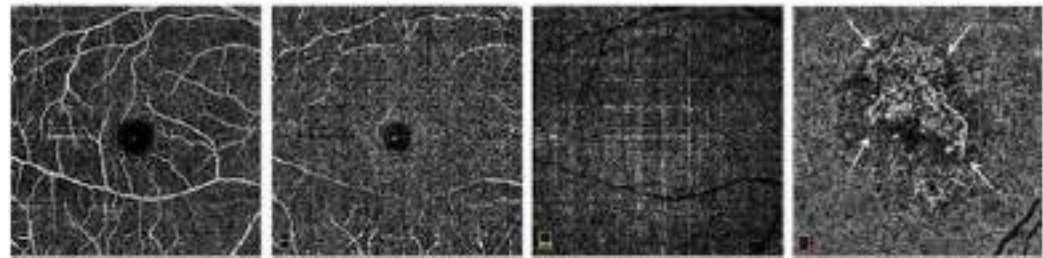
Apply This Clinically

Outer Retinal Disease: Choroidal Neovascular Membrane



Type 1 “Occult” CNV

- New vessels develop in the choroid
- New vessels located **BELOW RPE** and **ABOVE** Bruch’s membrane



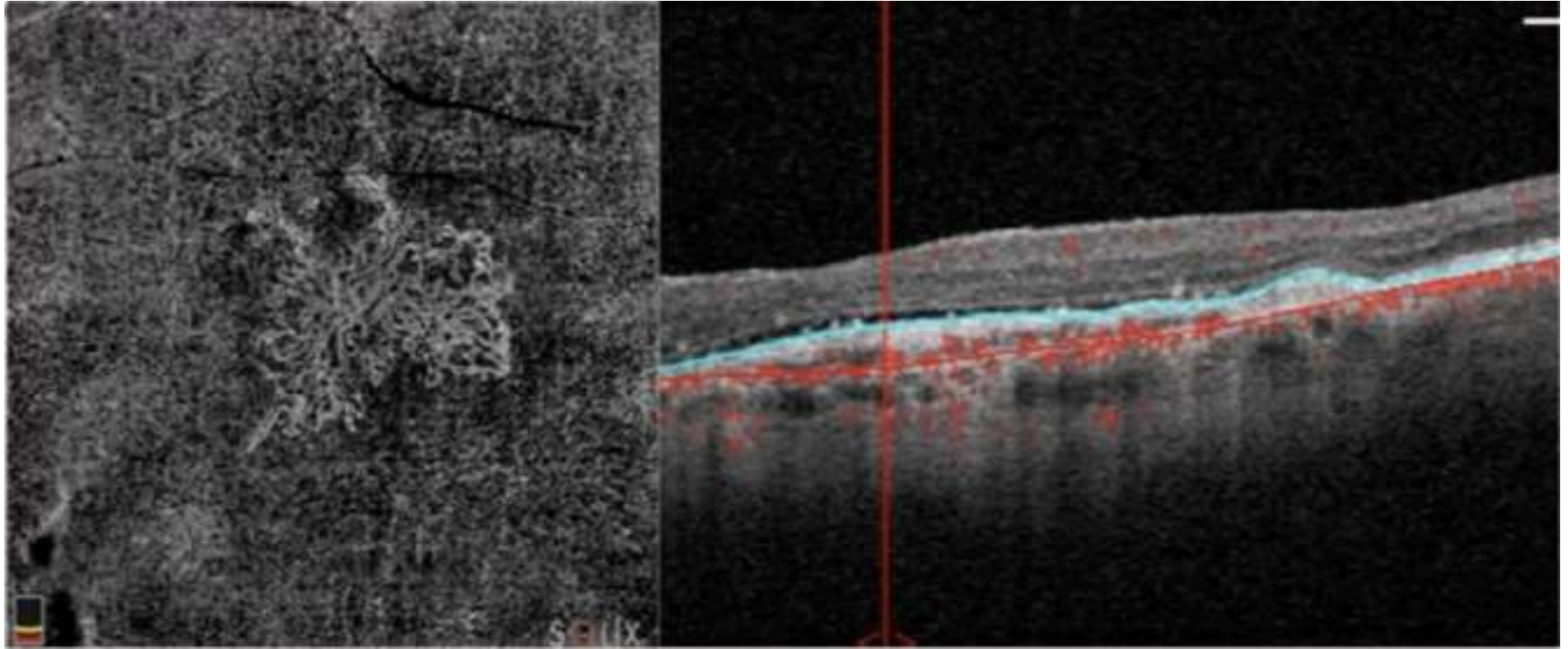
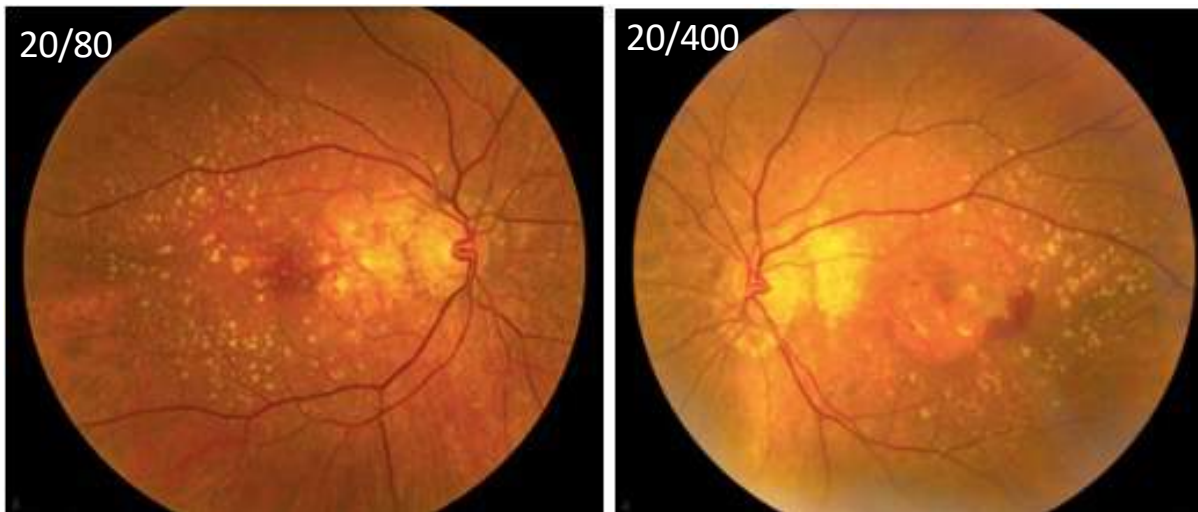
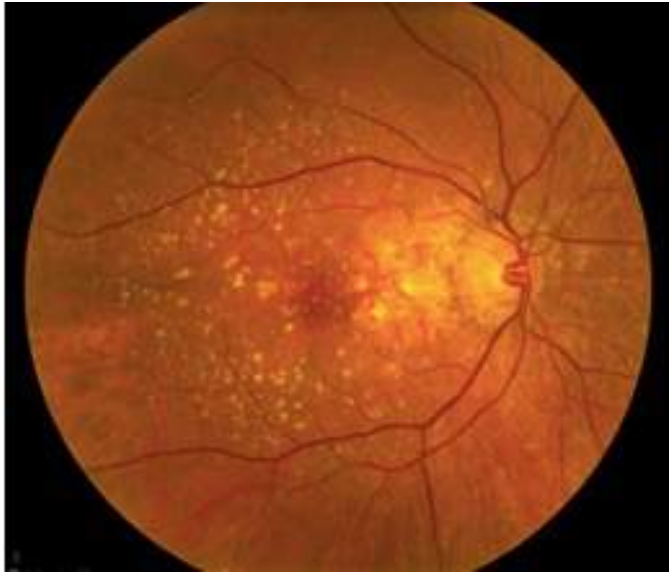


Image courtesy of Adil El Maftouhi, Centre Rabelais, Lyon, France

65 y/o Caucasian Male

- History of Dry AMD, Recent decrease in vision OS



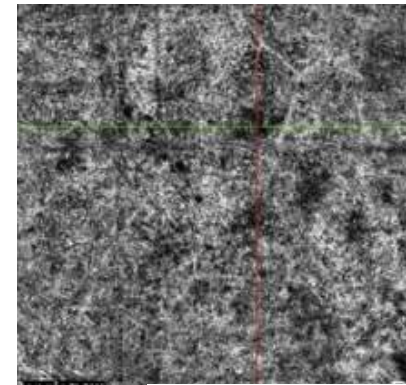
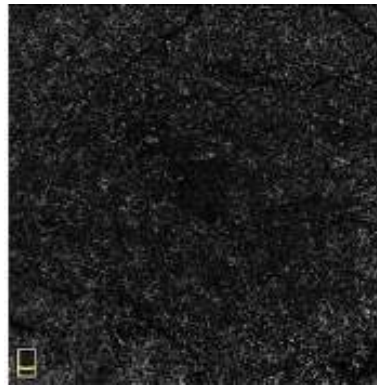
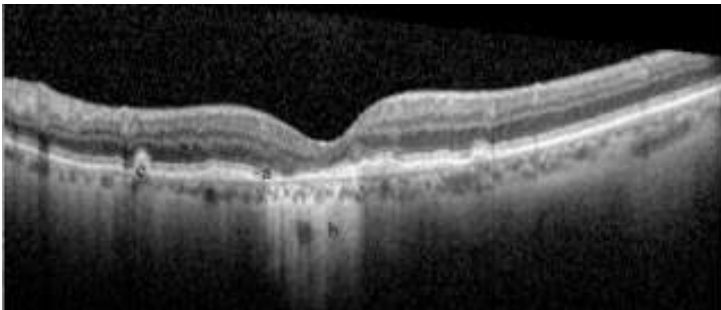


OD

Multiple, large drusen

Geographic atrophy

But.... NO signs of CNVM



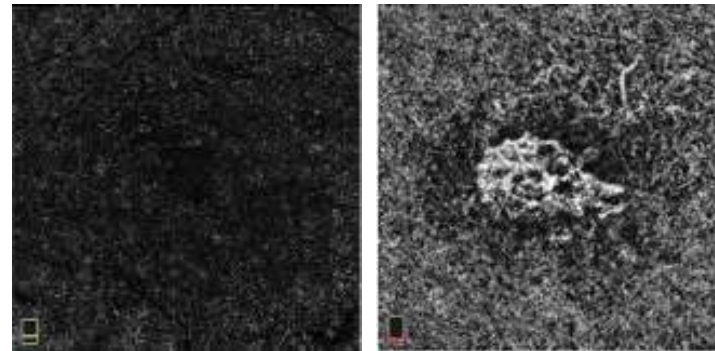
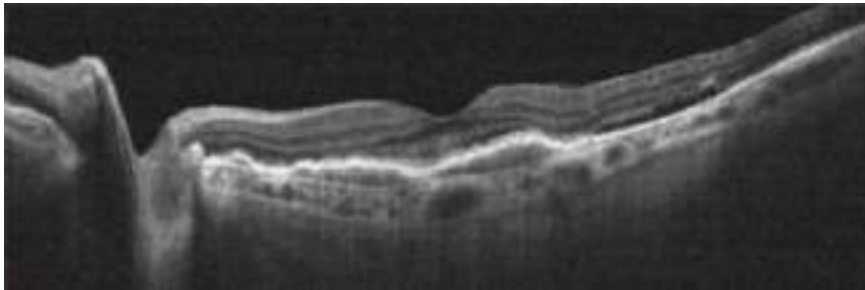


OS

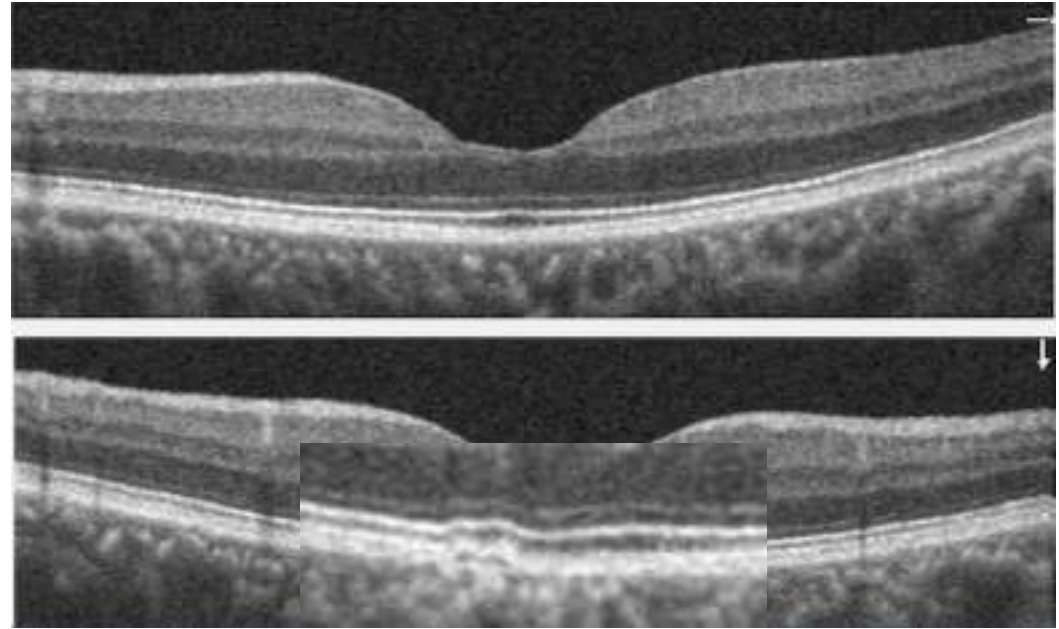
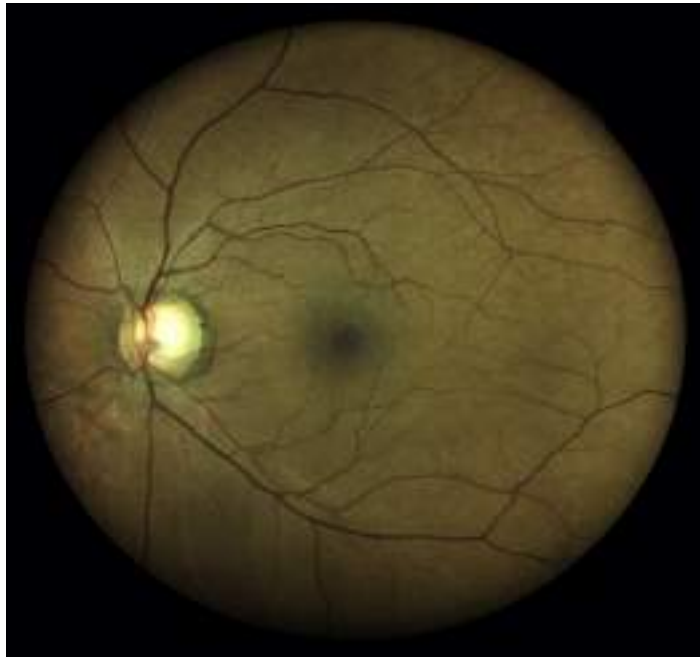
Multiple, large drusen

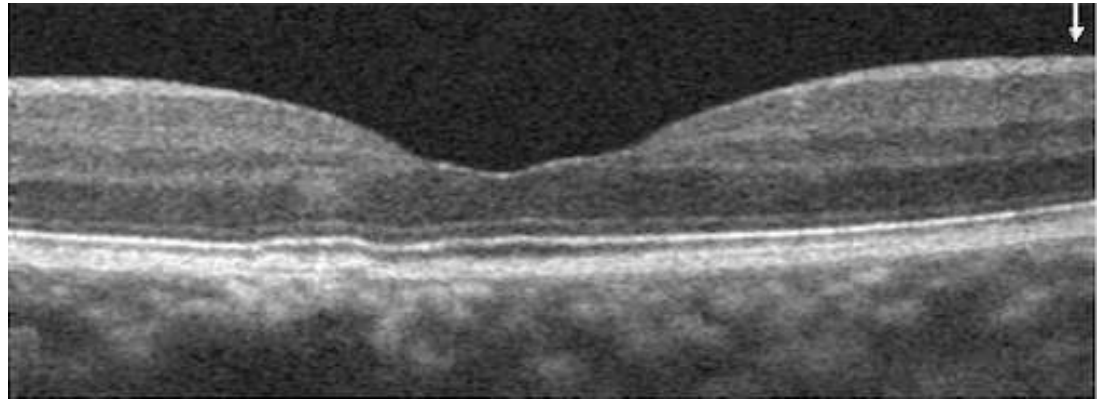
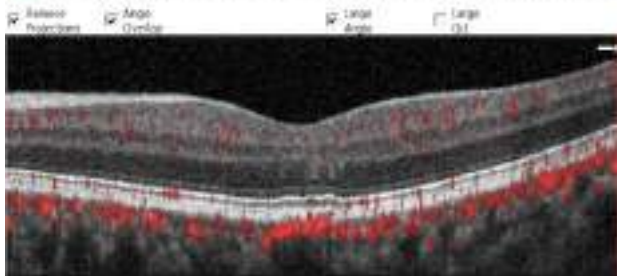
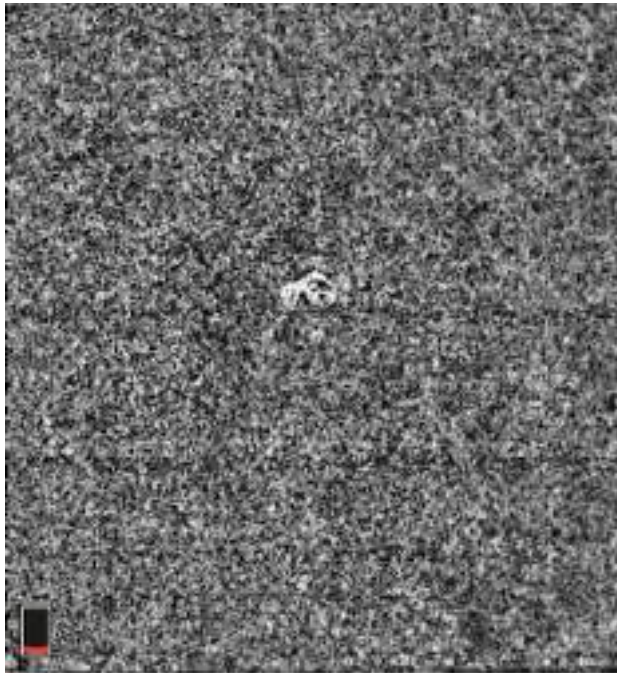
Geographic atrophy

*But.... Larger area of atrophy
and subretinal hemorrhage*

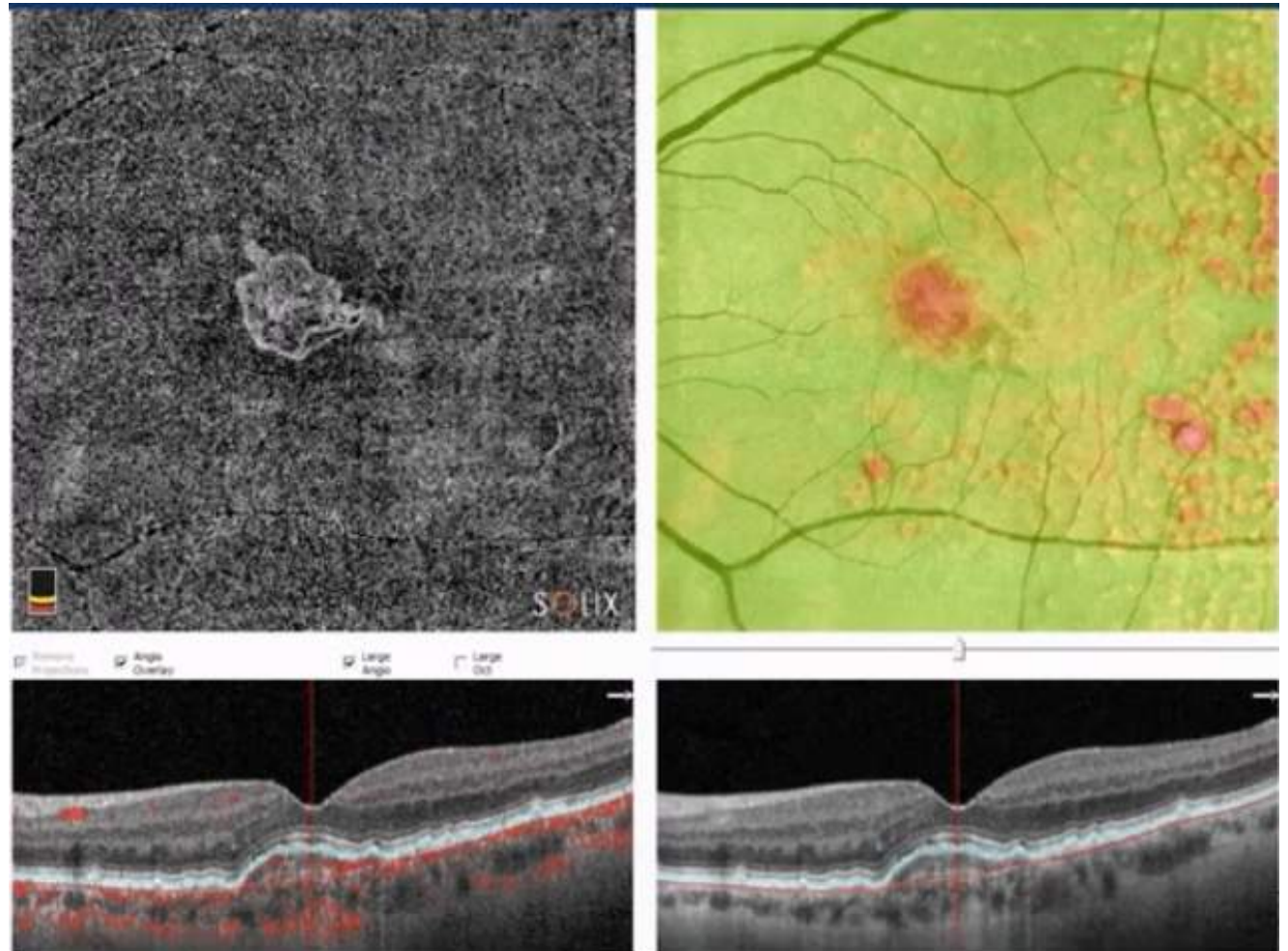


63 y/o African American Male



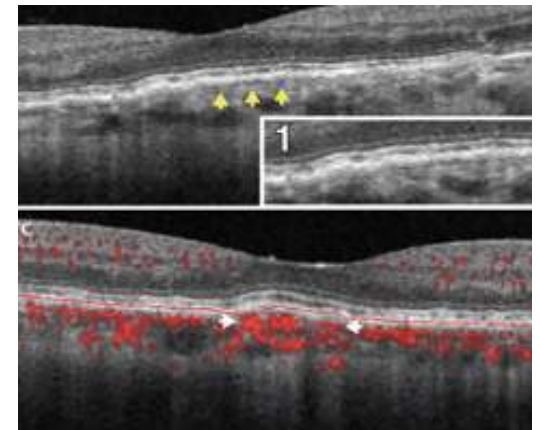
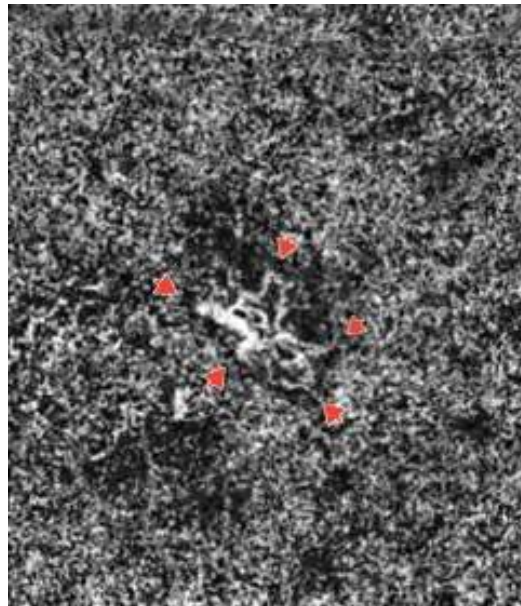


...And
Another!!



How do we define non-exudative occult CNV?

- No leakage on OCT (blood/fluid etc.)
- No visible exudation on OCT
- Distinct neovascular frond on OCTA
- No leakage on FA



Non-exudative Occult CNVM: Clinical Pearls

In eyes with NEON, progression to frank CNVM is more common than progression to intermediate AMD, and therefore this risk warrants closer follow-up.

› *Ophthalmol Retina*. 2019 Aug;3(8):629-636. doi: 10.1016/j.oret.2019.03.006. Epub 2019 Mar 21.

Detection of Nonexudative Choroidal Neovascularization and Progression to Exudative Choroidal Neovascularization Using OCT Angiography

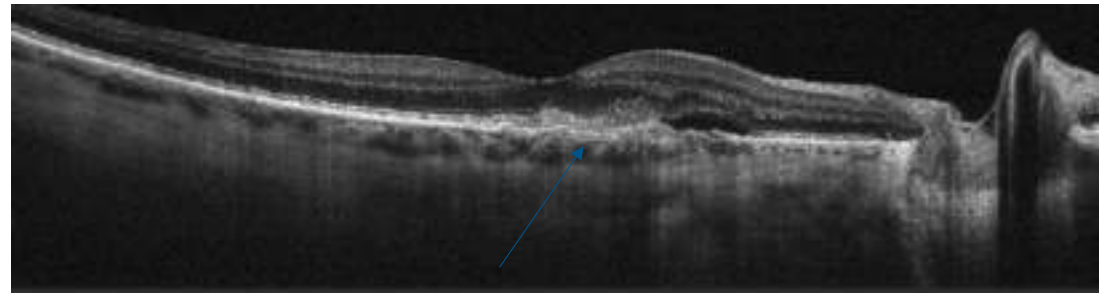
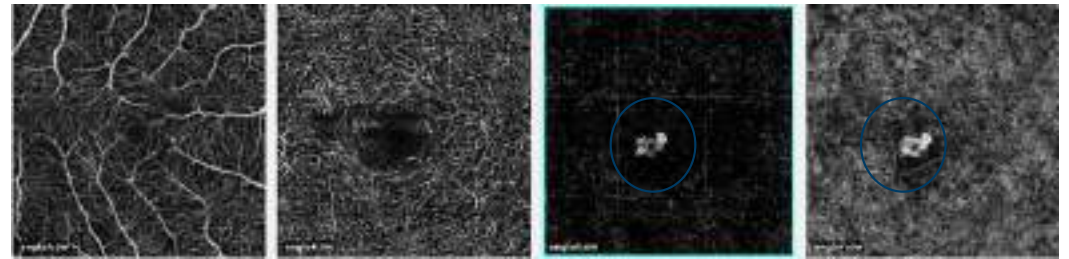
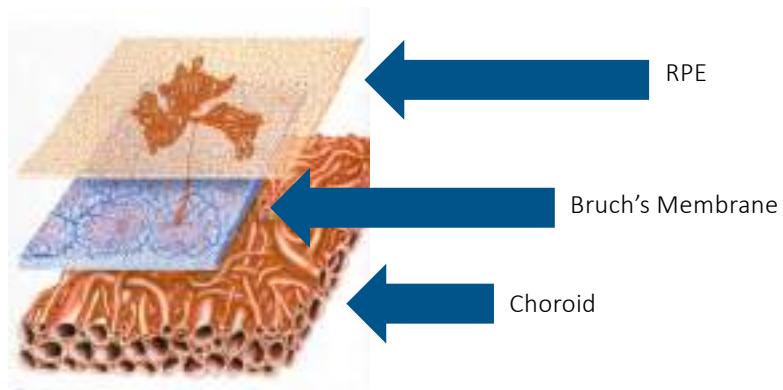
Steven T Bailey ¹, Omkar Thawani ², Jie Wang ², Ahmed M Haggag ², Xinbo Zhang ², Christina J Flaxel ², Andreas K Lauer ³, Thomas S Hwang ², Phoebe Lin ², David Huang ³, Yali Jia ²

Non-exudative Occult CNVM: Clinical Pearls

Nonexudative CNV frequently is detected by OCTA in the fellow eyes of those with exudative CNV. These lesions carry a high risk of exudation developing within the first year after detection and could benefit from close monitoring. The high risk of progression may justify prophylactic treatment; further studies are needed.

Type 2 “Classic” CNV

- New vessels develop in choroid
- New vessels located **ABOVE the RPE** and ABOVE Bruch's membrane

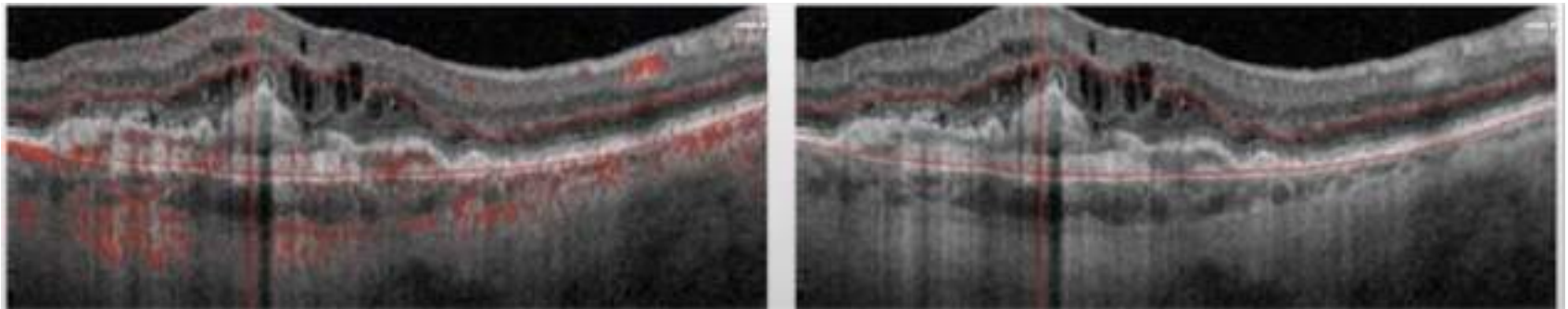


Meet Wendy: A 66-year-old Caucasian female

"I have a long-standing history of Macular Degeneration.... BUT.... My vision has gotten really bad in my right eye...."



OCT B-scans



AngioVue Retina

Scan Quality 7/10

Right / OD

5.4 x 5.4 Scan Size (mm)

3D Display



Edit Bnd

Restore Settings

Play

- En Face Slab
- ☐ Superficial
 - ☐ Deep
 - ☒ Outer Retina
 - ☐ Chorocapillaris
 - ☐ Retina
 - ☐ Custom

Show Bnd

Color

Show Lines

Upper - OPL
Offset(um)

0

Lower - RPE
Offset(um)

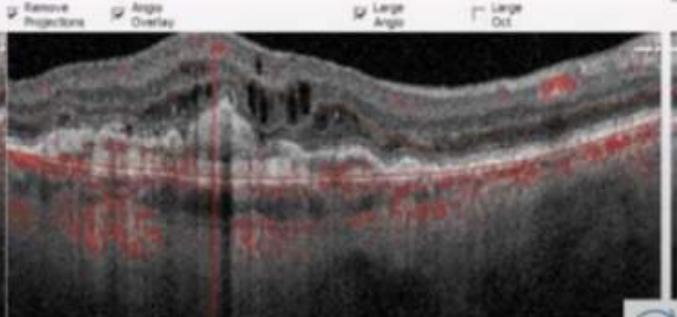
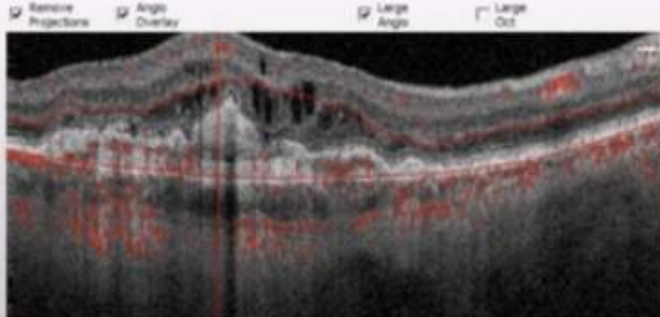
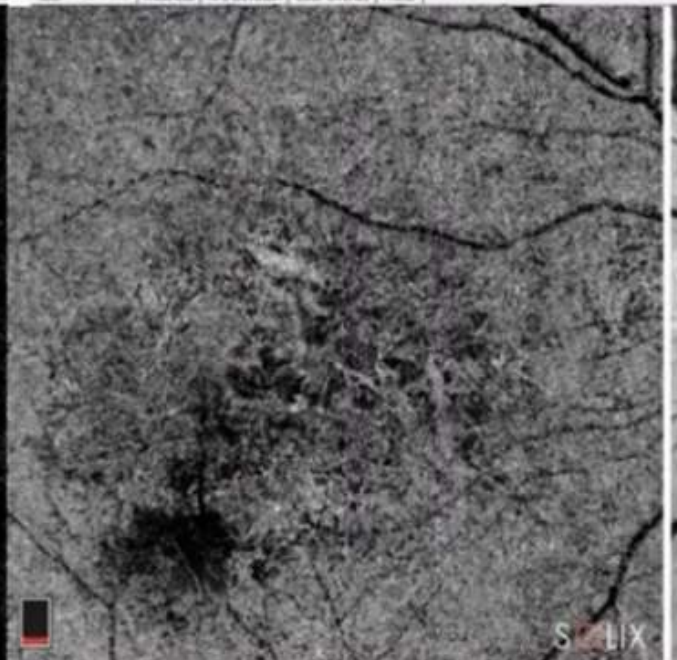
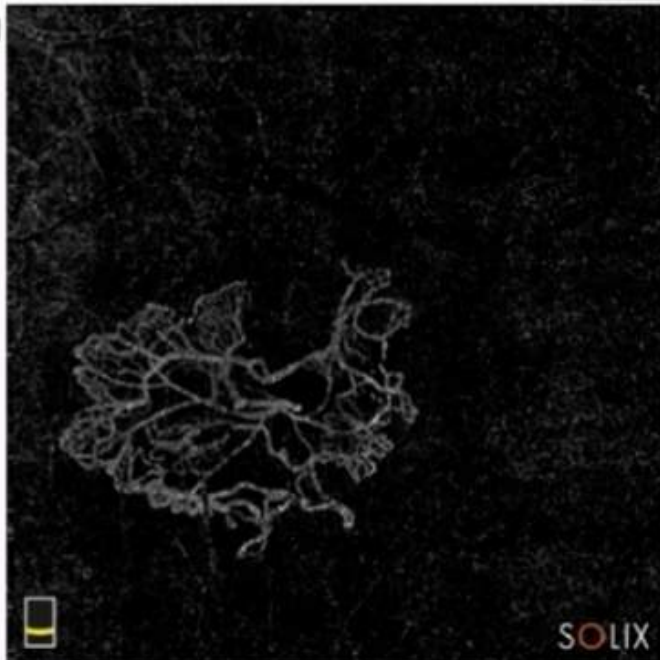
-9

Auto Zoom



Measure

OR

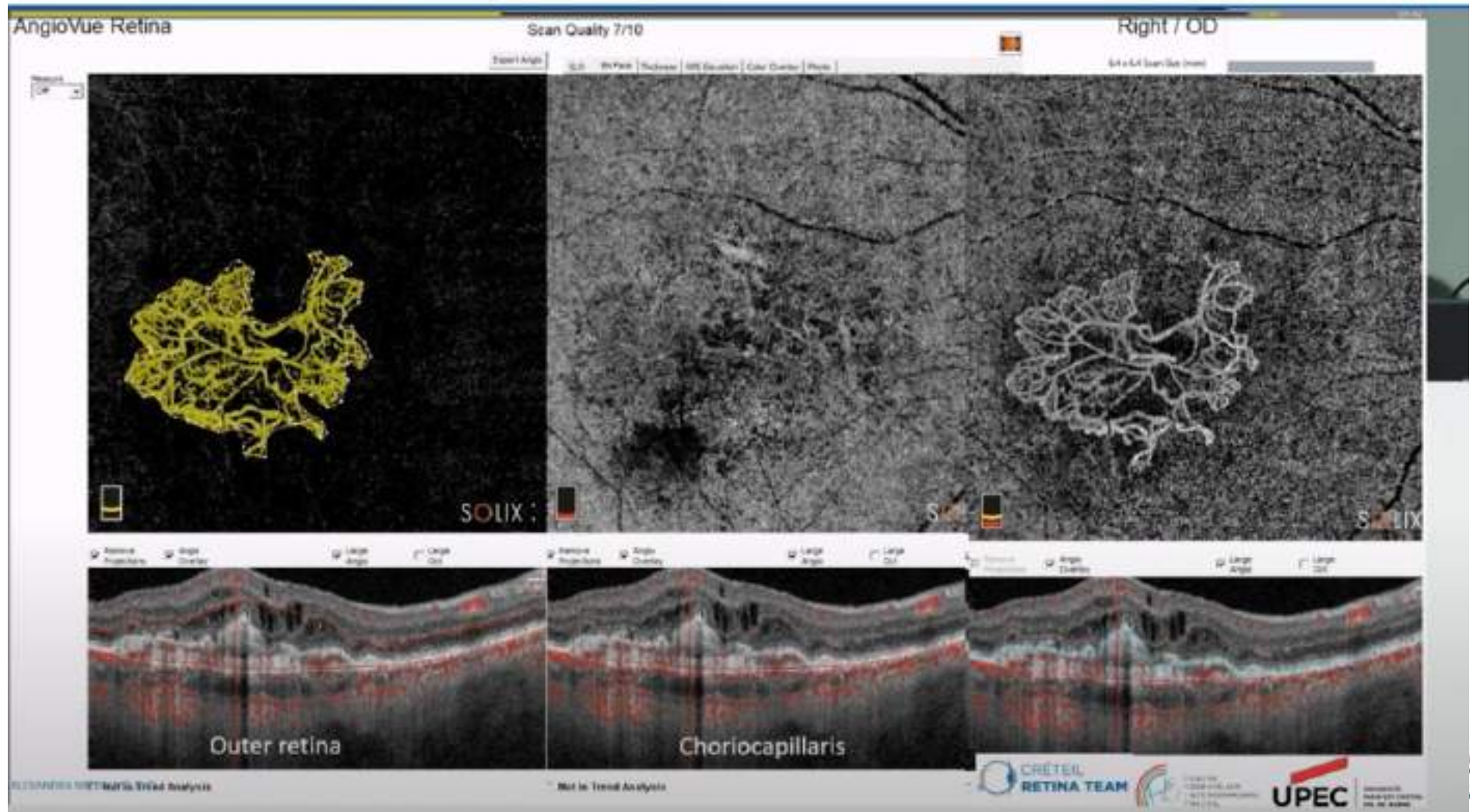




AngioAnalytics

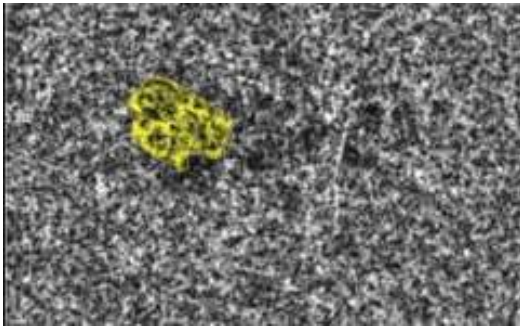
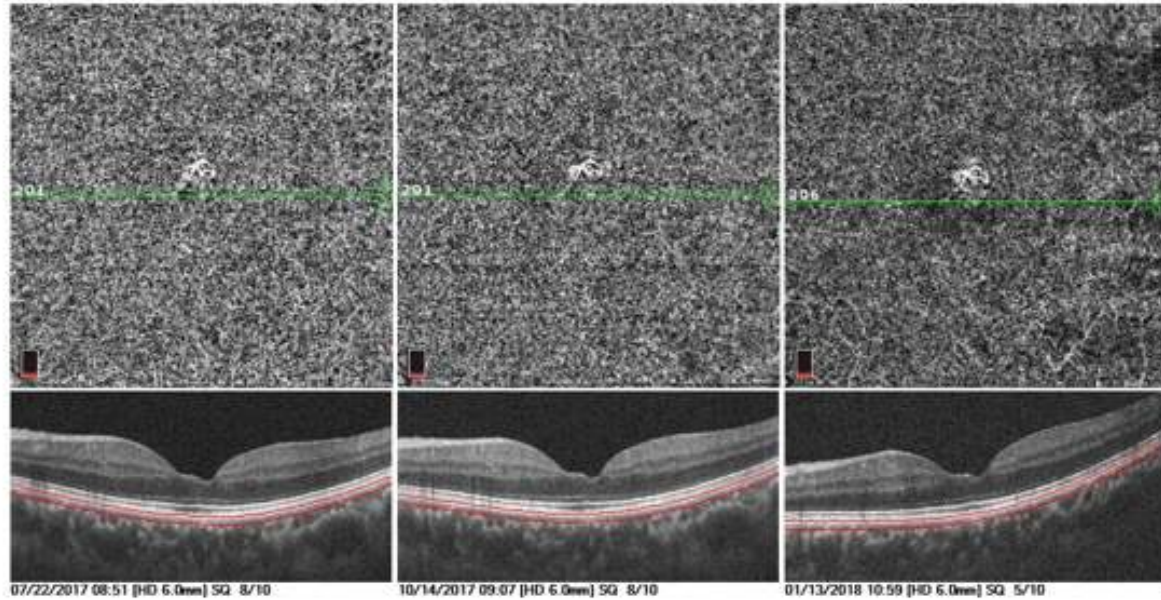
Choroidal Neovascular Membranes

“Flow Area”



AngioAnalytics: Trend Analysis

HD Angio Retina Multi Scans View



AngioAnalytics: CNV Multi Scan View for Follow-Up

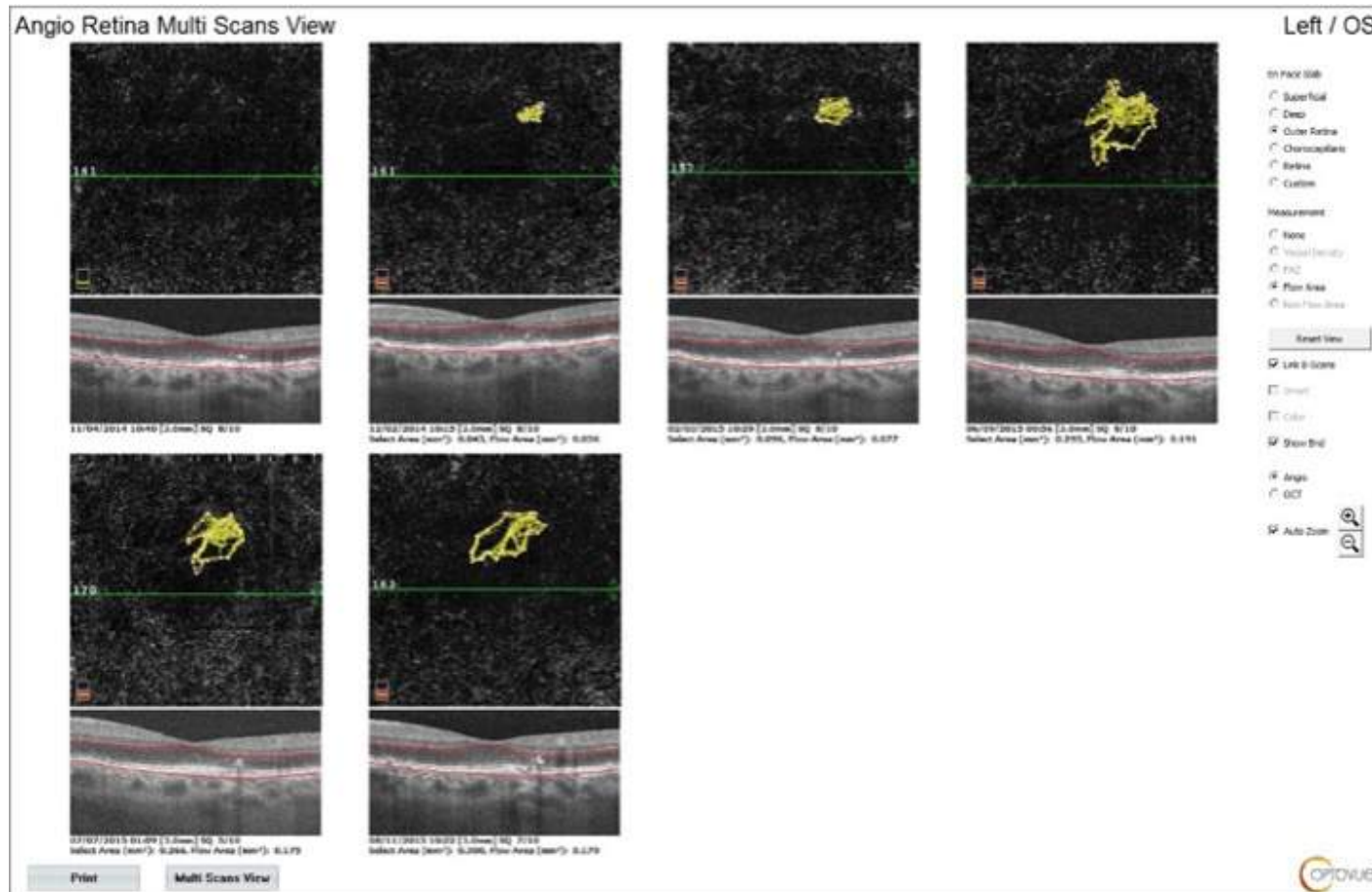
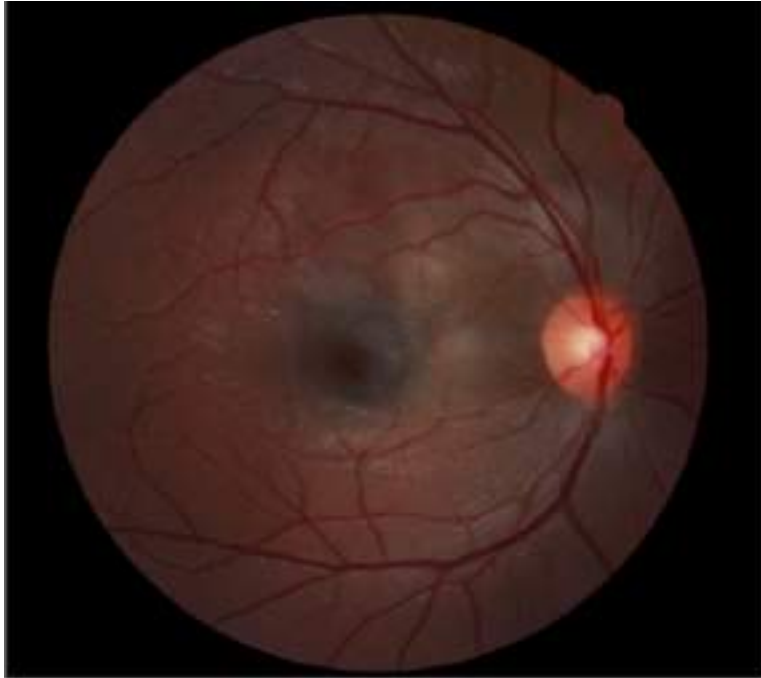


Image courtesy of Paul Tornambe, MD, FACS, Retina Consultants San Diego, La Jolla, California

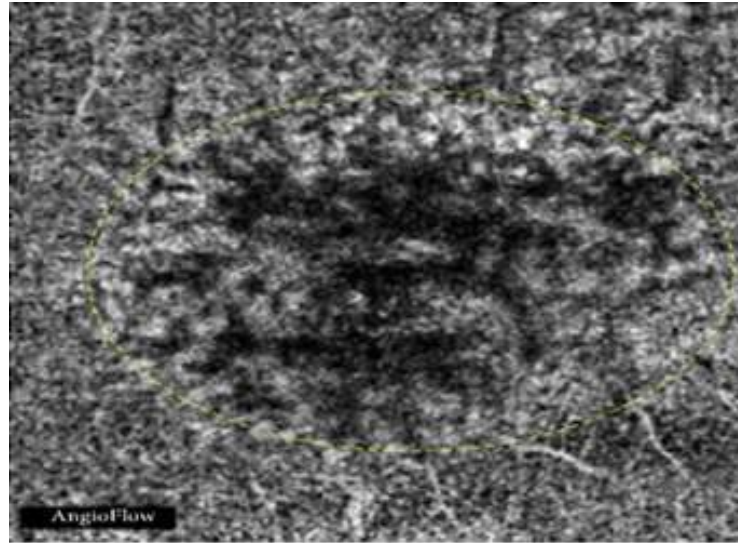


Apply This Clinically

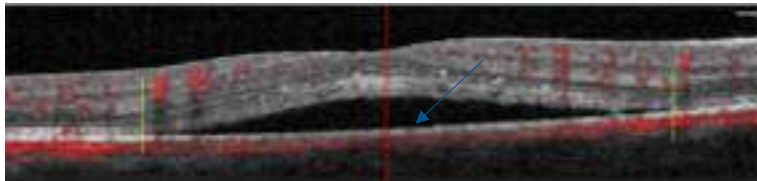
Outer Retinal Disease: Central Serous Chorioretinopathy

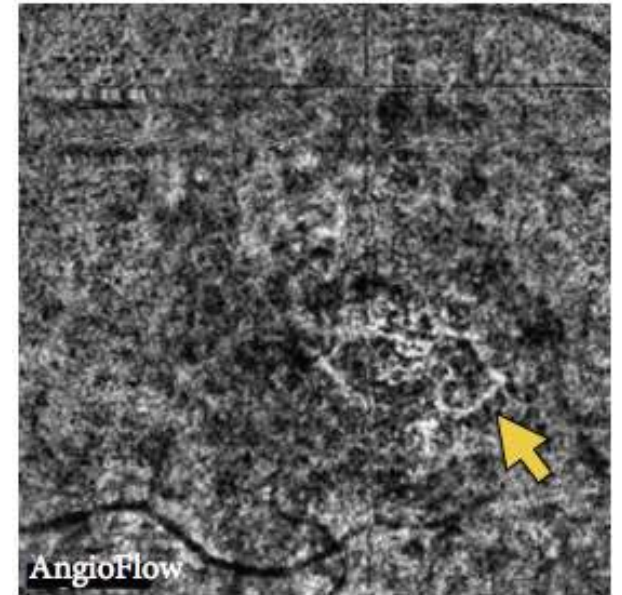
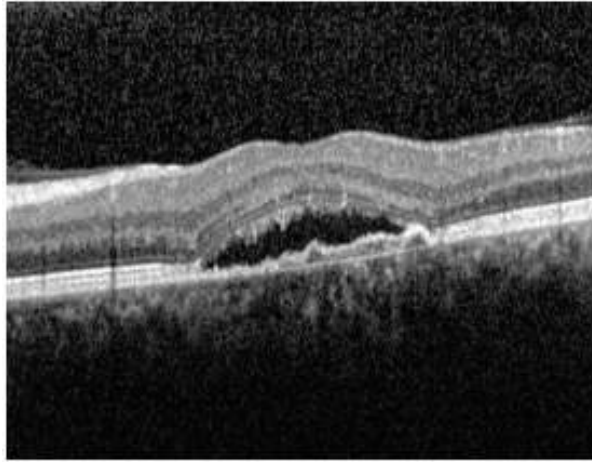


CSR: The easy one...

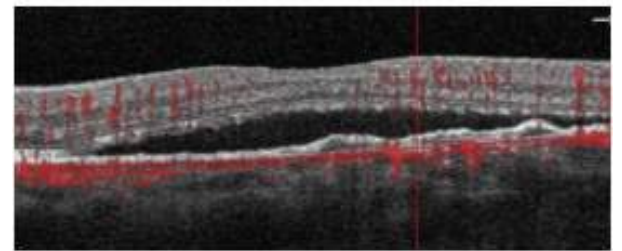


Choriocapillaris slab: Shadowing





CSR: The chronic one!





Apply This Clinically

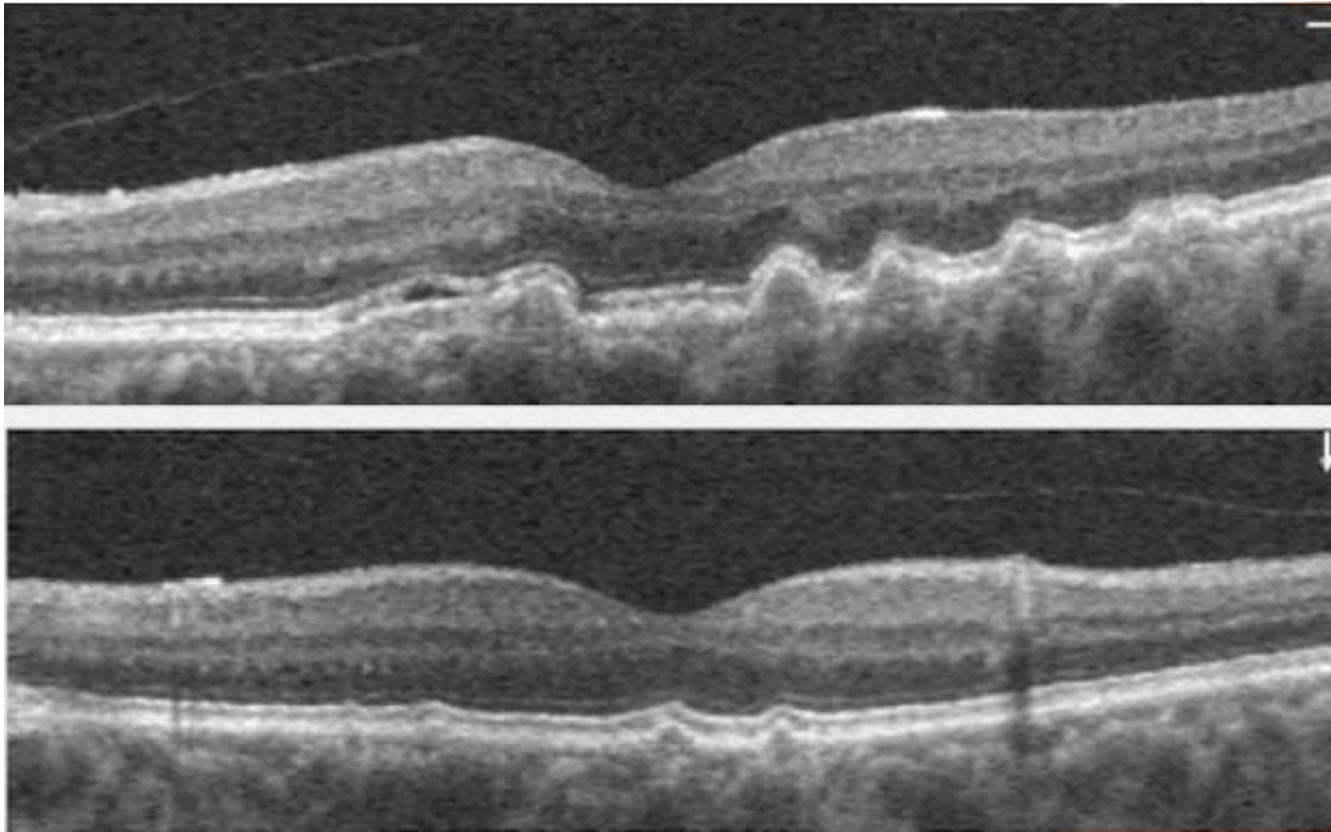
Outer Retinal Disease: Pigment Epithelial Detachment

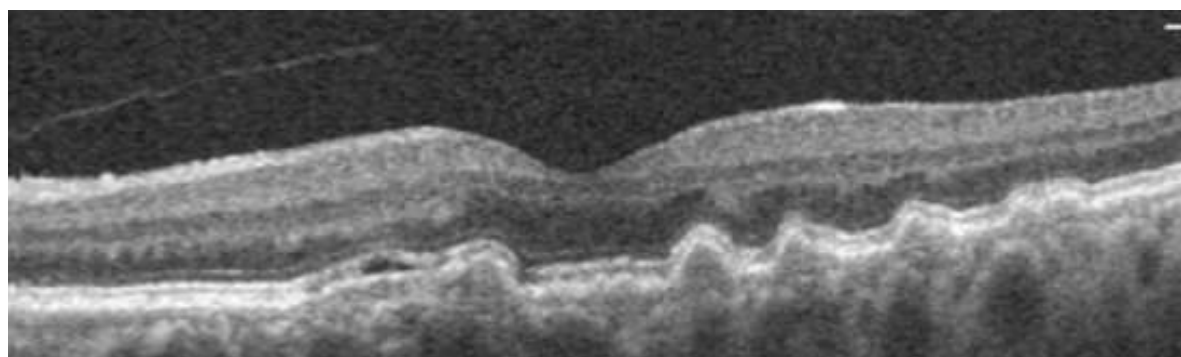
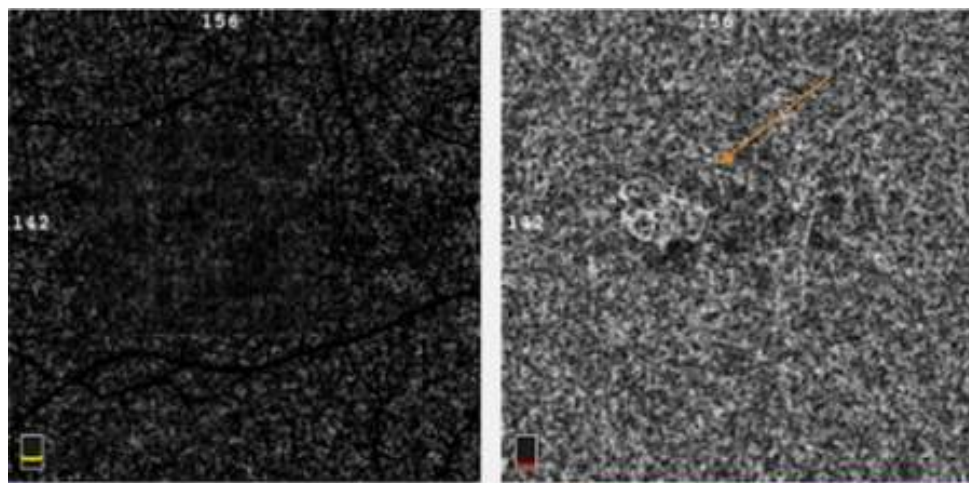
72-year-old Hispanic Male



No new visual complaints

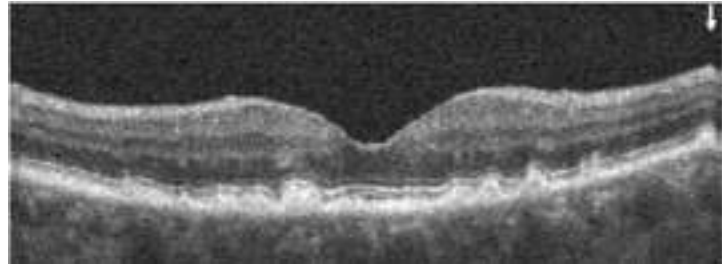
Stable vision



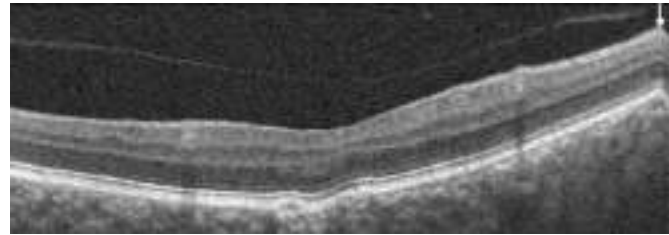


What about
these scans?

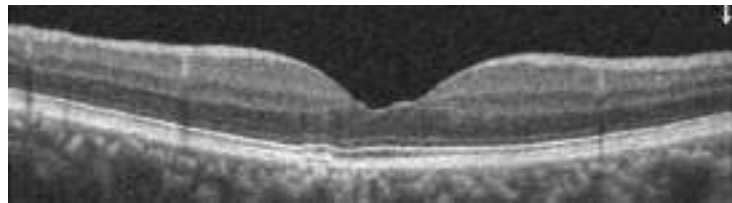
All 20/20!!!!



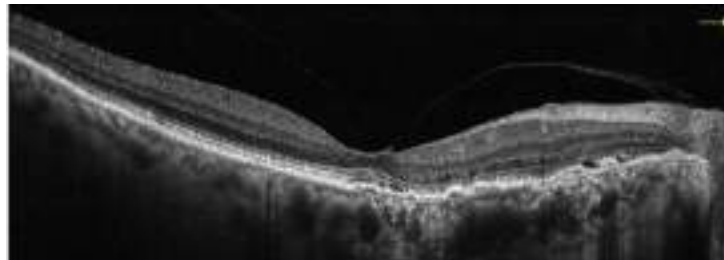
A



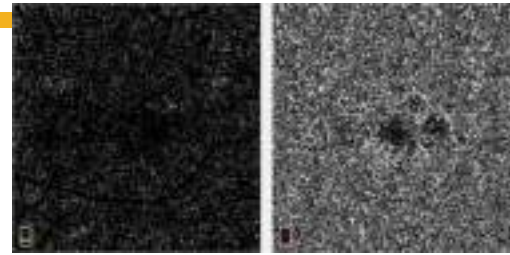
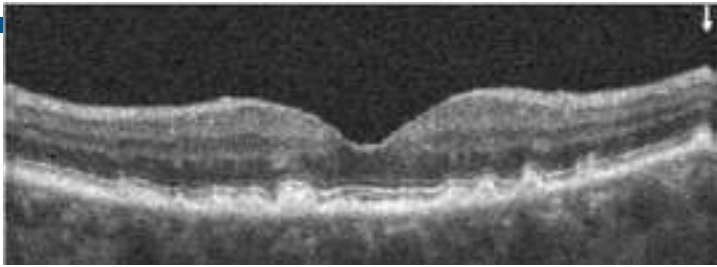
B



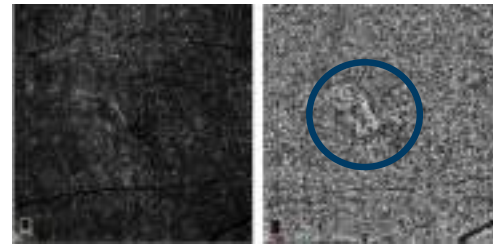
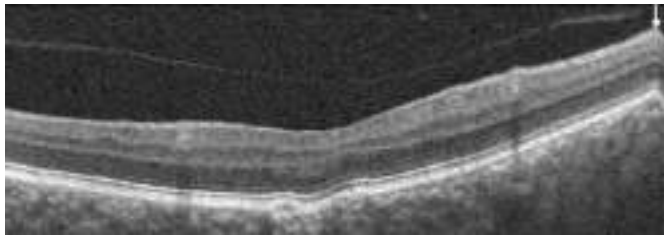
C



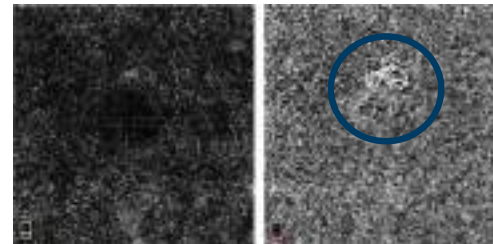
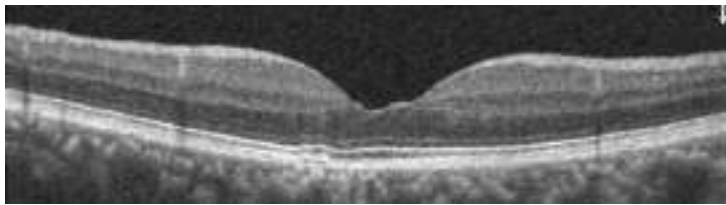
D



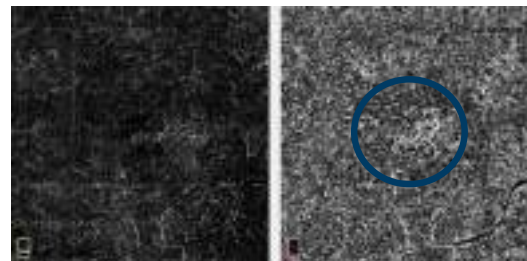
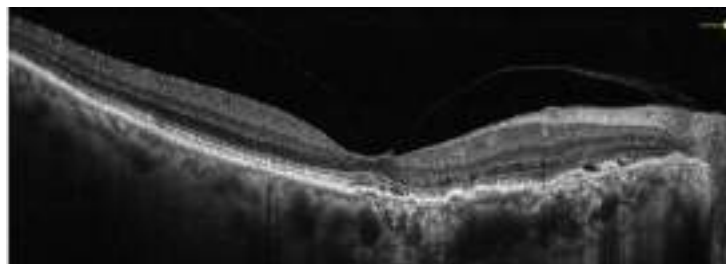
A



B



C



D



Questions??

Email: rjulie@nova.edu