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Deep-learning supported pointwise structure-function correlation from healthy eyes to intermediate and late non-exudative age-related macular degeneration

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Objective

-- Understanding the impact of structural biomarkers and localized functional changes is essential for evaluation of novel **therapeutic targets in non-exudative AMD**
-- Pointwise correlation between morphological **OCT** changes and **microperimetry** by precise 1:1 co-registration between **DL-quantified biomarkers** in OCT volumes and **sensitivity changes in MP**

Methods

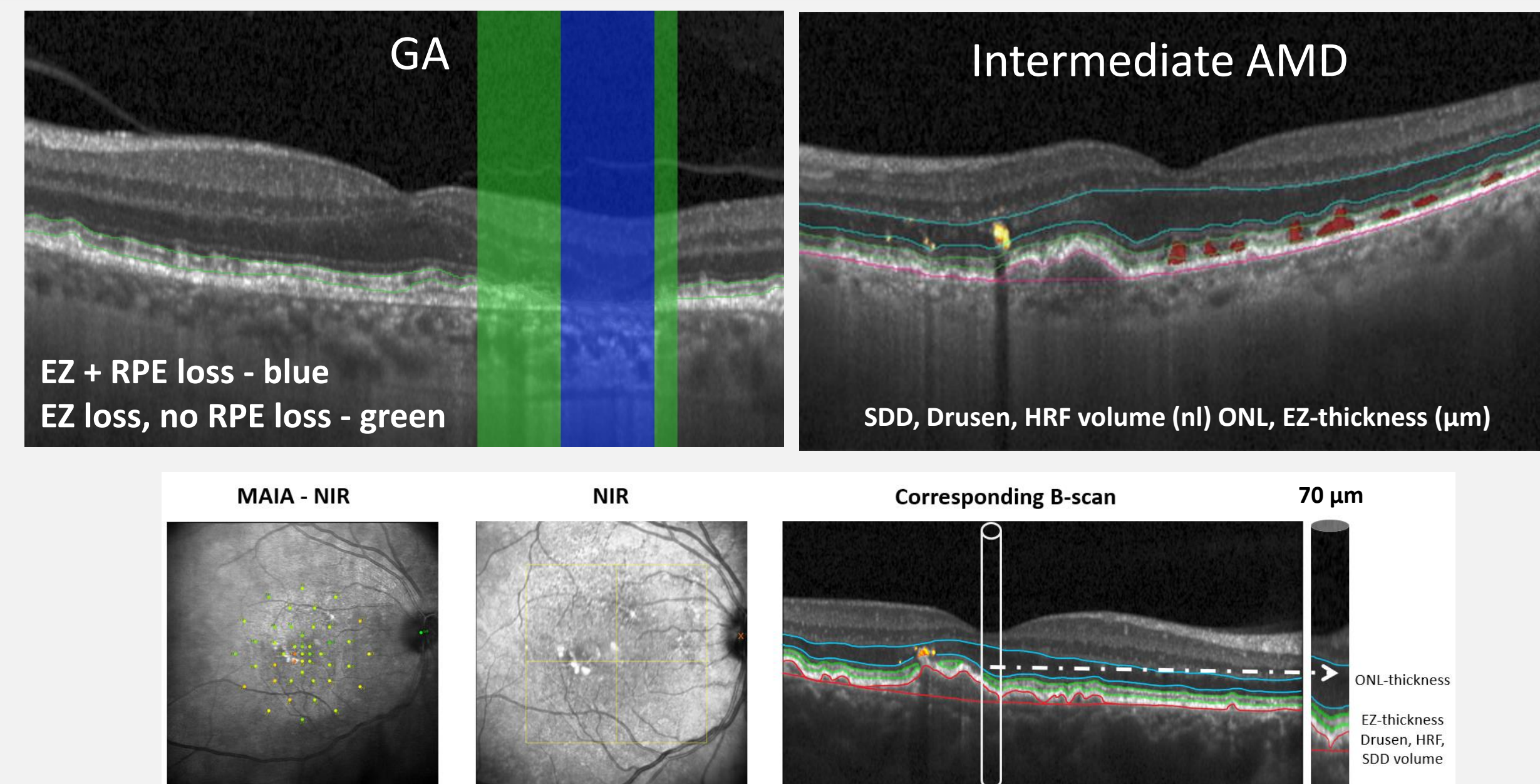
- 60 eyes of 60 patients
- 20 controls, 20 iAMD, 20 GA
- OCT imaging (Spectralis)
- 4 x Microperimetry / patient
2 x MP-3, 2 x MAIA

	MP3	MAIA
Size	Goldman III,	Goldman III,
Duration	200 ms	200 ms
Test strategy	4-2	4-2
Range	34 dB	36 dB
Background	31.4 asb 10 cd/m ²	4 asb 1.27 cd/m ²
	photopic	mesopic

References

Macular Sensitivity Endpoints in Geographic Atrophy Exploratory Analysis of Chroma and Spectri Clinical Trials Chang et al., Oph. Science 2023
Structure-Function Analysis in Patients With Intermediate Age-Related Macular Degeneration Saßmannshausen et al., IOVS 2018

Deep-learning based biomarker quantification



Results

Healthy age-matched controls

- Increased **EZ thickness** (+0.05/μm [0.03;0.1]) and **ONL thickness** (+0.03/ μm [0.03;0.04]) associated with **higher PWS** ($p < 0.001$)*.

Intermediate AMD

- Increased **EZ thickness** associated with **higher PWS** with strongest effect at 0° foveal eccentricity ($p < 0.005$).
- Increased **ONL thickness** associated with **higher PWS** with strongest effect at 5.2° foveal eccentricity ($p < 0.001$).
- **Drusen, HRF and SDD** associated with **lower PWS** (all $p < 0.05$)*

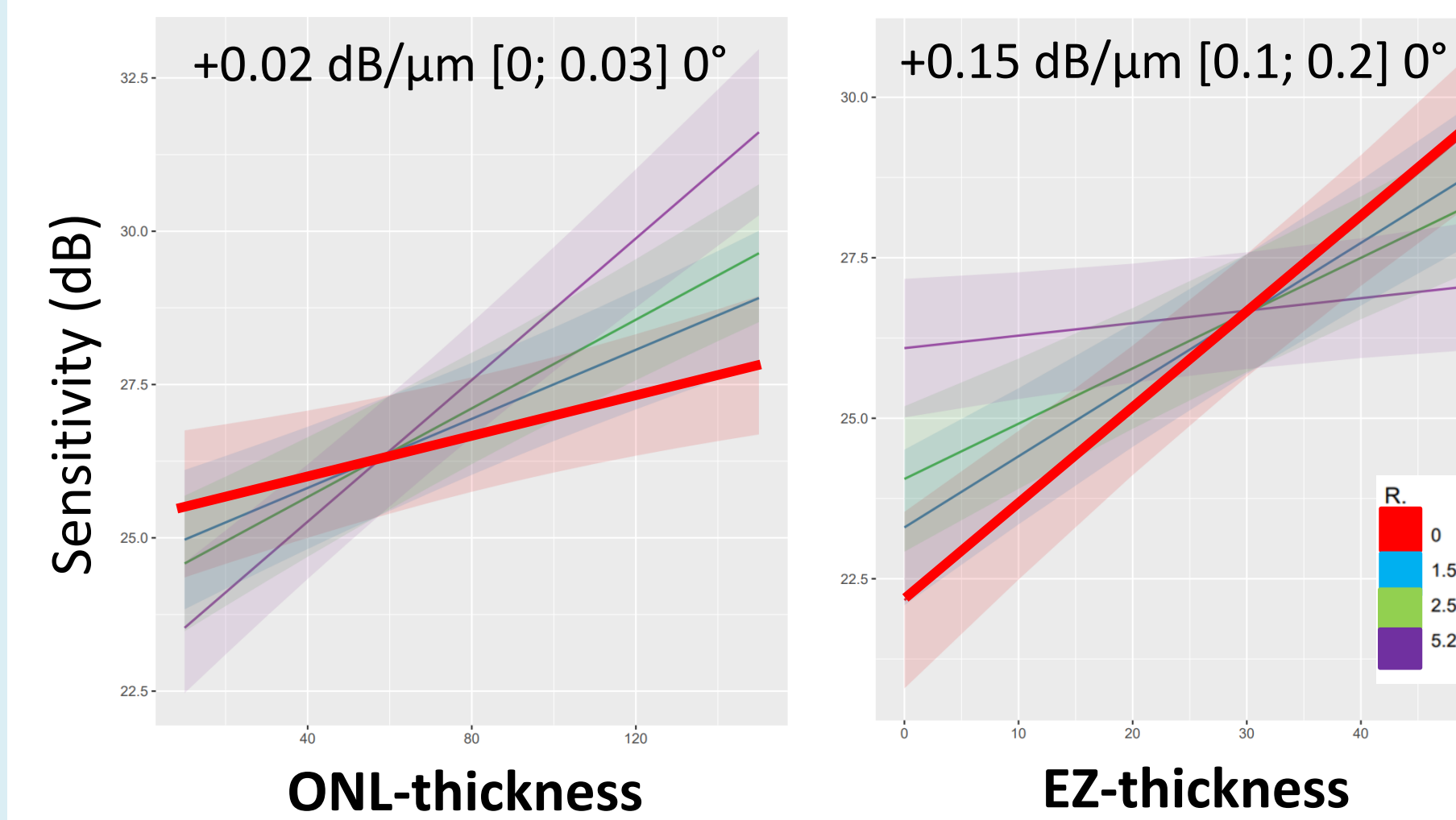
*Accounting for age

GA

- Both, areas with **EZ loss, without RPE loss** and areas with **EZ loss and RPE loss** have significantly lower PWS compared to areas with intact EZ (both $p = 0.001$)** with stronger effect with increasing eccentricity.

**Accounting for age, HRF and drusen volume

iAMD predicted Sensitivity (dB)

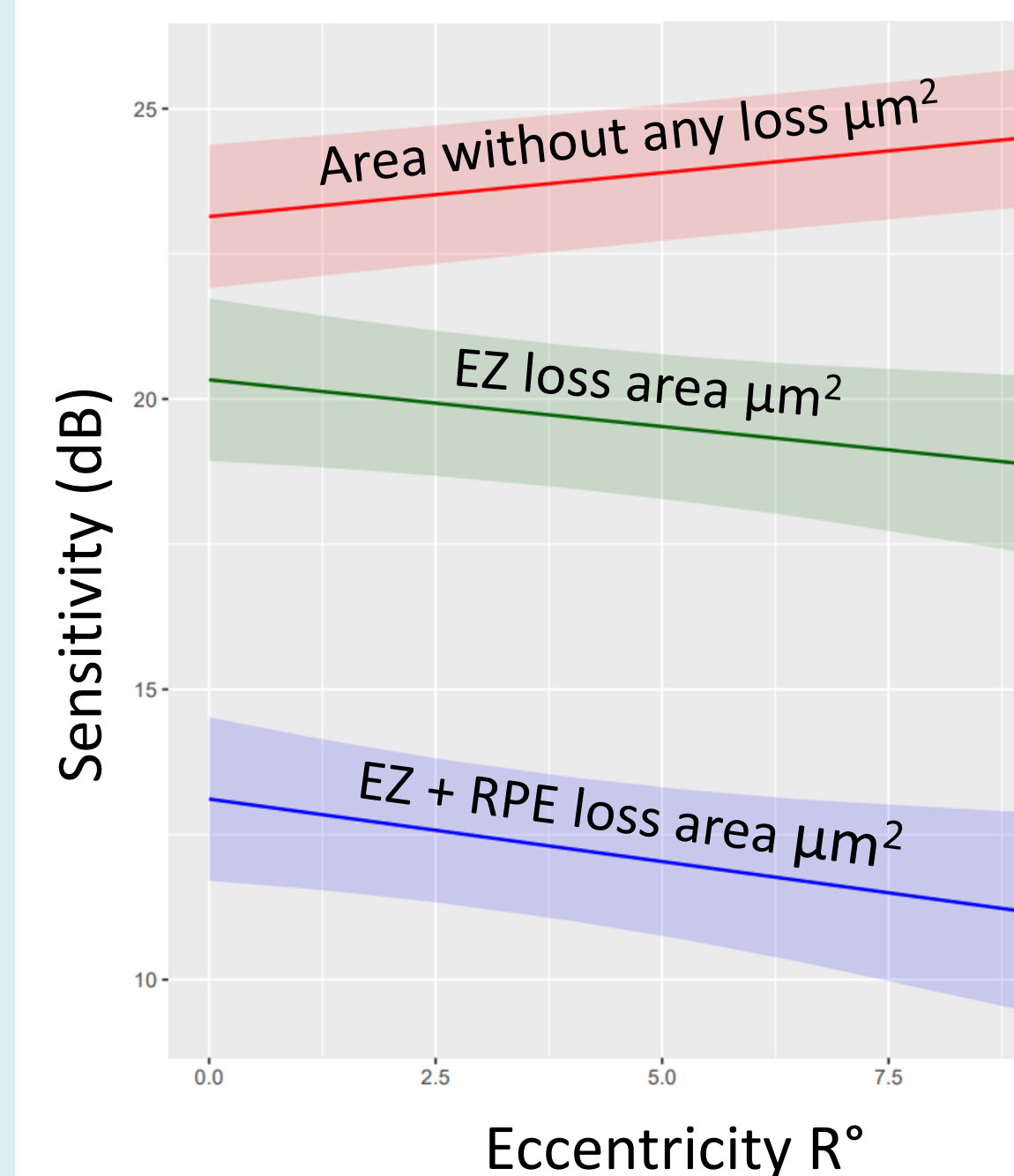


Multivariate mixed-effect models

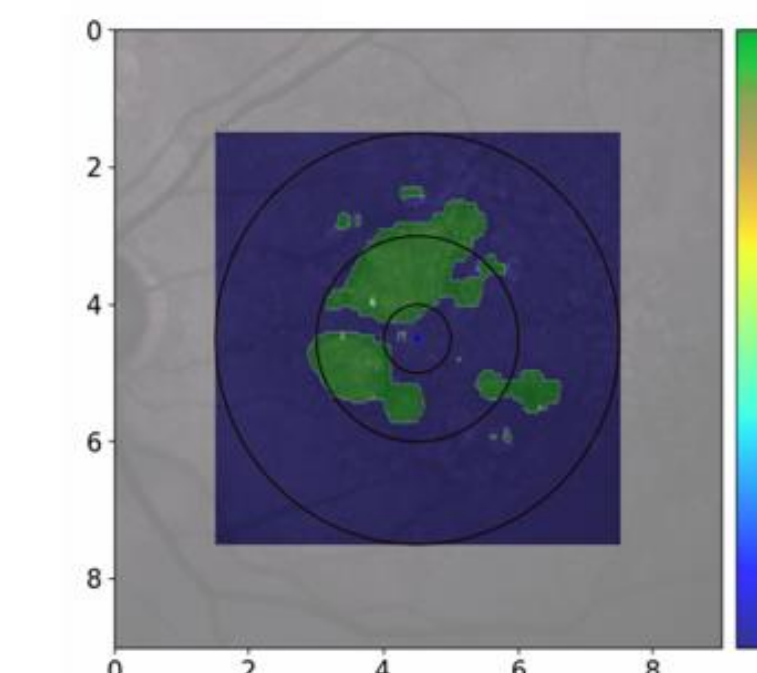
	iAMD
Drusen (nl)	-1 dB/nl [CI -1;-0.2]
HRF (nl)	-10 dB/nl [CI -13;-6]
SDD (nl)	-1 dB/nl [CI -2;-0.3]
GA	
EZ, no RPE loss	-3 dB [CI -4;-2]
EZ + RPE loss	-10 dB [CI -11;-9]
EZ-thickness	+0.3 dB/μm [CI 0.3;0.4]

Accounting for age and R°

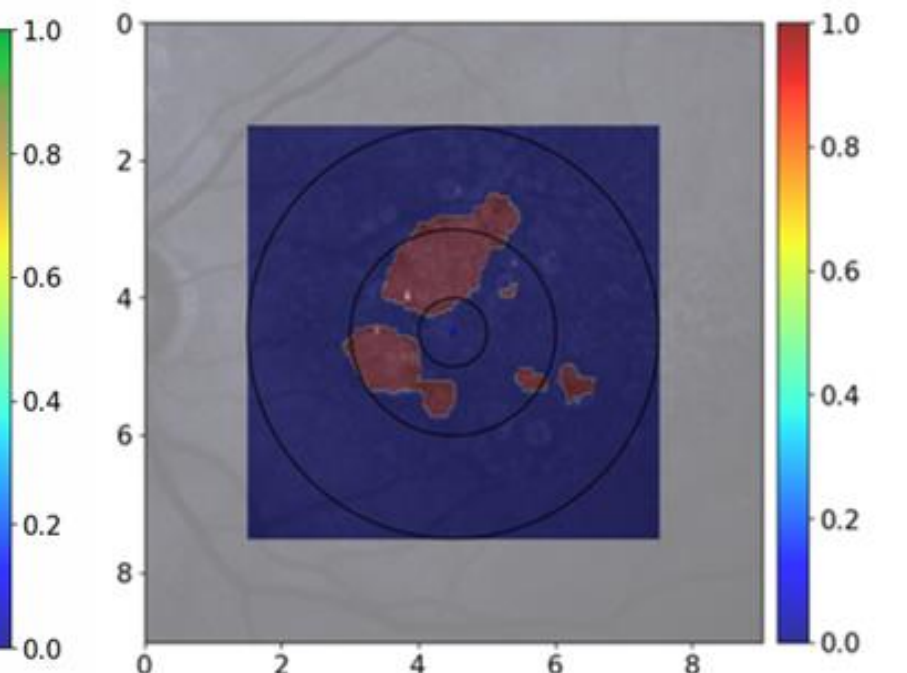
GA predicted Sensitivity (dB)



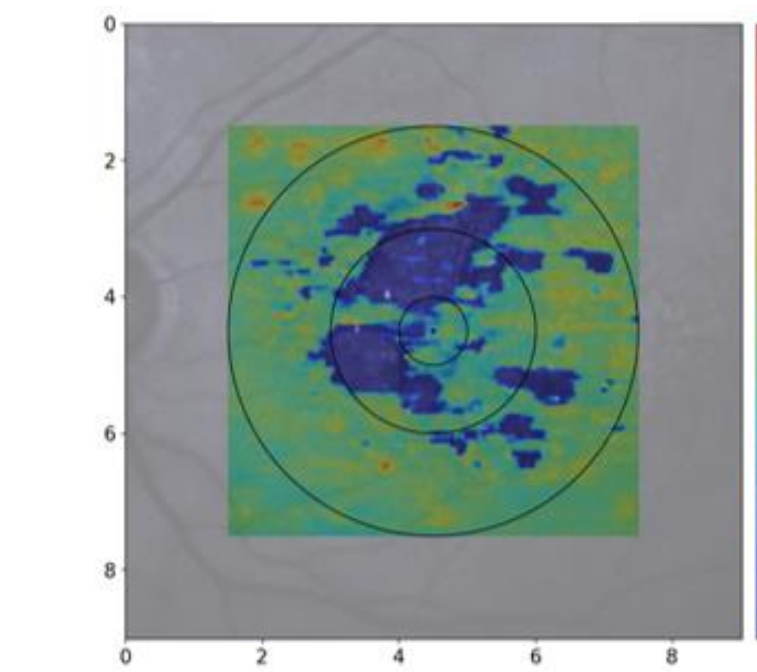
EZ loss



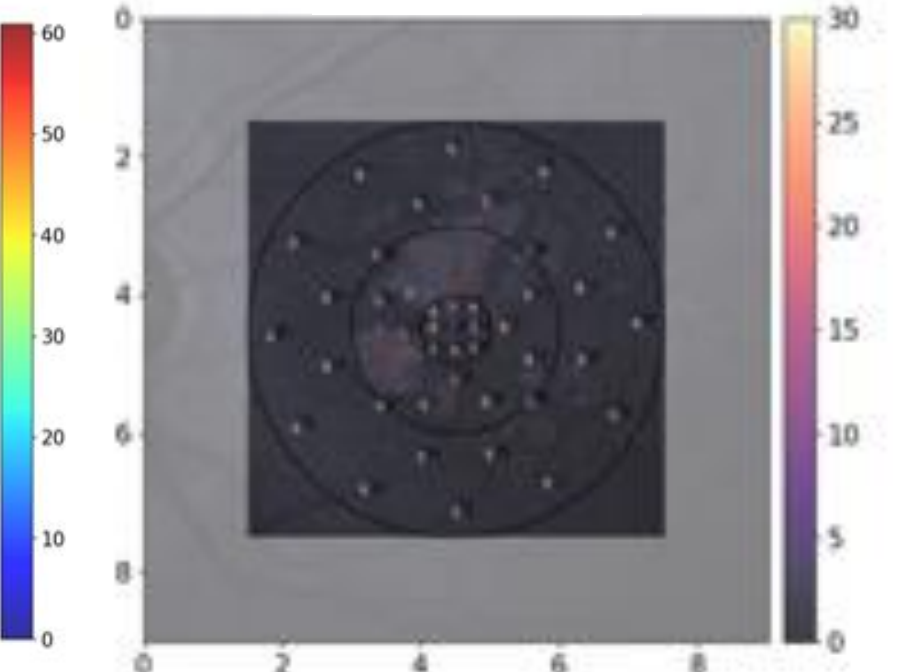
RPE loss



EZ-thickness



PWS (dB)



Conclusion

Topographic pointwise correlation between DL-quantified pathognomonic **non-exudative AMD** biomarkers and function in MP shows high potential for detecting **subclinical changes**, understanding the **pathomechanism of progression**, as well as **personalized definitions of perilesional changes in GA**