

## A novel imaging method for non-exudative Age-Related Macular Degeneration (AMD) identifies novel features and phenotypes of disease

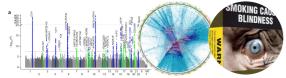
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## **The PROBLEM**

### Age Related Macular Degeneration (AMD) is a complex disease

with over 50 genetic variants & significant environmental overlay



### But disease classification based on current "Imaging Biomarkers" remains overly simple with just four major subtypes of disease defined



## BACKGROUND

Biomarkers are measures of health, disease, diagnosis, prognosis, response to treatment and safety

In the eye, biomarkers are Image Based, socalled "Imaging Biomarkers". These can be difficult to describe and quantify

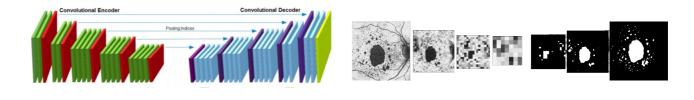
### AMDi is a novel, dye-based, non-angiographic method

Based on laboratory studies, we suggest that AMDi can identify new features and phenotypes of dry AMD making it a potentially useful tool for improved patient classification & prediction

### AMDi was translated to the clinical setting in two REB-approved pilot natural history studies

With informed consent, de-identified demographic, health, and ocular data, along with multi-modal images (fundus photography and confocal scanning laser ophthalmoscopy) including AMDi, were reviewed. Non-image-based data were analyzed using classical (non-Bayesian) statistics (GraphPad Prism). REB: protocol 15-052

### AMDi images were first analysed manually, then using simple machine learning algorithms. We have now built our own dedicated deep neural networks



## HYPOTHESIS: AMDi (AMD imaging) provides new Imaging Biomarkers to describe AMD, and is safe & technically valid

# RESULTS

### **Baseline cohort**

CLINICAL CLASSIFICATION	OD	OS	TOTAL
Early AMD eyes	56	58	114
Late Dry AMD eyes	24	28	52
Late wet AMD eyes	14	6	20
Control eyes	14	14	28
Family history	2	2	4
Comparator	9	12	21
Total	119	120	239

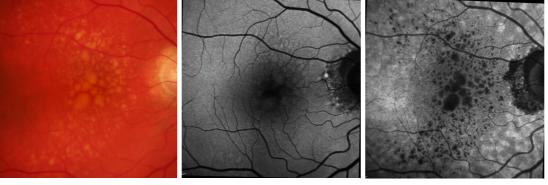
Median ETDRS visual acuities at enrollment: Early AMD: 75 letters (range 18-93, Snellen 20/32) Late dry AMD: 54 letters (range 4-84, Snellen 20/63) areas of GA, seen

**Definitive GA:** 

Is defined as >0.5-disc AMDI identifies more disease, potentially prior to irreversible tissue loss

using FAF

### AMDi identifies & makes quantifiable (ie, segmentable) previously unseen features of early AMD



CFP

FAF

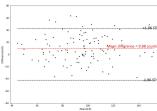


AMDI is safe With no excess allergic reactions

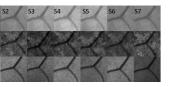
AMDI is technically repeatable at our single site

93% of fixed feature data fall within 1.96 standard deviations

### **Bland Altman**



### Fixed measurement comparisons



CFP

FAF

AMDI







## **METHODS**

AMDi was successfully translated from the lab to the clinical setting and found to identify new features and phenotypes of dry AMD. Based on these early translational data, larger, multisite studies are proposed to evaluate AMDi's clinical utility

CONCLUSION

## **FUNDING & DECLARATIONS**

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**Conflict of Interest**: St Michael's Hospital and Drs SB, FA, and LG are shareholders of Tracery Ophthalmics inc. an Ontario health technology corporation. SB is founding President & CEO. SB, NP and NH hold intellectual property pertaining to the technology. AK, MR, EM, MB, DW, RM and AB have no relevant declarations.









