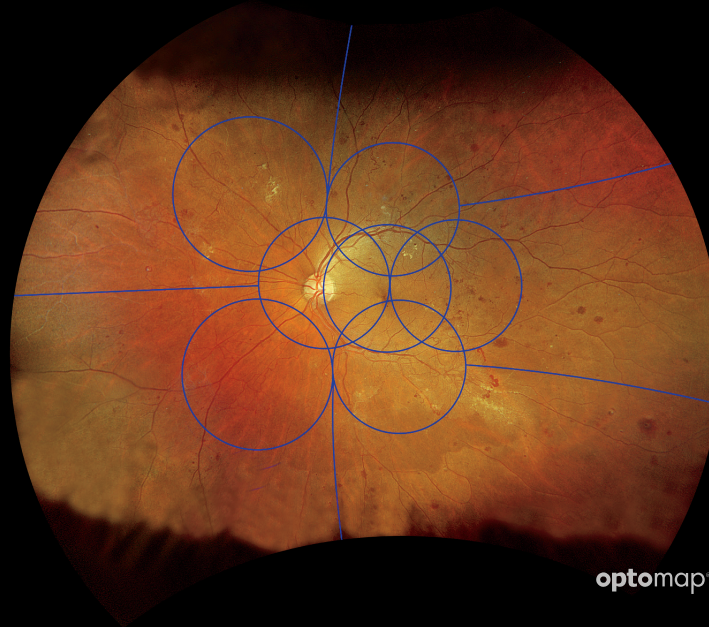


optomap[®]

EQUIVALENT TO ETDRS



Results from several large multi-center collaborative studies confirm the equivalence of optomap to ETDRS Gold Standard for grading diabetic retinopathy (DR).

- **optomap** images have substantial agreement with ETDRS 7-standard film photographs and dilated fundus examination in determining diabetic retinopathy severity.¹⁻⁵
- **optomap** and ETDRS images agree exactly 59% and were within one level 97% of the time.¹
- Predominantly peripheral DR lesions (PPL) are present in up to 50% of these eyes and suggested increased DR severity by 2 or more steps in 11.0%.⁴
- **optomap** is superior to ETDRS at identifying high-risk PDR.⁵
- Another recent study found that implementing **optomap** into a screening program with patients previously treated for Diabetic Macular Edema (DME) improves efficiency and reduce cost.⁸

“The identification of a subset of eyes at greatly increased risk of DR progression and onset of PDR that cannot be assessed by ETDRS 7-field imaging would have significant implications for the evaluation and care of diabetic eye disease. Not only would UWF devices be the preferred imaging modality, but their use would be important in clinical trial settings requiring precise prediction of DR progression rates, in clinical care for accurate patient counseling, and in tele-ophthalmology programs to improve risk assessment and triage in eyes that otherwise would not have the peripheral retina evaluated.”

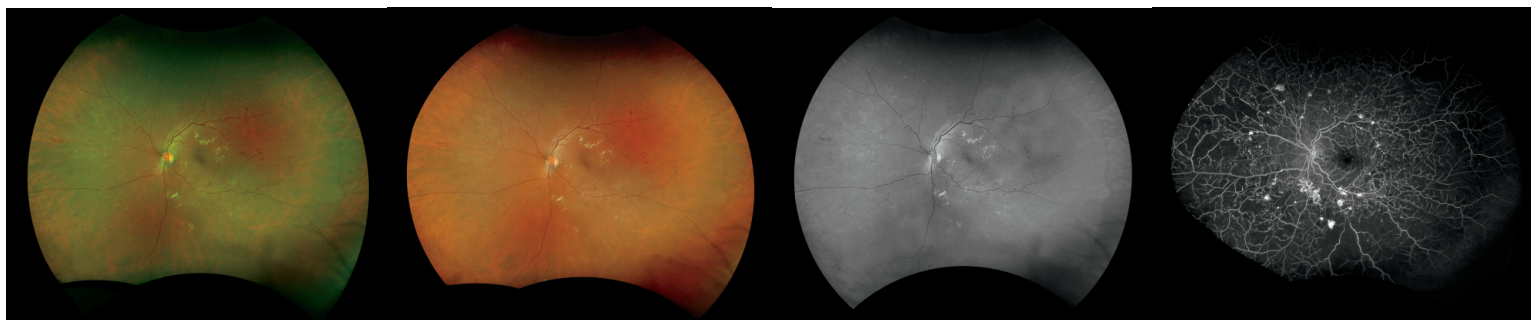
Ophthalmology 2018

See how **optomap** will help you manage your diabetic patients. For more information call **800-854-3039** or email **BDS@optos.com**

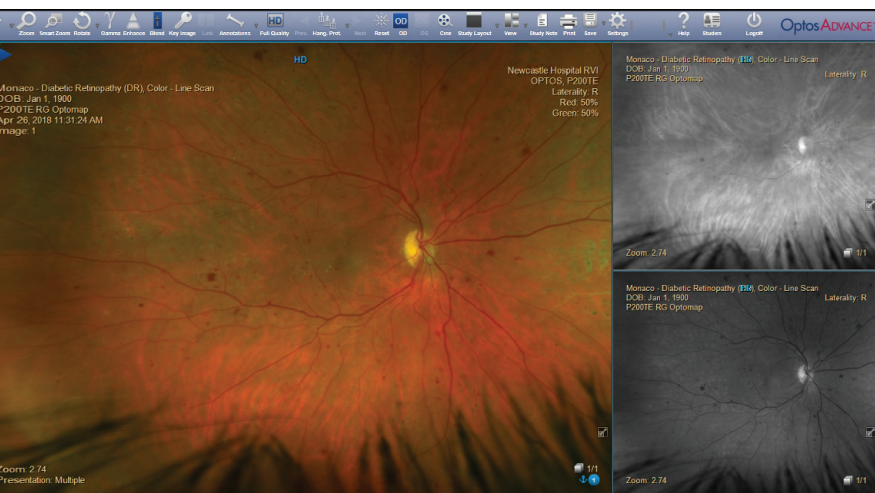


CLINICAL SUMMARY

Can Ultra-widefield Retinal Imaging Replace ETDRS for Grading Diabetic Retinopathy?



optomap *rg*, **optomap** *rgb*, **optomap** *red free*, and **optomap** *fa* images



optomap images can be evaluated using OptosAdvance™ for DR lesions as a color composite image or the image can be separated into red and green channels to improve the visualization of individual lesions.

- Multiple large collaborative studies have found that **optomap** and ETDRS have moderate to substantial agreement when determining DR severity within the central pole and UWF imaging can be used in place of ETDRS imaging for DR grading and management.¹⁻⁶
- **optomap** was better for assessing DR level in 27% of eyes than ETDRS.¹
- A large multi-center European study confirmed **optomap** was superior to ETDRS for high-risk PDR.⁷
- **optomap** in clinical settings not only increases the frequency of DR identification nearly 2-fold, but also reduces acquisition time, ungradable image rates and image evaluation time compared to nonmydriatic fundus photography.^{1, 8, 9}
- Studies have found that PPL are associated with the risk in the progression of DR.^{10, 11}

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5. Comparison of Standard 7-Field, Clarus, and Optos Ultrawidefield Imaging Systems for Diabetic Retinopathy (COCO Study). Ophthalmol Sci. 2023.
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8. Surveillance of people with previously successfully treated diabetic macular oedema and proliferative diabetic retinopathy by trained ophthalmic graders: cost analysis from the EMERALD study. Br J Ophthalmol. 2021.
9. Potential efficiency benefits of nonmydriatic ultrawide field retinal imaging in an ocular telehealth diabetic retinopathy program. Diabetes Care. 2014.
10. Peripheral Lesions Identified on Ultrawide Field Imaging Predict Increased Risk of Diabetic Retinopathy Progression over 4 Years. Ophthalmology 2015.
11. Association of predominantly peripheral lesions on ultra-widefield imaging and the risk of diabetic retinopathy worsening over time. JAMA Ophthalmol. 2022.

optomap is available on *Daytona, California, Monaco, and Silverstone* Devices.



Optos UK/Europe
+44 (0)1383 843350
ics@optos.com

Optos North America
800 854 3039
usinfo@optos.com

Optos DACH
DE: 0800 72 36 805
AT: 0800 24 48 86
CH: 0800 55 87 39
ics@optos.com

Optos Australia
+61 8 8444 6500
auinfo@optos.com

Contact us:

