Novel technique for diagnosis of retinal and optic nerve degeneration

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Incurable eye diseases cause vision loss and reduce quality of life

Age-related Macular Degeneration (AMD) - ~30M patients





Diabetic Retinopathy 93M patients





Retinitis Pigmentosa (RP) >1.5M patients







As an ophthalmologist and a researcher, my research is dedicated to the development of ✓ New treatments ✓ Drug delivery systems ✓ Objective clinical testing

Moving from Subjective to Objective

- 2009 I realized that I need an objective VF test moreover children cannot be tested.
- In Fort Lauderdale, Miami ARVO meeting is very busy
- I heard about blue and red light causing the pupil to constrict







The pupil light response to red and blue light – a new method for assessment of the visual pathways



^{to} 520 50



RETINITIS PIGMENTOSA (RP)

- An inherited progressive degenerative disease
- Rods degeneration
 - Night blindness
 - Tunnel vision
 - Fundus: bone spicules in the fundus









Study design

- 13 retinitis pigmentosa (RP) patients
- 17 healthy age-matched volunteers
- 16.2° Visual Field
- In RP patients, the chromatic pupillometer recordings were compared with their darkadapted Chromatic Goldmann

TEST PROTOCOL

- Non-tested eye is covered by a patch
- Stimulus duration 1 second
- Tracking of pupil size 4 seconds
- Chromatic stimulus
 - Red (1000 cd/m², 625nm)
 - Blue (200 cd/m², 485nm)

1. RP patients: reduced response to <u>blue</u> light, correlating with VF restriction severity

Figure 4



Chibel el at Ophthalmology 2016

<1SE

Case II – patient with VF restriction

Figure 10

<1SE 1SE-2SE 2SE-3SE 3SE-4SE 4SE-5SE >SSE



2. Best Vitelliform macular dystrophy (BVMD)

- Autosomal dominant disease that affects the retinal pigment epithelium (RPE) at a very young age.
- Characterized by lipofuscin accumulation in the RPE.
- Atrophic changes of the RPE or scarring cause loss of central visual acuity.



BVMD Patients demonstrated smaller PPC and shorter pupillary latency correlating with disease progression



Time (sec)

Subject	BCVA	Clinical Stage [§]
P#2	20/20	Vitelliform
p#3	20/50	Vitelliform
P#1	20/150	Vitelliruptive

BVMD patients - diminished pupil responses with <u>shorter</u> latency

- Significantly smaller mean PPC, MCV and LMCV as compared with controls (p<0.001)
- The defect is more substantial in response to red light



BVMD patients demonstrated substantially shorter LMCV with a narrow value range



BVMD

Retinitis pigmentosa



3. CHROMATIC PUPILLOMETRY FOR OBJECTIVE ASSESSMENT OF VF IN GLAUCOMA PATIENTS





Study design

- 11 Glaucoma patients
- 13 healthy age-matched volunteers
- 24-2 Visual Field
- The pupillary responses of patients were compared with the pupillary responses obtained from control subjects.
- Results of patients where also compared with their findings on Humphrey 24-2 perimetry and SD-OCT.

A6 (MD=-6.9, PSD = 10.38)

8.1 .6

4.3 1.9 .6

7.8 3.0

BLUE

2.5 8.9 7.3 7.3

		3.9	6.9	7.5	9.8	10.2	(
	1.7	2.4	8.4	9.4	10.8	11.6	8
3.7	2.0	6.5	9.8	8.6	9.1	9.6	1
1.5	0.9	2.8	8.8	10.4	13.6	8.0	4
	7.5	7.8	9.0	6.9	6.5	3.6	
		3.4	5.2	4.2	4.6	10.3	1
			3.4	1.4	10.5	4.7	

9.3 6.0 4.6 5.6 6.1 7.0 9.0 7.4 4.8 4.0 13.0 10.6 7.1 9.1 6.7 7.4 2.6 0.4 3.0 5.3 8.3 8.8 7.1 7.9 5.1 3.4 2.8 5.2 1.8 0.0 5.1 8.1 7.7 10.3 4.2 4.1 3.5 4.9 4.0 8.5 6.0 7.1 6.9 4.4 2.8 8.3 4.4 4.2 7.1 5.3 4.2 2.0 6.2 4.6

			0.8	0.8	0.8	0.7		
		0.8	0.8	0.7	0.8	0.7	0.8	
	0.8	0.9	0.9	0.8	0.8	0.8	0.7	0.7
0.8	0.8	0.8	0.8	0.8	0.8	0.7	0.8	0.8
0.8	2.0	0.8	0.7	0.8	0.7	0.8	0.8	0.8
	0.8	0.8	0.8	0.8	0.8	0.8	0.7	0.8
		0.8	0.8	0.8	0.8	0.7	0.7	
			0.8	0.7	0.7	0.8		

RED

			3.5	3.1	8.0	10.7		
		5.6	9.2	9.1	6.5	9.9	9.3	
	1.8	6.1	1.9	7.1	7.9	9.2	9.1	8.7
1.2	1.5	1.0	8.0	11.4	10.6	4.7	4.7	5.5
1.8	1.1	4.1	4.8	4.4	11.4	8.5	11.2	10.2
	2.4	3.9	3.4	11.5	6.3	9.7	6.5	7.3
		1.5	2.1	3.7	10.4	6.3	10.7	
			3.6	3.0	7.3	6.4		

			2.7	5.8	6.4	8.6		
		5.3	7.4	10.3	5.6	7.0	7.1	
	0.9	3.0	1.3	7.5	5.1	6.8	7.4	8.1
1.0	3.3	0.8	6.5	6.4	7.3	3.7	6.7	5.8
2.3	3.5	8.7	3.6	6.3	9.6	5.8	9.3	9.0
	2.3	3.5	2.9	9.2	5.3	7.5	6.0	7.6
		1.5	3.1	4.5	8.5	4.6	6.7	
			4.6	4.8	7.6	4.7		

			0.8	0.8	0.7	0.7			
		0.8	0.7	0.8	0.8	0.7	0.7		
	0.8	0.8	0.8	0.8	0.8	0.8	0.7	0.7	
0.8	0.9	0.8	0.8	0.8	0.7	0.8	0.7	0.7	
0.8	0.8	0.8	0.8	0.8	0.8	0.7	0.8	0.7	
	0.8	0.8	0.8	0.8	0.8	0.7	0.7	0.7	
		0.8	0.8	0.8	0.8	0.7	0.7		
			0.8	0.8	0.8	0.8			

LMCV

MRV

PPC

34

4-5 3-4 2-3 1-2 (-1)-1 (-1)-(2) (-2)-(-3)

(-3)-(-4)

(-4)-(-5) <(-5)

>5

Conclusions

 The pupil multifocal response pathology – differs between retinal, macular and optic nerve diseases

	BVMD	RP	Glaucoma
Stimulus more affected	Red	Blue	Blue
Latency	Shorter	Longer	Normal
Latency variability	Normal	Large variability	Normal

 The chromatic multifocal pupillometer may enable objective diagnosis of visual field defects and underlying pathology in retinal, macular and optic nerve degeneration.

The eye is a window to the brain



The EYE is an extension of the BRAIN: The neurons extend from the eye into the brain The eye has similar vasculature with similar barriers



Alzheimer Disease -One of the Biggest Zunammy

Alzheimer's disease (AD)- the most common form of dementia
Approved medications provide limited efficacy
More than 450 new drugs failed in clinical trials

Let's think out of the box - no borders



NOVEL NEUROLOGICAL & IMAGING TESTING

 Identify early non-invasive biomarkers to stop the degeneration before it is too late



Neuron function - Pupillometry

Neuron & blood vessel structure – Advanced imaging

Preliminary results – low pupil response to red and blue light in non demented elderly



Study II- offspring of AD patients

Israel registry for Alzheimer's prevention (IRAP) –

a prospective longitudinal study

- Offspring (ages 40-65) of AD patients (n=430) and controls (n=100)
 - **Exquisite characterization**
 - Cognitive
 - Brain imaging
 - Cerebrospinal fluid
 - Health-related
 - Life style
 - Genetics

Preliminary results: Sparser and more tortuous retinal vessels with in AD offspring with low

cognition

High (control)



Low (IRAP)





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Multicolor

R

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