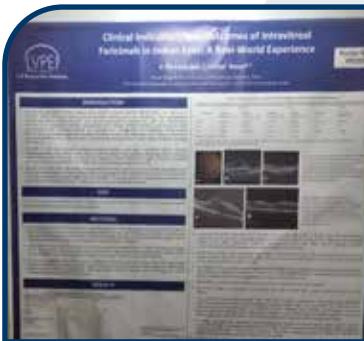


CONGRESS DIGEST

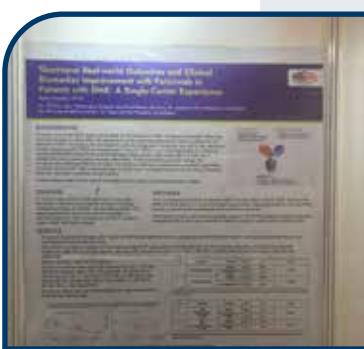


Poster Number: PP103 | Authors: Aishwarya Ravi, Vishal Ravindra

Institution: LV Prasad Eye Institute (LVPEI), Hyderabad, India

Title: Clinical Indications & Outcomes of Intravitreal Faricimab in Indian Eyes: A Real-World Experience

Scientific Summary: This retrospective real-world analysis evaluated Indian eyes treated with Faricimab across multiple indications, including nAMD, DME, and PCV. Early follow-up data showed meaningful anatomical improvement with reduction in central macular thickness and resolving fluid in a majority of cases. Functional outcomes indicated stabilisation or gain in vision, with no new safety concerns reported. The findings support Faricimab's dual-pathway value in routine clinical practice beyond controlled trials.

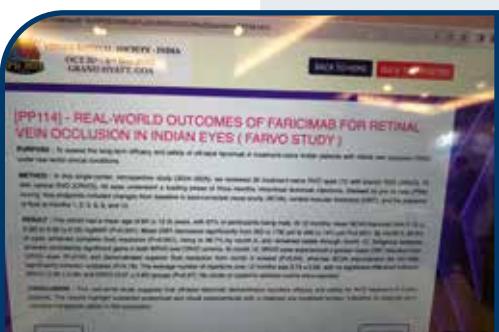


Poster Number: PP298

Authors: Dr. Parveen Sen, Vitreoretinal Surgeon & Head, Retina Services, Dr. Agarwal's Eye Hospital, Chandigarh, Dr. Shivang Singh, Consultant, Dr. Agarwal's Eye Hospital, Chandigarh

Title: Short-term Real-world Outcomes and Clinical Biomarker Improvement with Faricimab in Patients with DME: A Single Center Experience

Scientific Summary: This retrospective real-world study evaluated 24 eyes of 14 patients with DME treated with Faricimab after prior anti-VEGF exposure (Ranibizumab/Aflibercept) or steroid therapy. At 1st and 2nd injection follow-up, mean BCVA improved from 0.6 to 0.4 logMAR and central retinal thickness reduced from 472 μ m to 381 μ m, demonstrating both functional and anatomical benefit. OCT biomarker changes showed reduction in SRF/IRF and restoration of foveal contour, with no safety concerns reported. Findings support Faricimab's role in treatment-resistant DME cases.



FARVO Study (PP114)

Indication: Retinal Vein Occlusion (RVO) – BRVO & CRVO (Indian real-world data)

Sample Size: 30 treatment-naïve eyes (15 BRVO, 15 CRVO)

Study Type: Single-center, retrospective (2024–2025)

Regimen: Faricimab – loading phase + PRN dosing **Key Outcomes (12 months)**

BCVA: Improved from 0.73 to 0.09 logMAR ($P<0.001$)

CMT: Reduced from 563 μ m to 206 μ m ($P<0.001$)

Fluid resolution: 93.3% eyes achieved complete fluid resolution by Month 3 – sustained to Month 12

Injection burden: Avg. 3.73 injections (CRVO) / 3.80 (BRVO) in 12 months

Safety: No ocular or systemic adverse events reported

Notable Finding: BRVO eyes showed greater early CMT reduction from Month 3 onward ($P=0.04$)

Conclusion: Faricimab shows strong anatomical & visual outcomes with low injection burden, making it a valuable off-label option for RVO in Indian patients

CONGRESS DIGEST



Hard Exudates & Microaneurysms – Post Hoc Analysis (Debdulal et al.)

Title: Automated Deep-Learning Segmentation Shows Greater Reduction of Hard Exudates & Microaneurysms with Faricimab vs Aflibercept in DME (YOSEMITE & RHINE Post Hoc Analysis)

Authors: Dr. Debdulal Chakraborty, Disha, Kolkata

Context: Hard exudates are a major cause of irreversible vision loss, particularly when located near the fovea. Increased number and leakage from microaneurysms are strongly associated with worsening diabetic macular edema (DME).

Objective: To compare the effect of **Faricimab vs Aflibercept 2 mg** on hard exudates and microaneurysms using an **AI-based automated deep-learning segmentation algorithm** on colour fundus photographs.

Key Findings: Post hoc analysis of YOSEMITE & RHINE demonstrated **greater reduction in hard exudates and microaneurysms with Faricimab** compared to Aflibercept.

The improvement was **significant at Week 52** and was **sustained through Week 96**.

Conclusion: Faricimab shows superior and sustained reduction of DME lesion burden—including hard exudates and microaneurysms—versus Aflibercept, reinforcing its dual-pathway advantage in long-term retinal vascular stability.

Poster Number: PP168 | Authors: Dr. Ridham Nanda, AIIMS, Jammu

Title: Our Experience with Efficacy and Safety of Faricimab: A Retrospective Study

Scientific Summary: This retrospective study included **6 patients / 12 eyes** treated with Faricimab over a 6-month period, with an average of **2.5 injections per patient**. The most common indication was **diabetic macular edema (66.7%)**, followed by **macular neovascularization (MNV) and polypoidal choroidal vasculopathy (PCV)**. Mean BCVA improved from **1.21 to 0.63 logMAR**, and central subfoveal thickness reduced from **496µm to 270µm** at last follow-up. No ocular adverse events or inflammation were reported, and OCT showed regression of SRF, IRF, HRF, and DRIL.

Poster Number: PP235 | Authors: Dr. Anand Saxena

Title: Early Experience with Faricimab in Patients with nAMD and DME

Institution: Aurobindo Nethralaya, Raipur

Scientific Summary: This case series reports outcomes from **12 patients / 18 eyes** treated with Faricimab over ~1 year, including both **nAMD and DME**, with some cases showing associated PCV with tall PEDs. Initially used in non-responsive, previously treated patients, Faricimab was later extended to treatment-naïve cases with consistently positive anatomical and functional outcomes. OCT showed flattening of PEDs and resolution of fluid, with improved patient satisfaction and no adverse events reported. Findings suggest strong potential in both resistant and naïve cohorts due to longer durability and biomarker regression.

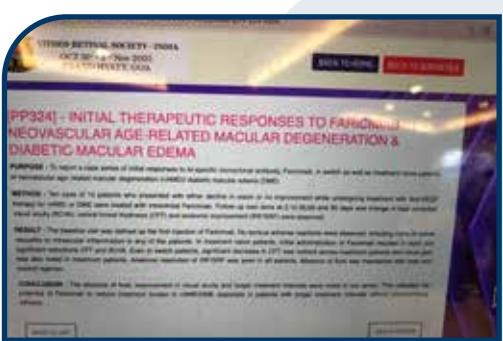
Poster Number: PP252 | Authors: Dr. Ramesh Venkatesh NN, Bengaluru

Title: One-Year Real-World Data on Faricimab in an Indian Retina Clinic

Institution: Tertiary Retina Center, South India

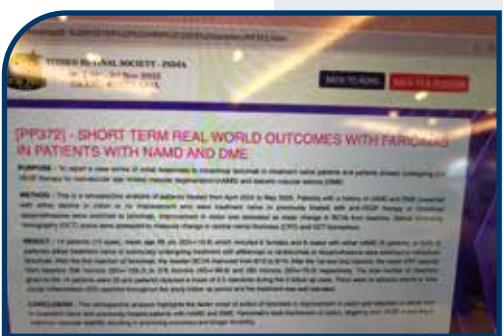
Scientific Summary: This retrospective observational study included **77 patients (218 injections)** treated with Faricimab across multiple indications, including DME, nAMD, PCV, RVO, and myopic CNVM. At 1-month post-injection, mean BCVA improved by **+6.2 ETDRS letters**, and CSFT reduced by **84.5 µm**, with significant decreases in IRF (48%) and SRF (38%). Durability analysis showed **55% of loading-completed patients maintained ≥ 12-week intervals** without recurrence. No ocular inflammation or systemic adverse events were reported, supporting safety and durability across a broad disease spectrum.

CONGRESS DIGEST



Poster Number: PP324 | Authors: Dr. Ambika Verma | **Institution:** SBIMS, Chattisgarh
Title: Initial Therapeutic Responses to Faricimab in Neovascular Age-Related Macular Degeneration & Diabetic Macular Edema

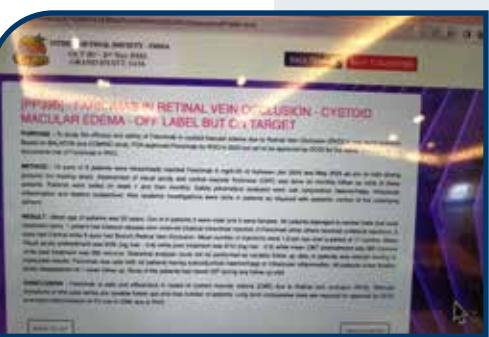
Scientific Summary: This case series reports outcomes from **10 eyes of 10 patients** (both switch and treatment-naïve) treated with Faricimab for nAMD or DME, with follow-up up to Day 90. Significant reduction in CFT and BCVA improvement was observed across both groups, including recalcitrant cases. OCT showed complete resolution of IRF/SRF in all eyes, with fluid-free status maintained through treat-and-extend intervals. No retinal vasculitis, inflammation, or adverse reactions were reported, supporting Faricimab's efficacy and reduced treatment burden potential.



Poster Number: PP372 | Authors: Dr. Aishwarya Iyer | **Institution:** Dr Agarwals, Bengaluru

Title: Short-Term Real World Outcomes with Faricimab in Patients with nAMD and DME

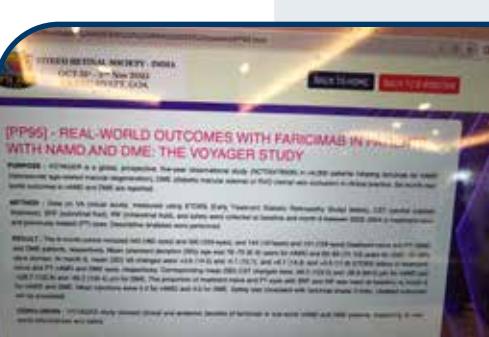
Scientific Summary: This retrospective study evaluated **14 eyes of 14 patients** (6 with nAMD, 8 with DME), both treatment-naïve and previously anti-VEGF-treated, who were switched to Faricimab between April 2024 and May 2025. Median BCVA improved from **6/12 to 6/10**, and CRT reduced from **358µm to 276µm** after the 2nd injection, showing early functional and anatomical response. A total of **33 injections** were administered, with no intraocular inflammation or adverse events reported. Findings reinforce Faricimab's dual inhibition as an effective option for fast fluid clearance and longer durability outcomes.



Poster Number: PP396 | Authors: Dr. Vineet Mutha | **Institution:** ASG, Indore

Title: Faricimab in Retinal Vein Occlusion – Cystoid Macular Edema (Off Label but On Target)

Scientific Summary: This real-world case series evaluated **10 eyes of 9 patients** with cystoid macular edema (CME) secondary to retinal vein occlusion (RVO), treated with Faricimab **off-label** under a PRN regimen (no loading dose). Mean BCVA improved from **6/36 to 6/12**, and central macular thickness reduced from **360µm to 280µm** after treatment. No cases of intraocular inflammation, vasculitis, or hemorrhage were observed, and transient floaters resolved within 1 week. Study supports Faricimab as a safe and potentially effective option for CME in RVO, while long-term controlled trials are awaited for DCGI approval.

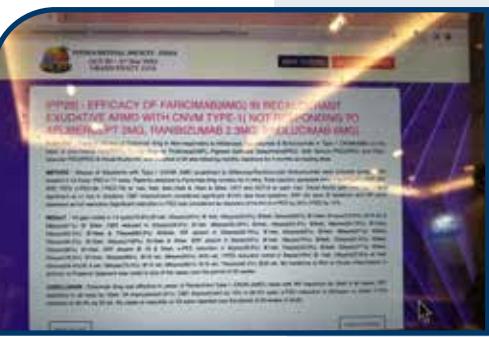


Poster Number: PP95 | Authors: Dr. Vishal Agrawal, Jaipur

Title: Real-World Outcomes with Faricimab in Patients with nAMD and DME: The VOYAGER Study

Study Type: Global, prospective, 5-year observational study (>5,000 patients)

Scientific Summary: The 6-month interim VOYAGER analysis included **443 nAMD eyes** and **300 DME eyes** treated with Faricimab across clinical practice settings. Mean VA gains at Month 6 were **+3.6 ETDRS letters (nAMD)** and **+6.7 letters (DME)**, while CST reductions were **-93.3 µm (nAMD)** and **-56.2 µm (DME)**. Both treatment-naïve and previously treated eyes showed rapid fluid resolution with consistent safety, mirroring Phase 3 trial outcomes. Mean injections were 4.2 (nAMD) and 4.0 (DME), supporting real-world durability.



Poster Number: PP26 | Authors: Dr. Aloy Majumdar | **Institution:** Chandra Eye hospital, Lucknow
Title: Efficacy of Faricimab (6mg) in Recalcitrant Exudative ARMD with CNVM Type-1 (Not Responding to Aflibercept 2mg, Ranibizumab 2.3mg, Brolucizumab 6mg)

Scientific Summary: This real-world study evaluated **84 eyes of 52 patients** with Type-1 CNVM (wet AMD) who failed to respond to prior anti-VEGF therapies (Aflibercept, Ranibizumab, Brolucizumab). After switching to Faricimab 6 mg, **IRF resolved in 92.4% of eyes by Week 20**, SRF cleared in 81% by Week 16, and **PED height reduced by 20–28%** in majority of cases. BCVA improved by ≥ 1 line in 66% of eyes at Week 8 and 72.6% at Week 16. No cases of IOI or vasculitis were reported, confirming Faricimab's efficacy and safety in highly resistant CNVM cases.

CONGRESS DIGEST

IPPF781. PREDICTORS OF EXTENDED TREATMENT INTERVALS IN DIME TREATED WITH FARICIMAB: PHASE 3 YOSEMITE TRIALS

ABSTRACT Faricimab, phase 3 trials (YOSEMITE), in patients with diabetic macula edema (DME), demonstrated similar best-in-class visual acuity (BCVA) and greater durability of macula edema resolution compared to bevacizumab or ranibizumab alone at 14 months (12M). This poster will explore treatment predictors of BCVA and visual acuity improvements at 18 months of treatment with faricimab or bevacizumab or bevacizumab in combination with ranibizumab.

METHODS A 12-month phase 3 (YOSEMITE) study (NCT02920502) in 1000 patients with DME, patients were randomized 2:1 to faricimab A3 mg or an anatomic target dose (ATD) of 2 mg or bevacizumab 1.25 mg or bevacizumab 1.25 mg + ranibizumab 0.3 mg. At 12M, patients with DME who did not achieve target BCVA were eligible to receive 18M of faricimab A3 mg, bevacizumab ATD, bevacizumab + ranibizumab, or bevacizumab + ranibizumab + faricimab A3 mg. All patients received 12M of faricimab A3 mg, bevacizumab ATD, bevacizumab + ranibizumab, or bevacizumab + ranibizumab + faricimab A3 mg. All patients received 18M of faricimab A3 mg, bevacizumab ATD, bevacizumab + ranibizumab, or bevacizumab + ranibizumab + faricimab A3 mg.

RESULTS At 12M, mean BCVA improved from 20/200 to 20/100 (P < 0.0001) in faricimab A3 mg, 20/200 to 20/100 (P < 0.0001) in faricimab ATD, 20/200 to 20/100 (P < 0.0001) in bevacizumab + ranibizumab, and 20/200 to 20/100 (P < 0.0001) in bevacizumab + ranibizumab + faricimab A3 mg. At 18M, mean BCVA improved from 20/200 to 20/100 (P < 0.0001) in faricimab A3 mg, 20/200 to 20/100 (P < 0.0001) in faricimab ATD, 20/200 to 20/100 (P < 0.0001) in bevacizumab + ranibizumab, and 20/200 to 20/100 (P < 0.0001) in bevacizumab + ranibizumab + faricimab A3 mg. Faricimab A3 mg, bevacizumab ATD, bevacizumab + ranibizumab, and bevacizumab + ranibizumab + faricimab A3 mg, all showed similar mean BCVA improvement at 18M.

DISCUSSION Faricimab, bevacizumab, bevacizumab + ranibizumab, and faricimab + bevacizumab + ranibizumab, all showed similar mean BCVA improvement at 18M.

Poster Number: PP78 | Authors: Dr. Aloy Majumdar | **Institution:** Chandra eye hospital, Lucknow
Title: Predictors of Extended Treatment Intervals in DME Treated with Faricimab: Phase 3 YOSEMITE / RHINE Trials

Scientific Summary: This post-hoc analysis from **YOSEMITE / RHINE (n = 1891)** identified baseline predictors associated with achieving **Q16W dosing intervals** in DME patients treated with Faricimab. Every **50µm reduction in baseline CST** increased the odds of reaching Q16W dosing at both Year 1 and Year 2. Greater early CST decrease and BCVA gain at Week 16 also significantly improved likelihood of durable Q16W extension. Findings suggest that **early anatomical response can predict long-term interval success**, supporting Faricimab's role in reducing treatment burden.

Poster Number: PP79 | Authors: Dr. Ritesh Narula, LVPEI, Hyderabad

Title: Faricimab for Polypoidal Choroidal Vasculopathy: 1-Year Results from the Phase 3B/4 SALWEEN Trial

Study Type: Phase 3B/4 – Asian PCV population (W16 + 1-Year data)

Scientific Summary: The SALWEEN trial enrolled **135 Asian patients with macular PCV**, receiving four monthly Faricimab 6 mg injections followed by Q8W/Q12W/Q16W based on disease activity. At Week 16, mean BCVA improved by **+7.7 letters**, and CST reduced by **-142.2 µm**, with **80.3% of eyes free of SRF/IRF and 51% showing complete closure of polyps**. Faricimab was well tolerated with no new safety signals, and over **86% of eyes showed inactive PCV lesions**. One-year durability, polyp regression, and biomarker outcomes will further support long-term dual Ang-2/VEGF-A inhibition benefits in PCV.

Poster Number: PP82 | Authors: Dr. Ramesh Venkatesh, NN, Bengaluru

Title: Baseline & Early Treatment Response Variables of Faricimab Durability in Treatment-Naïve nAMD

Study Type: Post-hoc analysis from Phase 3 TENAYA / LUCERNE trials

Scientific Summary: This analysis evaluated predictors of extended Faricimab dosing (\geq Q12W and Q16W) in **treatment-naïve nAMD patients** from the TENAYA/LUCERNE trials. Patients with **lower baseline CST, lower PED height, and early \geq 100 μ m CST reduction at Week 12** had significantly higher odds of maintaining \geq Q12W durability through Week 112. Absence of SRF and smaller baseline choroidal neovascular lesion size also increased probability of Q20W extension. Findings support the role of **early anatomical response as a key driver of long-term dosing interval success**.

Poster Number: PP163 | Authors: Dr. Vijaya Sahu, AIIMS, Raipur

Title: Rewriting the Role of Rescue: Faricimab Monotherapy in Massive Subretinal Haemorrhage from PCV

Study Type: Single-patient case report

Scientific Summary: This case reports a 69-year-old female with PCV who presented with a **massive subretinal haemorrhage** after being lost to follow-up. Fundus evaluation showed a large 5-disc diameter bleed with PED and exudates. She received **three Faricimab injections** at 4-week intervals, resulting in improved vision (3/60 - 6/9) and a marked reduction in subretinal bleed size. The case suggests **Faricimab monotherapy can act as an effective rescue option in severe PCV-related haemorrhage**, even in eyes previously treated with anti-VEGF agents.

Update on Faricimab for DME: New Clinical Features of Eyes in the RHONE-X Long-Term Extension Study

Title: Update on Faricimab for DME: New Clinical Features of Eyes in the RHONE-X Long-Term Extension Study

Authors: Dr. Parveen Sen, Dr Agarwals eye Hospital, Chandigarh

Intraretinal and Subretinal Fluid Resolution With Vamikirkabt in Uveitic Macular Edema: DOVETAIL Study

Title: Intraretinal and Subretinal fluid Resolution With Vamikibart in Uveitic Macular Edema: DOVETAIL Study

Authors: Dr. Jyotirmay Biswas,
SN, Chennai

Molecule: Vamikibart

