

**Seminario ANMDO**  
**Milano, 18 giugno 2018**

# **Esempio gestione pazienti cronici**



School of Medicine  
Dept. of Surgical and Morphological Sciences  
Section of Ophthalmology  
University of Insubria, Varese - Italy  
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# Age Related Macula Degeneration

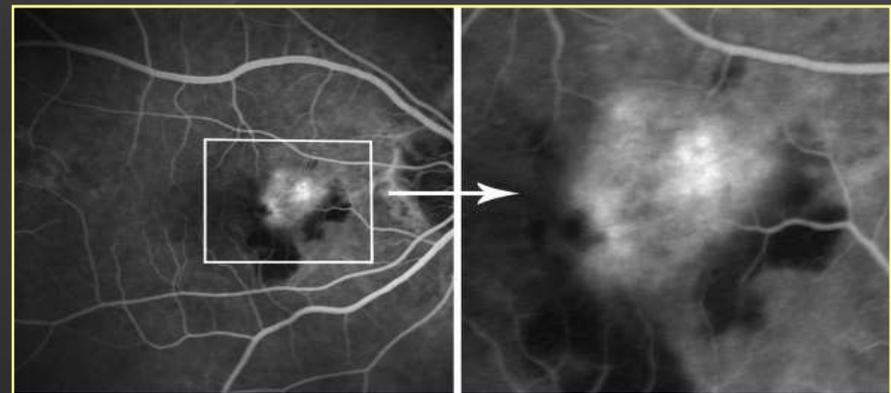
> 60 yrs

In Italy:

sign of disease: 1M

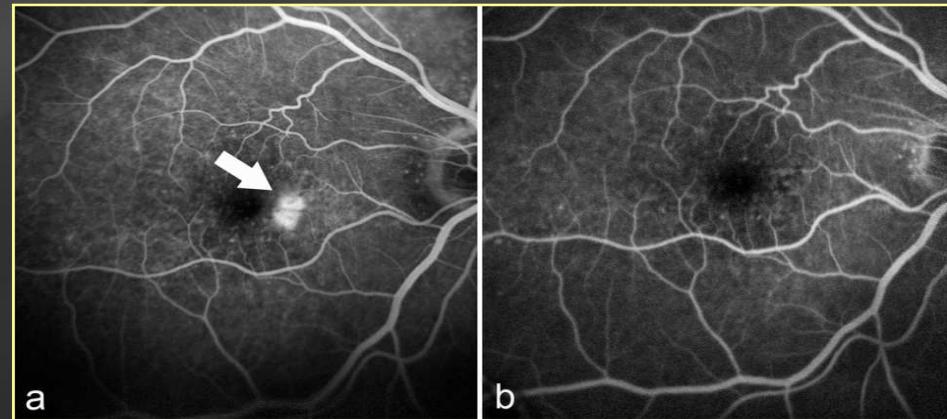
new cases: 20000/yrs

in next 25 yrs: X 3



**Prophylaxis: lifestyles  
Genetic test**

**Therapy: pharmacology, laser, (surgery)**



# Wet-AMD: from clinical study to clinical practice

To accelerate process of care:

- \* quick access to therapy
- \* screening campaign
- \* retina center's map
- \* more retina centers
- \* rehabilitation
- \* ophthalmologists' collaboration
- \* more control's discretion
- \* medical experience



# Difficulties in real life

\* high number of patients



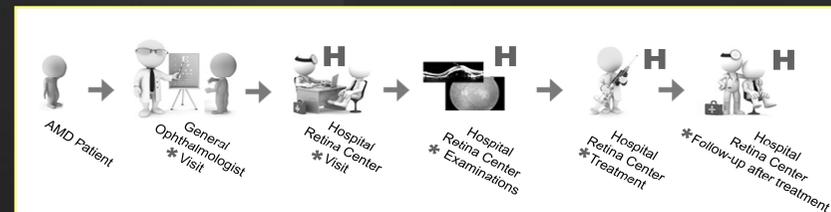
\* intravitreal injection as surgery



\* administration procedures (AIFA, hospitals, check..)



\* often slow access to therapy



# Possible steps of amelioration

\* number of patients



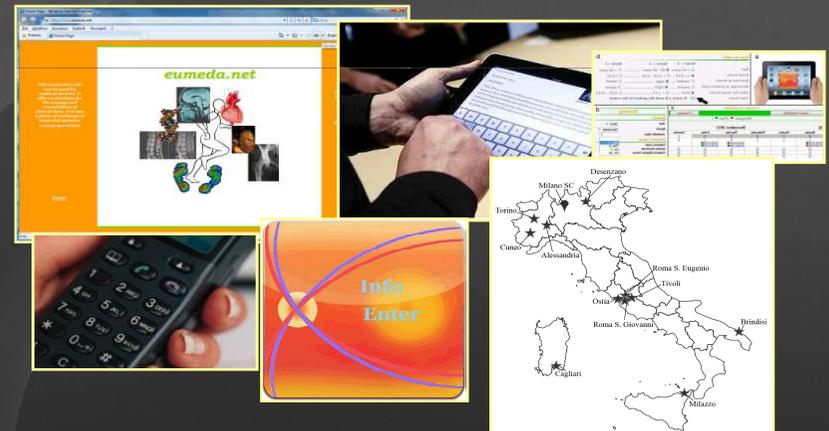
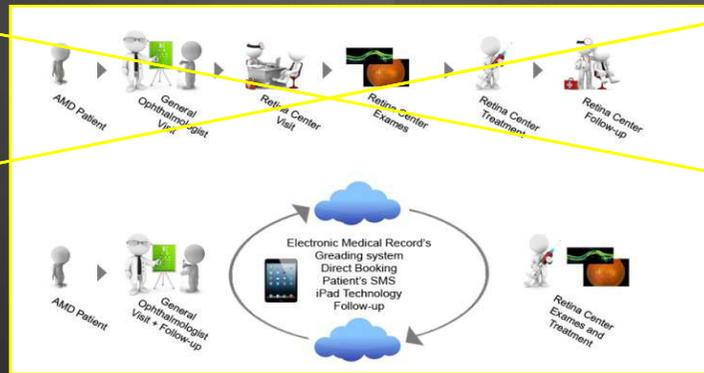
# \* simplify injection procedures



# \* simplify administrative procedures



# \* better access to therapy



# Integration/collaboration

Represents the best way to raise medical care efficacy

- Hospital-territory integration
- Private/Public Health integration
- Multidisciplinary integration



# iRetina Project Purpose

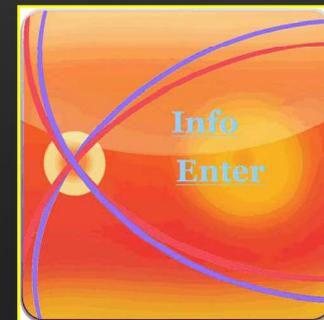
To improve eye care efficacy by using a teleconsultation network between ophthalmologist working on territory and those working in Retina Centers



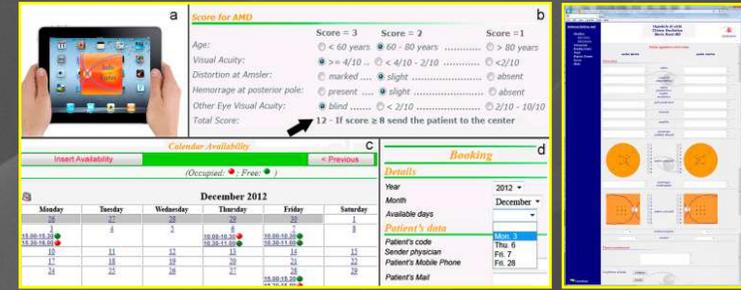
# Materials & Methods

- iRetina app/iPad devices
- grading system with automatic scoring to quantify the risk of disease progression
- interactive remote booking system to make appointments directly with Hospital Retina Centers from outside
- three-months period
- 10 Italian cities/11 groups of ophthalmologists

[eumeda.net](http://eumeda.net)

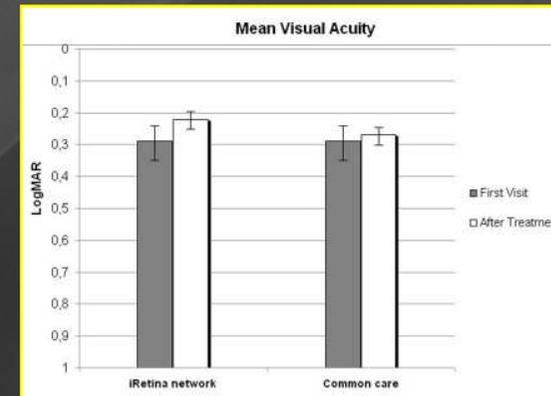
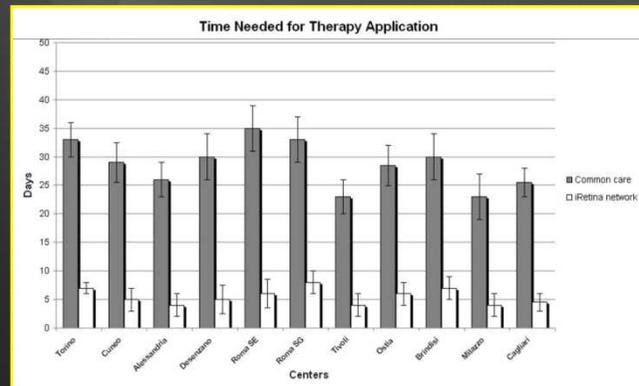


# Results



10 Italian cities  
11 groups of ophthalmologists

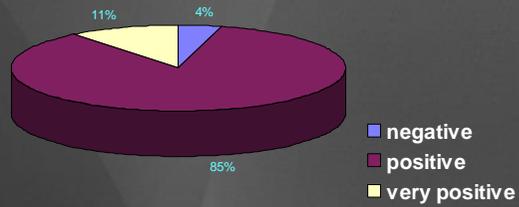
grading system with automatic scoring to quantify the risk of disease progression



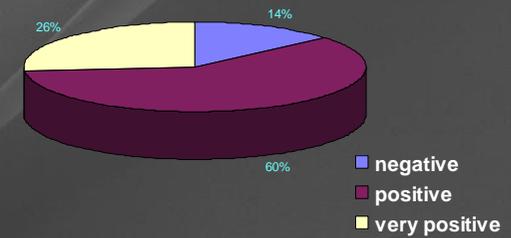
In 276 cases appropriate anti-VEGF treatment was promptly delivered within a mean of 5.5 days (range 4.6-6.4 days), compared to a mean of 28.7 days for common care used as a control group (range 26.2-31.2 days;  $p=1.91E-10$ ).

# Process of Care Evaluation

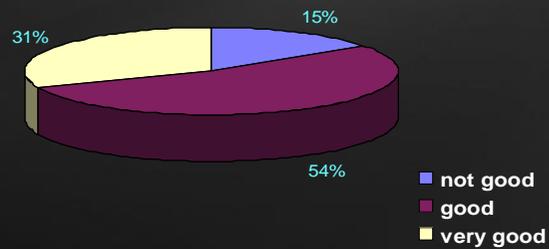
## Access



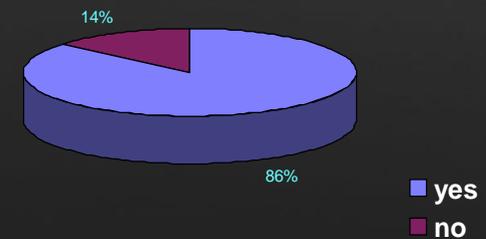
## Acceptability



## Data Quality

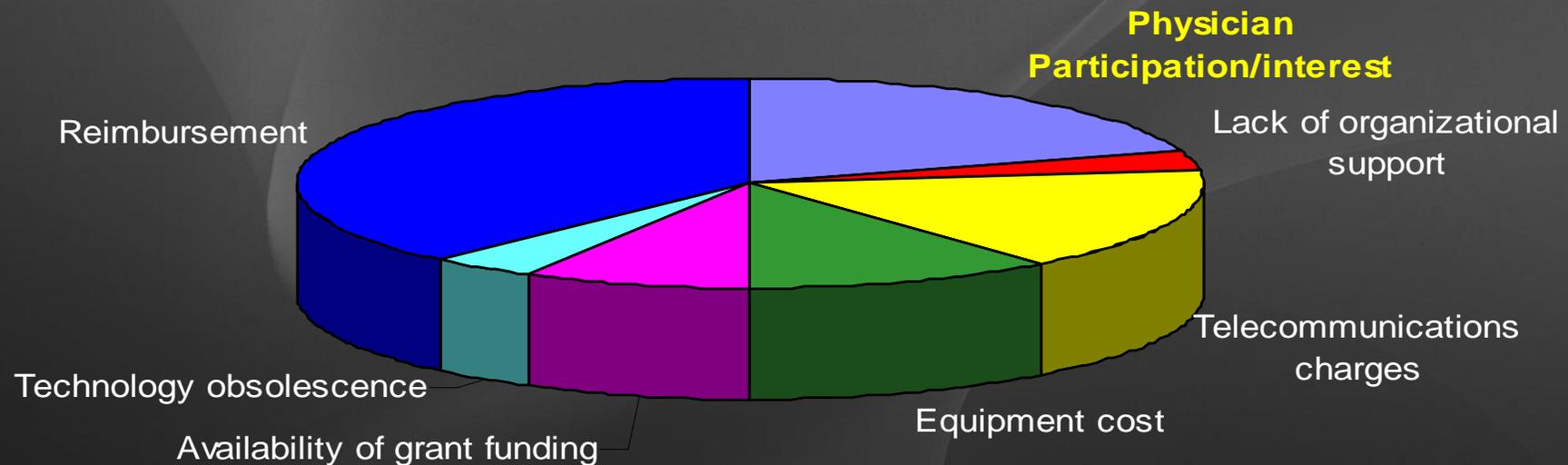


## Med Efficacy



# Enter' Barriers

## *Reported barriers to program sustainability*



\* From 1998 ATSP Report

