

I am writing to you regarding the above appraisal which I attended on behalf of the RNIB as a consultee expert.

I would like to comment under the following heading:

“Are the provisional recommendations sound and a suitable basis for guidance to the NHS?”

It is important that ophthalmologists are able to treat patients with RVO for which Dexamethasone (Ozurdex) may be contra-indicated and it is that we are able to offer a licensed anti-VEGF drug in these situations. Contraindications to Ozurdex would be cases with existing glaucoma, previous raised intraocular pressure with steroids, known adverse reactions to dexamethasone and cases where large needle intraocular injections may be inadvisable (Ozurdex is 22 gauge compared to 30 gauge for ranibizumab) i.e. needle phobia, recent intraocular surgery. For these patients an alternative to Ozurdex is required, and ranibizumab should be approved for these special cases, which will represent limited numbers.

Yours sincerely,

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