

SUPPLEMENTARY MATERIALS

Changes in intraocular pressure after intravitreal fluocinolone acetonide (ILUVIEN): real-world experience in three European countries

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Supplementary tables

Table S1. IOP Elevation and management in the full population and subgroups compared with the FAME trial

Patients, n (%)	FAME study		IRISS study	
	cDMO patients (n=209)	Overall population* (n=593)	Short-term cDMO (n=116 eyes)	Long-term cDMO (n=451 eyes)
IOP increase of ≥10 mmHg	51 (24.4)	65 (11.0)	11 (9.5)	53 (11.8)
IOP elevation >30 mmHg	20 (9.6)	49 (8.3)	6 (5.2)	42 (9.3)
Trabeculoplasty	0 (0.0)	2 (0.3)	0 (0.0)	2 (0.4)
Trabeculectomy	1 (0.5)	7 (1.2)	0 (0.0)	6 (1.3)
Incisional IOP- lowering surgery	—	5 (0.8)	0 (0.0)	4 (0.9)
Treatment-emergent IOP-lowering medication [†]	50 (23.9)	138 (23.3)	25 (21.6)	107 (23.7)

*Mean duration of follow up was 471 days (range 1–1269 days).

[†]IOP-lowering medication initiated after 0.2 µg/day FAc implant administration.

cDMO, chronic diabetic macular oedema; FAc, fluocinolone acetonide; FAME, Fluocinolone Acetate for Macular Edema; IOP, intraocular pressure; IRISS, ILUVIEN Registry Safety Study.

Table S2. Additional diabetic macular oedema (DMO) treatments administered during the study

Additional treatment	No. of eyes (%)	Mean no. of treatments
Thermal laser	57 (9.6)	1.6
Intravitreal anti-VEGF injection	133 (22.4)	5.0
Intravitreal steroid injection	39 (6.6)	1.9
Retreatment with FAc implant	6 (1.0)	1.0

Anti-VEGF, anti-vascular endothelial growth factor; FAc, fluocinolone acetonide.

Table S3. Prior diabetic macular oedema therapies

Prior therapy	No. of eyes (%)	Mean no. of treatments
Any prior therapy	587 (99.0)	
Laser		
Focal laser	181 (30.5)	1.7
Grid laser	146 (24.6)	1.7
Panretinal photocoagulation	192 (32.4)	2.5
Intravitreal anti-VEGF		
Ranibizumab	393 (66.3)	5.3
Bevacizumab	171 (28.8)	3.3
Aflibercept	31 (5.2)	4.0
Intravitreal steroids		
Dexamethasone implant	114 (19.2)	1.4
Ocular steroid injection	134 (22.6)	2.7

Anti-VEGF, anti-vascular endothelial growth factor.

Table S4. Prior diabetic macular oedema treatments by duration of diabetic macular oedema subgroup

	Long-term cDMO (n=451)	Short-term cDMO (n=116)
Mean time since last treatment, years (SD) / months	0.83 (0.0572) / 9.96	0.590 (0.0815) / 7.08
Last intervention, n (%)		
Focal laser	16 (3.6)	6 (5.5)
Grid laser	10 (2.3)	6 (5.5)
Panretinal photocoagulation	30 (6.8)	10 (9.2)
Anti-VEGF	257 (58.0)	60 (55.0)
Ocular steroid	106 (23.9)	21 (19.3)
Others	21 (4.7)	4 (3.7)
Not known	11 (2.5)	9 (8.3)

Anti-VEGF, anti-vascular endothelial growth factor; cDMO, chronic diabetic macular oedema; SD, standard deviation

Table S5. Time since prior diabetic macular oedema treatment by lens status and diabetic macular oedema duration subgroup

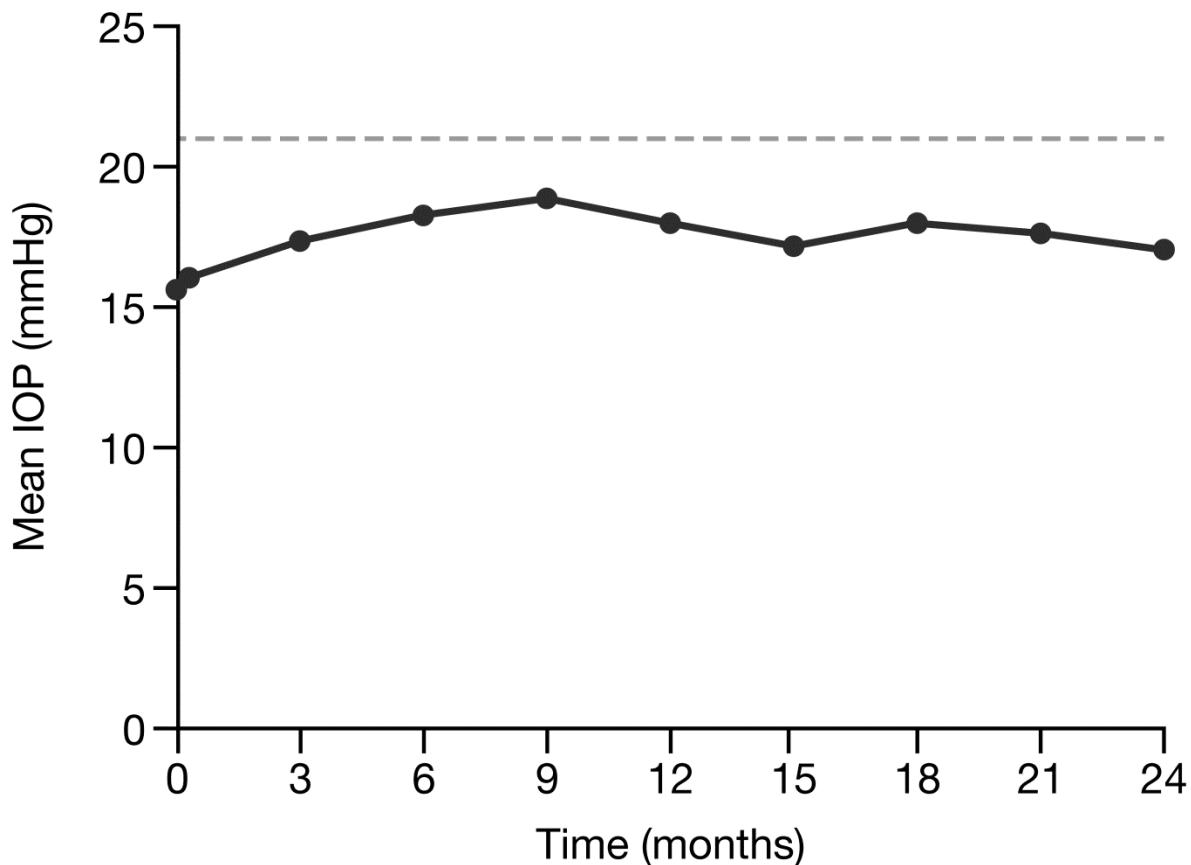
Time since last treatment (years \pm SD)	Long-term cDMO		Short-term cDMO	
	Pseudophakic	Phakic	Pseudophakic	Phakic
	Eyes (n = 269)	Eyes (n = 45)	Eyes (n = 53)	Eyes (n = 17)
Focal laser	5.12 \pm 3.402	5.19 \pm 2.821	1.21 \pm 1.27	1.11 \pm 0.534
Grid laser	4.52 \pm 3.561	5.8 \pm 0.93	2.33 \pm 3.189	2.27 \pm 1.485
Ranibizumab	0.81 \pm 0.834	1.5 \pm 1.405	0.52 \pm 0.614	0.56 \pm 0.398
Panretinal photocoagulation	3.56 \pm 3.96	2.17 \pm 1.746	0.68 \pm 0.476	0.55 \pm 0.235

cDMO, chronic diabetic macular oedema; SD, standard deviation

Supplementary figures

Figure S1. Changes in IOP over 24 months of follow up in the overall study

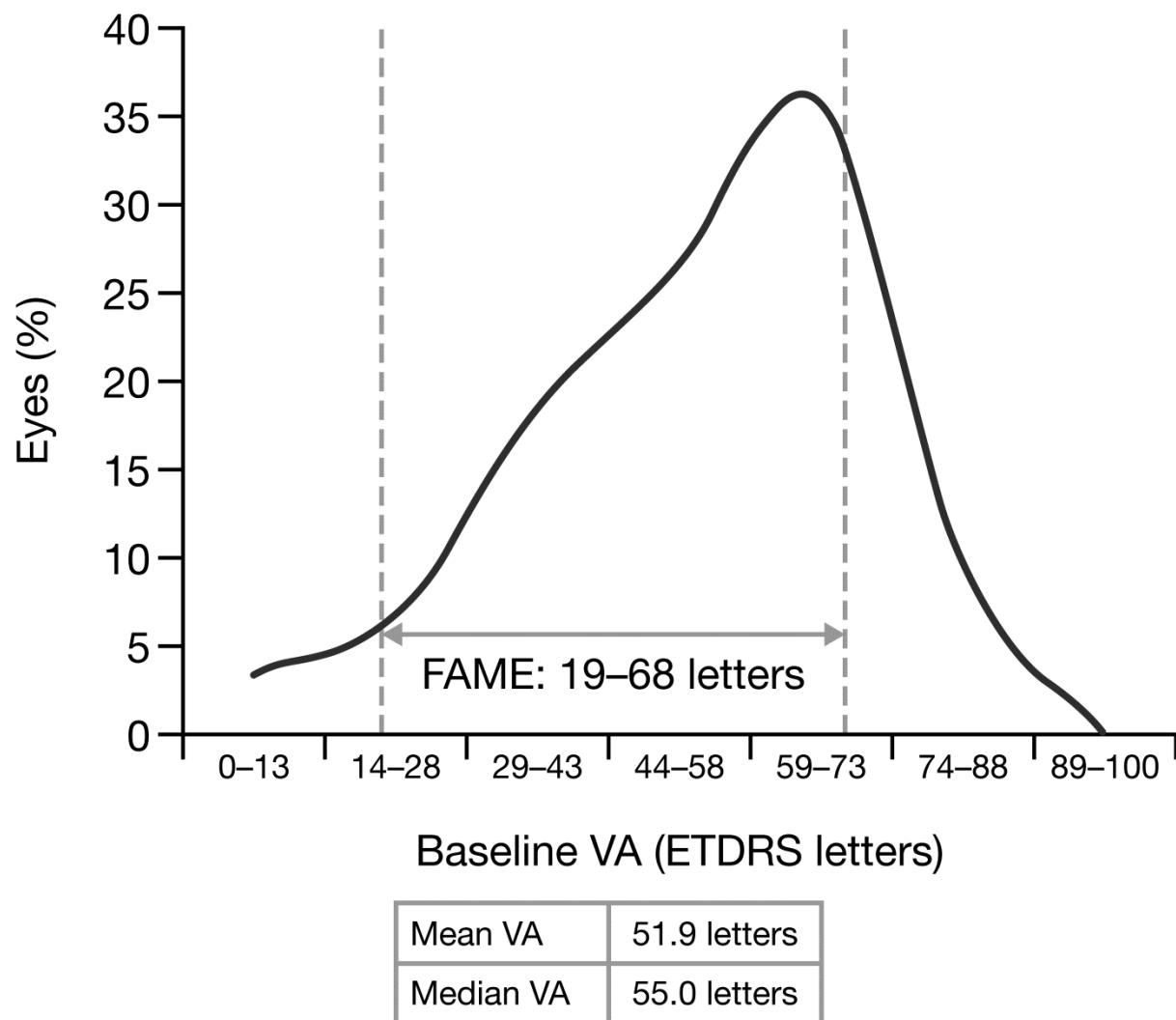
population.



Dashed line shows 21 mmHg IOP threshold for ocular hypertension.

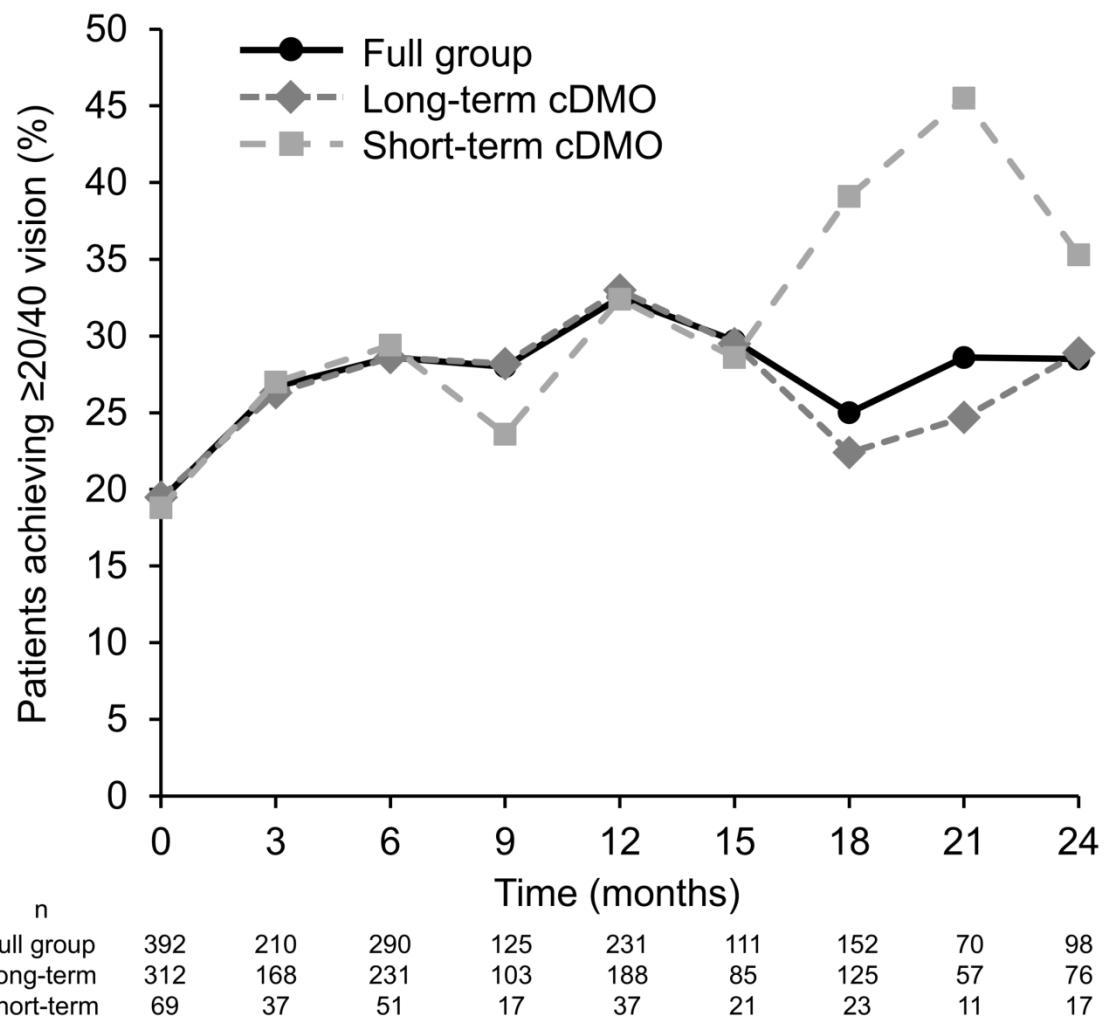
Abbreviation: IOP, intraocular pressure.

Figure S2. Distribution of VA at baseline



Abbreviations: ETDRS, Early Treatment Diabetic Retinopathy Study; FAME, Fluocinolone Acetate for Macular Edema; VA, visual acuity.

Figure S3. Percentage of patients achieving $\geq 6/12$ vision in their fluocinolone acetonide-treated eye in the overall study population and by diabetic macular oedema duration subgroup



Abbreviations: cDMO, chronic diabetic macular oedema.