

XLIX CONGRESSO REGIONALE S.O.Si.

PRESIDENTE: PROF. PASQUALE ARAGONA

**10-12 APRILE 2025
UNAHOTELS - NAXOS BEACH SICILIA (ME)**

Applicazione dell'IA nella valutazione dei biomarkers infiammatori nell'Edema Maculare Diabetico

A. Sclaro , G. W. Oliverio, F. Malandra y Salazar, A. Meduri, P. Aragona

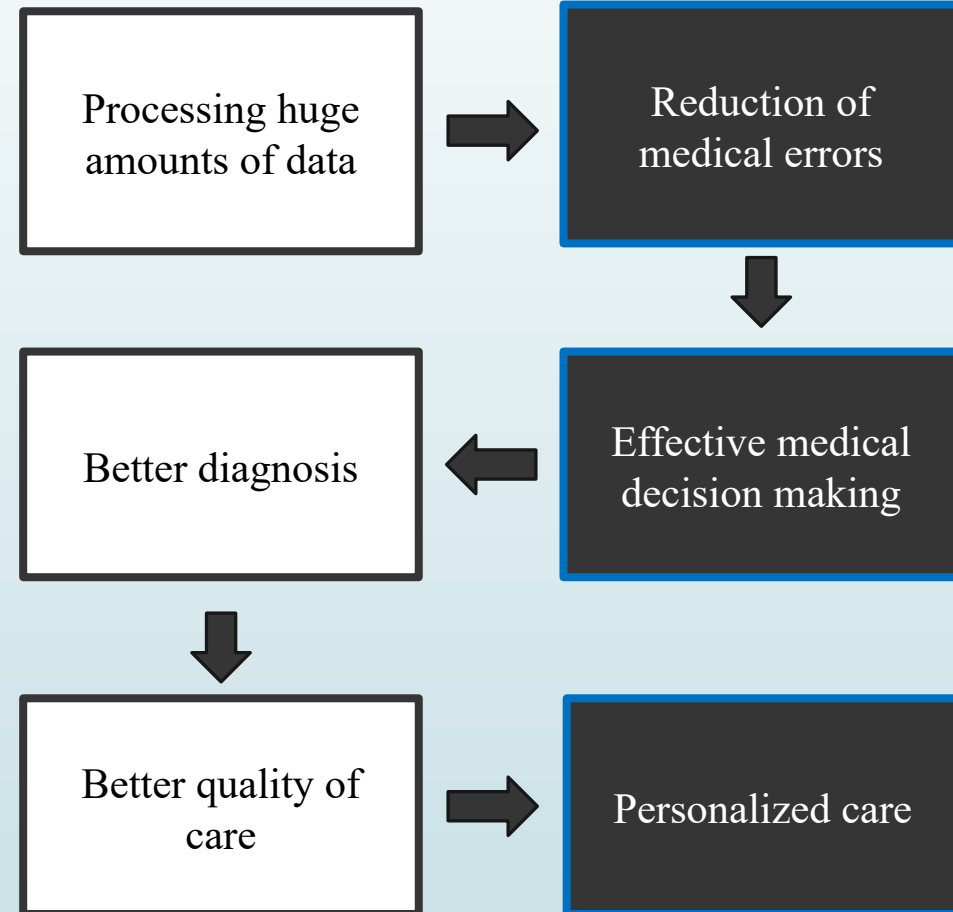
XLIX Congresso Regionale SOSi, 10-12 Aprile 2025, Giardini Naxos

“Artificial intelligence (AI) systems are set to transform the way we think about diagnosing and treating diseases”

Harpreet Singht Buttar, Frost & Sullivan analyst

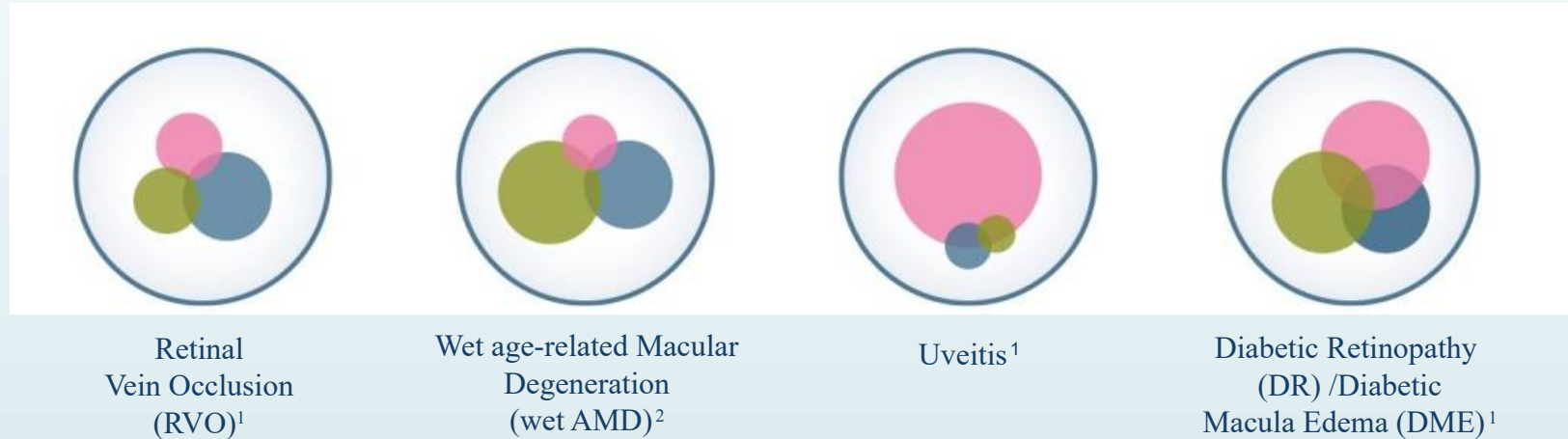


AI in medicine: which advantages?



Role of Inflammation

It plays a key role in the pathogenesis of retinal diseases:^{1,2}



- **In the aqueous humor** of patients with diabetic retinopathy, there is **an increasing of proinflammatory cytokines in addition to VEGFs**.³
- **Cytokine concentrations** (except that of VEGF) **correlate significantly** with the severity of DR.⁴

¹ Johnson MW. AM J Ophthalmol 2009; 147: 11-21. ² Nowak JZ. Pharmacol Rep 2006; 58: 353-63. ³ Lee WJ et al. Br J Ophthalmol 2012; 96:1426-30. ⁴ Dong N et al. Mol Vis 2013; 19:1734-46. VEGF = vascular endothelial growth factor

Aqueous Humor Cytokines in Diabetic Retinopathy

In a study comparing the changes in concentrations of 27 aqueous humor cytokines between nondiabetic controls and diabetic patients with various severities of retinopathy, inflammatory mediators, but not VEGF, were found to be correlated with DR severity.

Relationship between the concentrations of the assayed cytokines and the severity of DR							
Level ^a	N	VEGF (SD)	IL-1 β (SD)	IL-6 (SD)	IL-8 (SD)	MCP-1 (SD)	IP-10 (SD)
10	28	967.0 (425.1)	10.0 (12.4)	32.1 (33.8)	22.8 (22.1)	252.5 (227.6)	2.1 (1.73)
20	23	952.8 (355.9)	11.0 (18.4)	33.5 (37.1)	20.6 (25.5)	303.6 (159.32)	2.5 (2.7)
35	26	956.4 (378.7)	9.2 (14.4)	33.1 (40.6)	22.7 (31.1)	339.5 (244.8)	5.6 (4.0)
43	18	1084.7 (349.9)	10.7 (16.4)	33.2 (43.3)	24.4 (33.1)	468.8 (273.9)	5.5 (3.9)
47	13	1172.6 (423.1)	18.8 (15.3)	56.6 (51.4)	29.2 (33.7)	645.2 (318.7)	9.5 (12.1)
53	8	1177.3 (534.5)	22.7 (17.1)	106.7 (52.7)	49.4 (41.5)	921.2 (391.1)	22.3 (16.7)
65	7	1142.7 (573.3)	23.7 (29.0)	116.8 (60.4)	51.0 (22.8)	1215.1 (435.9)	31.3 (24.4)
75	8	1051.4 (296.6)	27.6 (36.0)	147.0 (97.1)	75.7 (58.9)	1286.6 (383.4)	34.3 (20.1)
81	5	1165.4 (326.8)	45.8 (33.1)	188.6 (106.6)	74.4 (59.3)	1630.8 (601.2)	29.2 (18.6)
p-value		0.733	0.003	<0.001	0.001	<0.001	<0.001

- Aqueous humor levels of VEGF **were not significantly** correlated with DR severity
- Aqueous humor levels of IL-1 β , IL-6, IL-8, MCP-1 and IP-10 **increased significantly** with DR severity

^aETDRS retinopathy severity
ETDRS = Early Treatment Diabetic Retinopathy Study; IL = interleukin; IP = interferon-induced protein; MCP = monocyte chemoattractant protein; VEGF = vascular endothelial growth factor
Dong N, et al. Molecular Vision. 2013;19:1734-1746.

Inflammation contributes to the breakdown of BRB and onset of DME¹⁻⁴

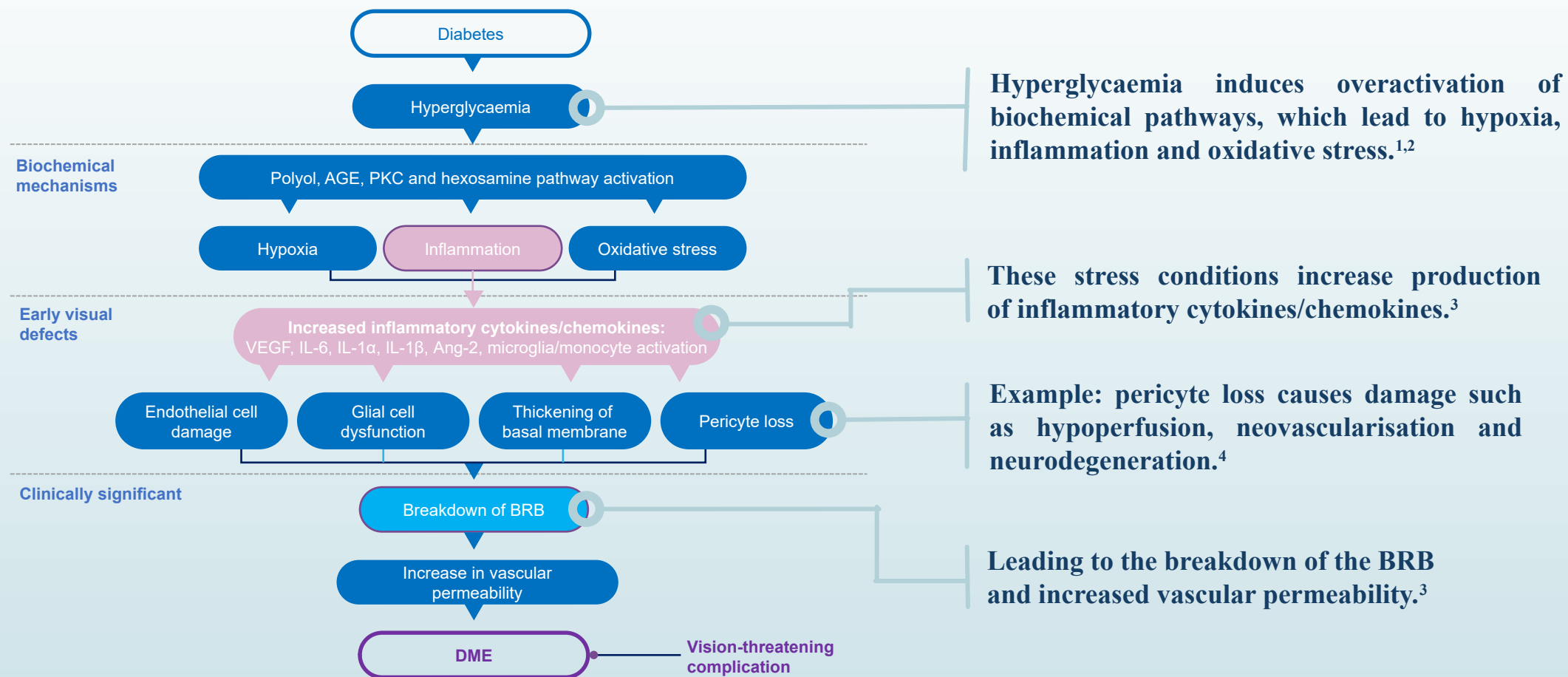
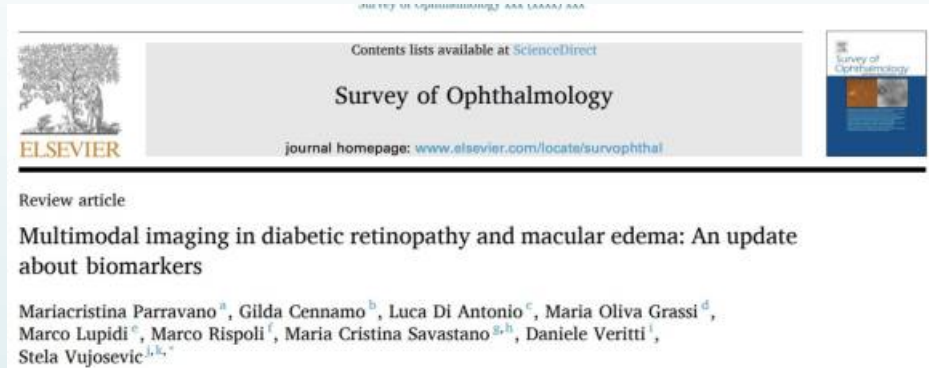


Figure adapted from Das A et al. 2015⁵, Urias EA et al. 2017³ and Ansari P et al. 2022⁴

AGE, advanced glycation end product; Ang, angiotensin; BRB, blood–retinal barrier; DME, diabetic macular oedema; IL, interleukin; PKC, protein kinase C; VEGF, vascular endothelial growth factor.

1. Bahrami B, et al. *Diabetologia*. 2016;59(8):1594–608; 2. Wu MY, et al. *Oxid Med Cell Longev*. 2018;2018:3420187; 3. Urias EA, et al. *Vision Res*. 2017;139:221–7; 4. Ansari P, et al. *Diabetologia*. 2022;3(1):159–75; 5. Das A, et al. *Ophthalmology*. 2015;122(7):1375–94.

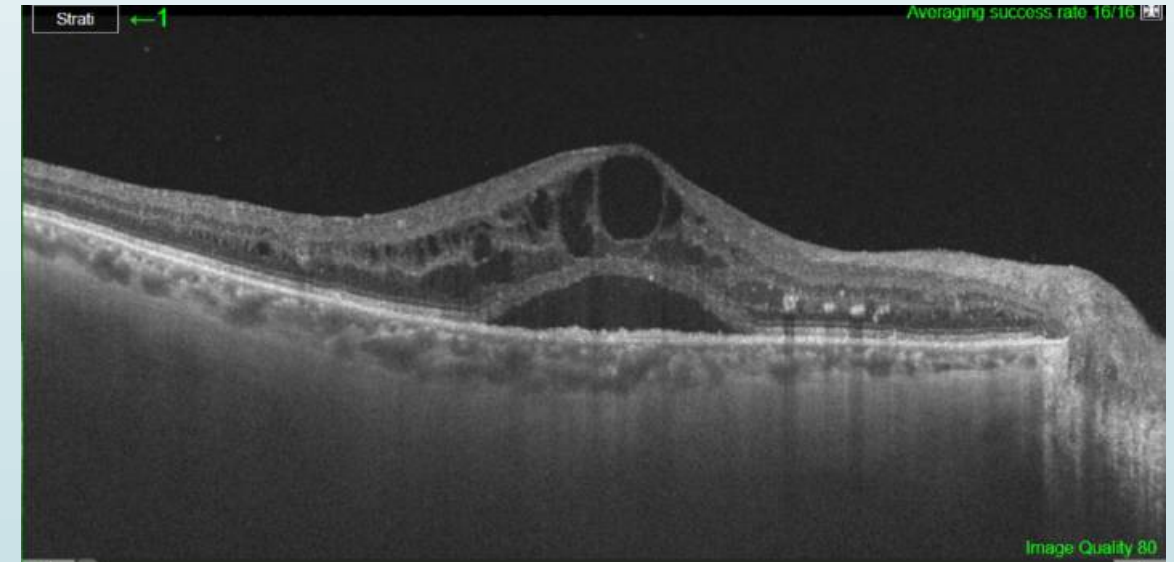
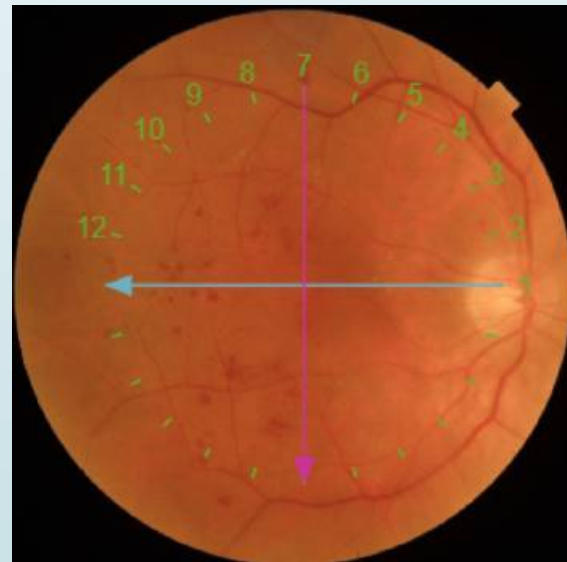
Inflammatory Biomarkes



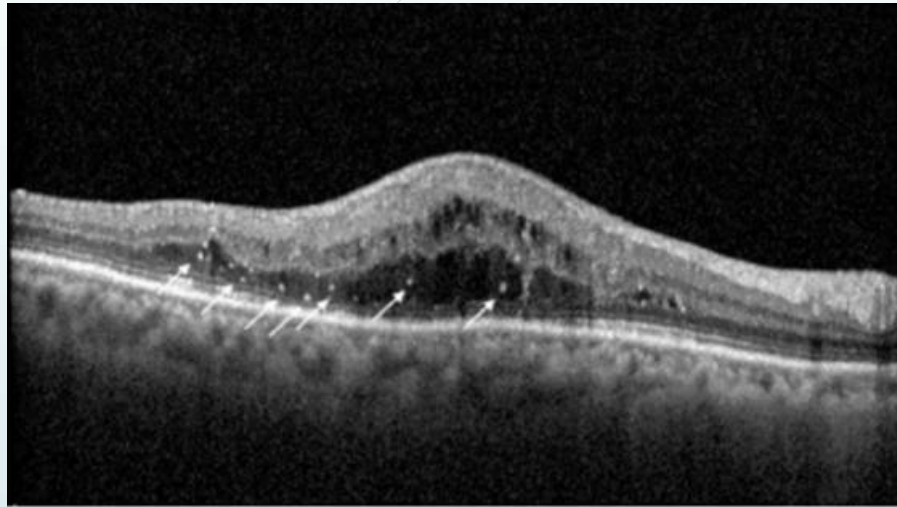
- **HRF: hyperreflective foci**
- **ELM/EZ INTERRUPTION**
- **SUBFOVEAL NEURORETINAL DETACHMENT**
- **DRIL: disorganization of retinal inner layers**

Simon KH. Szeto et al. Progress in Retinal and Eye Research 98 (2024) 101220

J.K. Sun et al, Diabetes 2015
S. Radwan et al, JAMA Ophth 2015
S.Vujosevic et al. Acta Ophthalmol 2017
M. Parravano et al. Acta Diabetol 2020
M.Parravano et al. Surv Ophthalmol 2024



Hyper-reflective foci



d: HRF (white arrows)
Note the well circumscribed dots that are $\leq 30\mu\text{m}$ in diameter with reflectivity similar to the RNFL and without back shadowing

Well-circumscribed spots, distinguishable from hard exudates by the following characteristics:

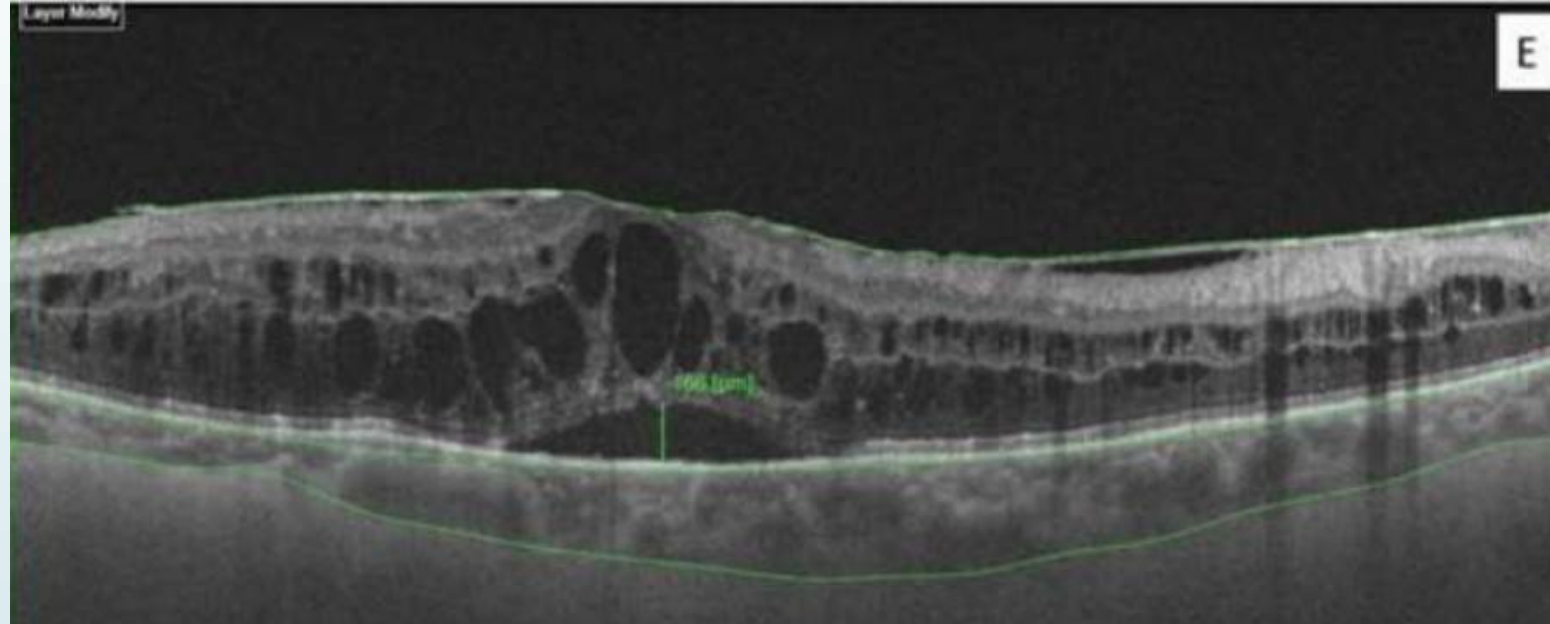
- Moderate reflectivity
- Absence of posterior shadows
- Small diameter ($\leq 30\mu\text{m}$)
- Well-circumscribed round shape
- Not related to retinal vessels

The inflammatory nature of HRFs is supported by several studies.

- Kokona et al., 2017: HRFs observed on OCT correspond to macrophages in histology and fluorescence-activated flow cytometry.
- Lee et al., 2018: Proteomic analysis showed that the presence of HFs strongly correlates with increased levels of CD14, a cytokine released by microglia and macrophages, further supporting the idea that HFs are activated microglia.

Simon KH. Szeto et al. Progress in Retinal and Eye Research 98 (2024) 101220

Subfoveal neuroretinal detachment



It is a serous detachment of the neuroepithelium due to the formation of subretinal fluid due to leakage from the choriocapillaris:

- Associated with high levels of IL6 and IL8
- Associated with high presence of HRF

Efficacy of dexamethasone implant on diabetic macular edema

Anatomic Response to Intravitreal Dexamethasone Implant and Baseline Aqueous Humor Cytokine Levels in Diabetic Macular Edema

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²August Pi i Sunyer Biomedical Research In
³Respiratory Department, Hospital Universi

> J Ophthalmol. 2021 Mar 24;2021:6639418. doi: 10.1155/2021/6639418. eCollection 2021.

Optical Coherence Tomography Predictors of Favorable Functional Response in Naïve Diabetic Macular Edema Eyes Treated with Dexamethasone Implants as a First-Line Agent

Alessandro Meduri¹, Giovanni William Oliverio¹, Luigi Trombetta¹, Marta Giordano¹,
Leandro Inferred¹, Costantino John Trombetta¹

> Diagnostics (Basel). 2020 Jun 17;10(6):413. doi: 10.3390/diagnostics10060413.

The Application of Structural Retinal Biomarkers to Evaluate the Effect of Intravitreal Ranibizumab and Dexamethasone Intravitreal Implant on Treatment of Diabetic Macular Edema

Ida Ceravolo¹, Giovanni William Oliverio¹, Angela Alibrandi¹, Absar Bhatti², Luigi Trombetta¹

Original Article

Effect of dexamethasone implant on intraocular cytokines in diabetic macular edema

Jupta, Tessy Xavier¹, Natasha Radhakrishnan, Krishnakumar N Menon¹,
Rehna Rasheed, Greeshma C Ravindran²

uate intraocular cytokines (IC) before and after dexamethasone
secondary aim was to study the early and late effects of single
ds: This before and after comparative study was conducted at the
tre for Nanosciences at a quaternary referral center in Kerala, India,
s. Patients underwent complete ophthalmological examination and
ethasone implant. Levels of cytokines at baseline and repeat sample
(21 patients) were divided into two groups depending on time from
uded patients with <3 months between the two samples – 12 (44.4%).
nths between the two samples –15 (55.6%). Best corrected visual
ickness (CMT) improved significantly post-dexamethasone in
(IL)-4, IL-6, IL-10, vascular endothelial growth factor (VEGF), IL-1β,
(IP-10), monocyte chemoattractant protein-1 (MCP-1), and IL-2
cytokines increased post-dexamethasone in group 2, except IL-10.
d to half in group 1 (*P*-value 0.814) and it tripled in group 2 (*P*-value
second samples was not different in either group. **Conclusion:** Our
nore on IC than VEGF in DME. This is significant in the first 3 months
nths. Our study also suggests that repeat injection of DEX in DME
eterioration of visual acuity (VA) and worsening of CMT.

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39418

Clinical and optical coherence tomography biomarkers as prognostic factors in dexamethasone intravitreal implant for diabetic macular edema.

Oliverio GW, Meduri A, Brancati VU, Ingrande I, De Luca L, Raimondo ED, Minutoli L, Aragona E, Aragona P.

Eur J Ophthalmol. 2024 Nov;34(6):1810-1818. doi: 10.1177/11206721241235242. Epub 2024 Feb 21.

PMID: 38384119

PURPOSE: Aim of the study was to evaluate the efficacy of dexamethasone (DEX) 0.7 mg intravitreal

AI in retinal diagnosis: Ophtal, Mr.Doc¹

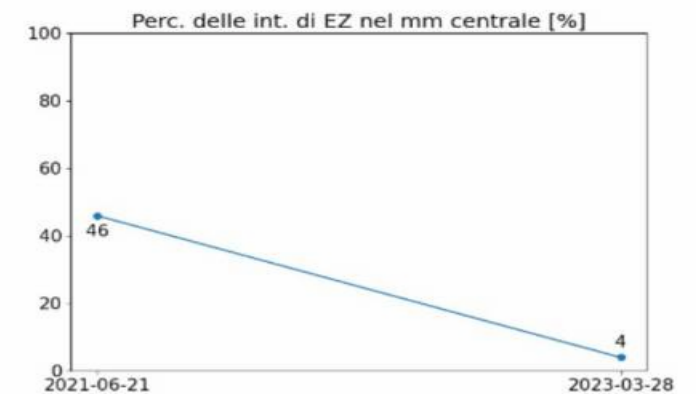
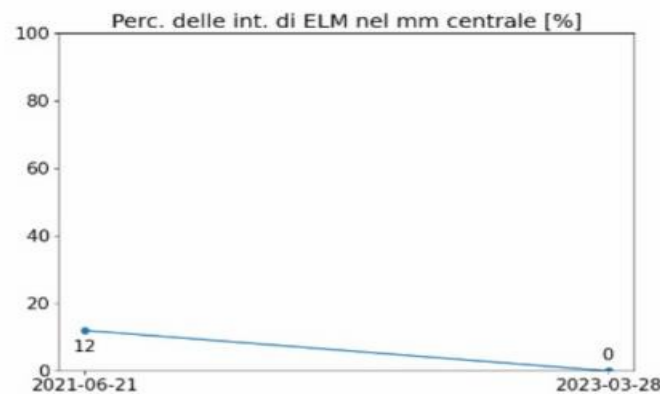
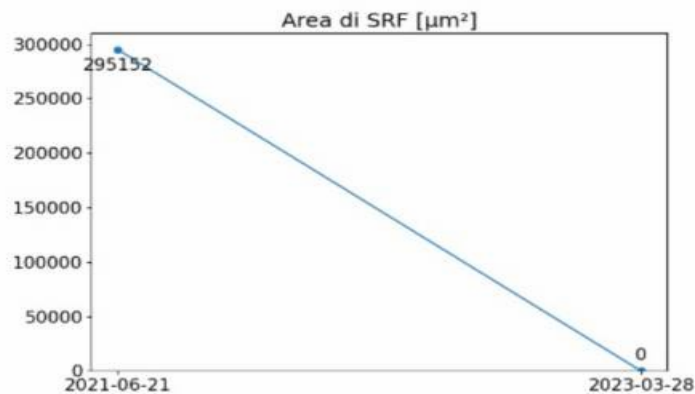
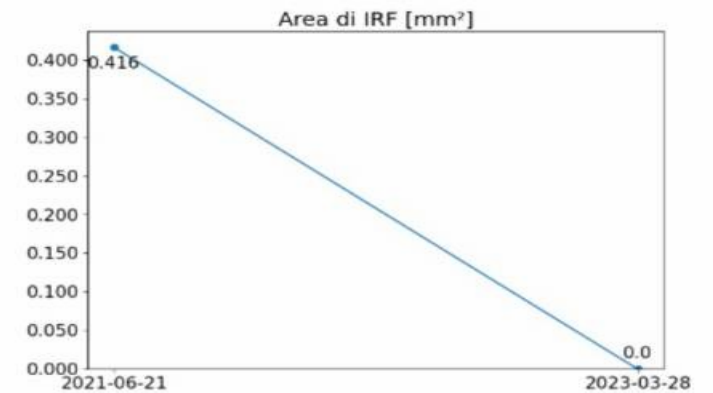
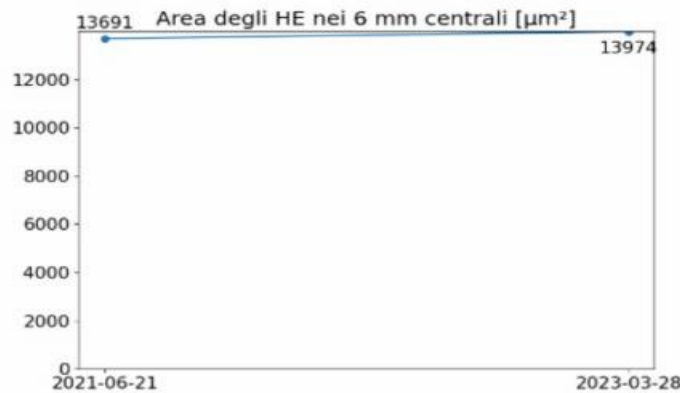
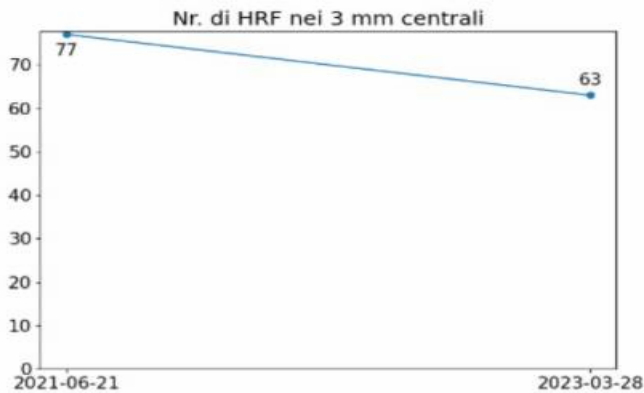
Tabelle Riepilogative e Grafici dei Risultati Aggregati

Scarica Grafici

Scarica CSV

Grafici

Tabella



1. <https://www.mrdoc.ai/it/ophtal>

AI in retinal diagnosis: Ophtal, Mr.Doc¹

Tabelle e Grafici dei Risultati Aggregati

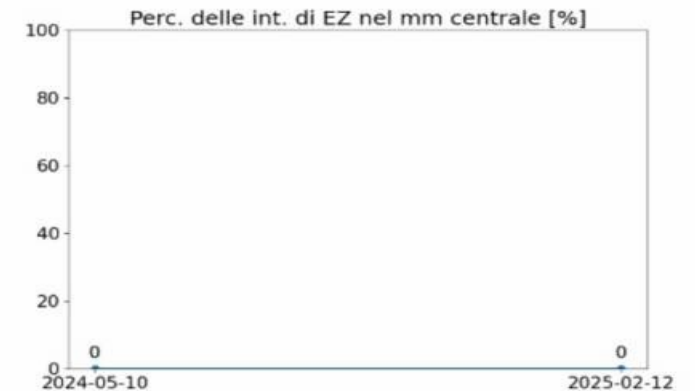
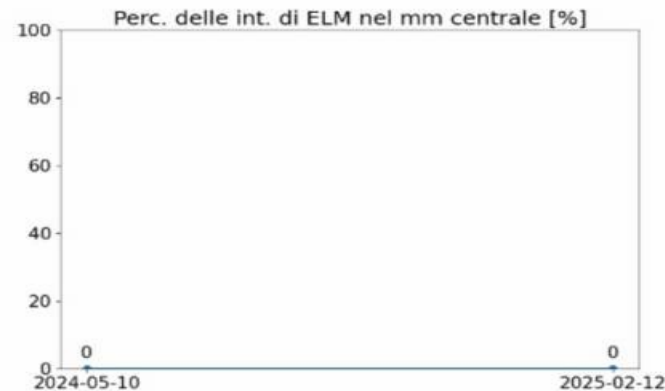
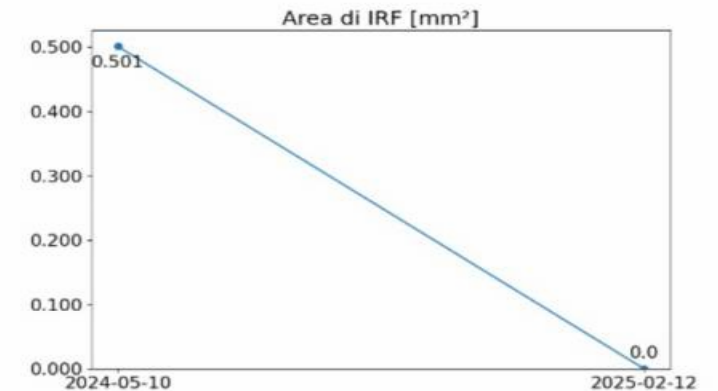
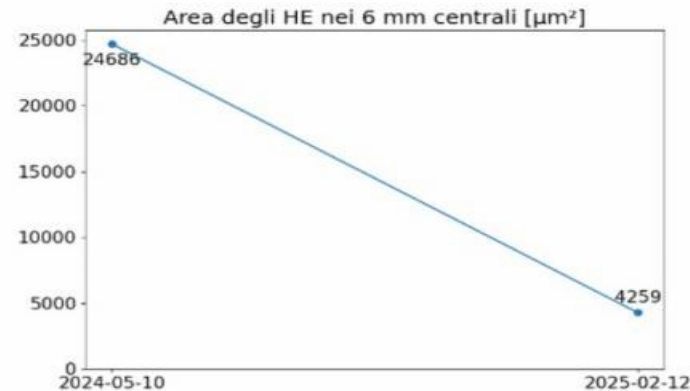
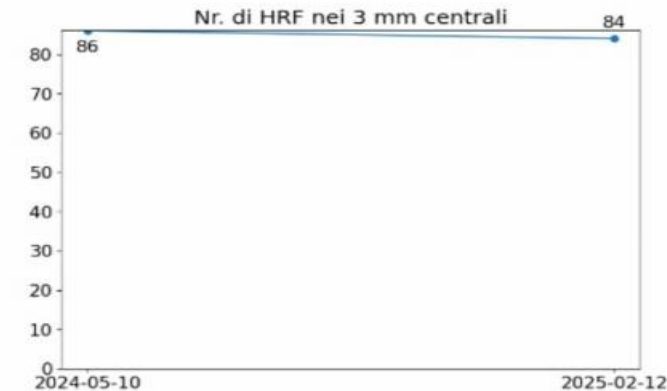
Tabelle Riepilogative e Grafici dei Risultati Aggregati

Scarica Grafici

Scarica CSV

Grafici

Tabella





UTILITY OF THIS ALGORITHM

- It provides reliable and reproducible assessment of the most relevant OCT biomarkers in DME and a clearer view of the different retinal layers.
- It can enable clinicians to routinely identify and quantify various parameters (IRF, SRF, ELM-EZ integrity, HRF quantification), providing an objective way to diagnose and follow up on DME patients.
- It can help the clinician in choosing the correct drug to administer to the patient with DME as intravitreal therapy.

**THANKS FOR
YOUR
ATTENTION**



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