

Prevention of vision loss in patients with chronic vascular optic neuropathy

Diabetes & Vascular Diseases

First author: Наталия Коновалова (Ukraine)

Co-author(s): Ludmila Venger (Ukraine) , Olga Guzun (Ukraine) , Natalia Khramenko (Ukraine) , Alexii Kovtun (Ukraine) , Svitlana Episheva (Ukraine)

Purpose

to determine the features of the course and treatment of patients with chronic vascular optic neuropathy using Resvega forte was to determine the peculiarities of clinical and morph functional indicators in dynamics under the influence of long-term use of Resvega forte in patients with chronic optic vascular neuropathy? Because vascular pathology of the optic nerve and retina is one of the leading causes of blindness.

Setting/Venue

Odesa National Medical University, Odesa, Ukraine S? “The Filatov Institute of Eye Diseases and Tissue Therapy of the National Academy of Medical Sciences of Ukraine”, Odesa, Ukraine

Methods

One hundred and six patients (106 eyes) with chronic vascular optic neuropathy were examined. The course of treatment lasted for 10–12 days. Patients were randomly divided into two groups. Group I consisted of 65 patients, who, after inpatient, continued to receive the drug for 6 months treatment with Resvega forte. Group II included 41 patients; not all of them received treatment after completing the inpatient course with Resvega forte. A clinical and general ophthalmic and morphofunctional examination was carried out.

Results

After 6 months of observation, there was an improvement in the best corrected visual acuity ($p = 0.000$) in both groups. However, in group I, it was 2-fold higher compared to group II – 0.3 (0.3–0.5) and 0.14 (0.1–0.2), respectively. Due to the normalization of clinical indicators, the probable risk of developing hypertension after 6 months was 30 % lower in the group of long-term Resvega forte use (relative risk 0.43; 95% CI 0.26–0.71) than in patients who did not continue taking the drug orally. The probable risk of developing optic nerve atrophy within 6 months in the group of long-term Resvega forte use was 39 % lower than in patients who did not continue oral administration of the drug. The effectiveness of treatment of patients with ischemic optic neuropathy varied significantly ($\chi^2 = 6.69$, $p = 0.009$): in the group with long-term treatment with Resvega forte it was 69%, and in the control group this indicator was 44%.

Conclusions

The Resvega forte is a modern, effective, safe and pathogenetically justified drug for the treatment of patients with chronic optic vascular neuropathy. To prevent relapses of the disease and restore visual functions, prolonged administration of the drug is required for 6 months to obtain a stable positive effect, both for the normalization of clinical indicators and stabilization of visual functions. The best-corrected visual acuity increased twice as much in the group of patients taking Resvega forte. During the 6-month follow-up, the number of patients with hypertension in group I reduced by 54 % versus 27 % in group II, and the probable risk was 30 % lower than in those who did not continue oral administration of the drug. A significant ($p < 0.05$) positive correlation was found between the effectiveness and duration of treatment, improvement of clinical indicators, hemodynamics. As a result, blood pressure normalized, and visual functions improved. It was found that the effectiveness of treatment, expressed in the stabilization of visual functions and the condition of patients, was 69 % in the group of long-term Resvega forte use after 6 months (versus 44 % in patients who did not take the drug for 6 months).

Financial Disclosures: No

POWERED BY M-ANAGE.COM

