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## Safety Guidance

# Clinical Prioritisation Guidance for Limited Stock of Verteporfin (Visudyne) for Photodynamic Therapy (PDT) for Central Serous Chorioretinopathy (CSR)

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## Contents

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Section	page
1 Introduction	3
2 Clinical Prioritisation Factors for ½ dose PDT laser.	3
Exclusion criteria	3
3 Half dose protocol	3
4 References	4

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## 1 Introduction

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Since October 2021, the UK has been experiencing repeated shortages of Verteporfin 15mg powder for use in PDT for patients for a variety of conditions. Due to this shortage, the Department for Health and Social Care (DHSC), the Royal College of Ophthalmologists (RCOphth) and the National Clinical Director for Ophthalmology (NCD) have worked together to develop a system for prioritising the conditions which PDT can be offered as a treatment option. Due to the severity of the shortage, this has meant that supplies have been reserved for ocular oncology indications within the UK's ocular oncology centres.

The supply situation for Verteporfin is unlikely to improve until 2026 and the DHSC, RCOphth and NCD have evaluated the current supply situation for the potential to treat patients with PDT for non-ocular oncology conditions. Unfortunately, there is likely to be an insufficient supply of Verteporfin during this most recent supply shortage to facilitate the treatment of patients with chronic CSR in the UK. The situation will continue to be monitored by DHSC, the RCOphth and the NCD to see if any potentially unused stock within the ocular oncology centres can be released for use to treat chronic CSR patients. If this scenario does occur, the RCOphth has developed a list of prioritisation factors which should be used to evaluate waiting lists of chronic CSR patients for those who are most at need of treatment

## 2 Clinical Prioritisation Factors for ½ dose PDT laser.

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- CSR in patients with monocular vision
- Patients with bilateral CSR
- Patients with caring responsibilities
- Duration of CSR – patients should have been diagnosed with CSR for more than 4 months and showing no improvement
- Location of sub-retinal fluid –sub-retinal fluid should extend beneath the fovea
- Corrected visual acuity should be worse than or equal to 6/12

### Exclusion criteria

- Permanent macular damage for which treatment will not improve vision

## 3 Half dose protocol

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Whilst PDT has been well established as a therapy for treatment of chronic CSR, more recent trials have shown that a half dose of Verteporfin is the most effective treatment option for chronic CSR patients. The SPECTRA and PLACE trials have established the increased efficacy of half-dose Verteporfin against both Eplerenone and High-Density Subthreshold Micropulse Laser (HSML)<sup>3,4</sup>. It is therefore important that centres offering PDT for chronic CSR patients utilise a half dose protocol both for efficacy of treatment but also to ensure as many patients are treated with the limited supply of Verteporfin as possible. Centres should ensure lists are appropriately coordinated so that each vial of Verteporfin can be used to treat 2 patients.

If you have any queries regarding this guidance or the situation regarding the on-going shortage of Verteporfin please contact Jonathan Baker, Quality improvement Manager at [jonathan.baker@rcophth.ac.uk](mailto:jonathan.baker@rcophth.ac.uk)

## 4 References

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