



Armed Against ARMD: INSIGHTS FOR PROVIDERS, PATIENTS, AND CLINICAL TRIAL SPONSORS

By Georgia Crozier OD, MS
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February is Age-Related Macular Degeneration (ARMD) and Low Vision Awareness month. Dr. Georgia Crozier, Medical Director and Subject Matter Expert at Ancillare, shares her decades of experience to raise public awareness on this common condition – and highlights the importance of a well-planned Clinical Trial Ancillary Supply Chain (CTASC) in conducting research for potential treatments.



What is ARMD?

Age-Related Macular Degeneration (ARMD) is one of the most common causes of permanent vision loss for patients over the age of 60. During the month of February, optometrists focus special attention towards educating patients on the prevention and treatment of the leading causes of reduced vision and legal blindness. Eleven million people in the US have some form of ARMD – a number expected to double by 2050. The risk is approximately 2% for patients between 50 and 60 years of age, and 30% for those over the age of 75. To put it into perspective, the prevalence of ARMD is twice that of Alzheimer's Disease.

There are two forms of ARMD: dry, or nonexudative, found in 90% of patients with ARMD, and wet, or exudative, found in 10% of patients. It should be noted that all wet ARMD begins as dry and approximately 10% of all dry cases convert to wet each year. While there are treatments to help slow the progression of the wet variety, there is no cure for this chronic condition.

Key symptoms may include:

- Loss of clear central vision
- Distortion of words and straight lines
- Missing letters or words while reading
- Dimming of color perception
- Increased sensitivity to glare

Treatments & Research

Injections of Anti-VEGF medications (Avastin®, Eylea® and Lucentis®) have changed treatment protocols for the wet version of ARMD. There are numerous clinical trials in place for both wet and dry ARMD around the globe. Unfortunately, no treatment has proven effective for preventing the progression of dry ARMD.

Recent studies indicate that good glycemic control will also reduce the progression of ARMD. The process of gene therapy may allow the body to produce its own Anti-VEGF substance to stop these new blood vessels from growing. Vitamins for eye health are not typically considered necessary, but they've been found to be helpful with ARMD. The formula termed AREDS2 has proven effective in stabilizing the condition over time in 25% of these patients. Caffeine, turmeric and Omega 3 may also prove beneficial.

When talking with patients, it's critical to reinforce that a heart-healthy diet and concurrent lifestyle modifications can be made to slow the progression of ARMD. We recommend that patients avoid smoking, engage in regular exercise, and maintain a healthy weight with a diet rich in bright colored fruits and vegetables. Patients can feel frustrated or overwhelmed with their diagnosis, as there is currently no medication to stabilize dry ARMD, so it is important to empower them to steer toward these healthier ways that can make a significant difference. Above all, encourage them to attend eye care appointments to ensure their retinal health is closely monitored.

Strengthening Ophthalmology CTASCs to Support Critical Research

Ancillare has planned and managed Clinical Trial Ancillary Supply Chain (CTASC) in phase III ophthalmology research for 27 sites across 13 countries. In a gene therapy study, Ancillare sourced and managed 10 supplies for the Sponsor, enabling significant time and cost savings.

Ophthalmologic studies can vary greatly in supply and equipment needs, depending on the indication being studied. Ancillare provides expertise in:

- Direct Ophthalmoscope, Occluder, Optical Coherence Tomography (OCT), Pachymeter and other surgical equipment needs
- The best options for cuffs, scales, and blood draws
- Testing and diagnostic testing equipment
- Organizational materials for study-related documents and IP



Arm Up with Ancillare for Stronger Trials

Conditions like ARMD, which affect a great percentage of the population but have minimal treatment options, demand that clinical trials that make the best use of available resources. Ancillare helps design stronger trials through comprehensive supply and equipment plans. Our Innovation and Clinical Development Teams deliver patient-centric ancillary supply chain solutions which yield total regulatory compliance and produce measurable time and cost savings, helping to accelerate approvals for new therapies.

Georgia Crozier OD, MS Medical Director

Dr. Georgia Crozier serves as one of Ancillare's Medical Directors, with a wide breadth of experience ranging from clinical investigator to medical advisory and consulting roles. She was the first optometrist in 1985 to be selected by the Federal Government to receive a Masters of Science in Vision Rehabilitation. She currently serves as the Director of the Moore Eye Institute Vision Rehabilitation Center.

Dr. Georgia Crozier leverages years of experience at multiple clinical sites to serve as a Subject Matter Expert for clinical trial planning and execution. Working directly with Ancillare's internal teams and with Sponsors, Dr. Crozier consults on matters of compliance for robust CTASC design.

To learn more about Ancillare's industry-leading CTASC model, Subject Matter Experts, and therapeutic expertise, visit [Ancillare.com](https://www.ancillare.com).