

WebMD[®]

FOCUS ON

WET AGE-RELATED MACULAR DEGENERATION

BY THE NUMBERS

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SUMMER 2025

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For people with Wet AMD



Finding EYLEA HD has changed what living with Wet AMD looks like for me.

Ken
Real EYLEA HD patient

Wet AMD=Wet Age-Related Macular Degeneration.

Diagnosed with Wet AMD in 2014, Ken is now on EYLEA HD and going 4 months between treatments. He feels that EYLEA HD has changed what living with Wet AMD looks like for him.

IMPORTANT SAFETY INFORMATION

- EYLEA HD and EYLEA are administered by injection into the eye. You should not use EYLEA HD or EYLEA if you have an infection in or around the eye, eye pain or redness, or known allergies to any of the ingredients in EYLEA HD or EYLEA, including aflibercept.
- Injections into the eye with EYLEA HD or EYLEA can result in an infection in the eye, retinal detachment (separation of retina from back of the eye) and, more rarely, serious inflammation of blood vessels in the retina that may include blockage. Call your doctor right away if you experience eye pain or redness, light sensitivity, or a change in vision after an injection.
- In some patients, injections with EYLEA HD or EYLEA may cause a temporary increase in eye pressure within 1 hour of the injection. Sustained increases in eye pressure have been reported with repeated injections, and your doctor may monitor this after each injection.
- There is a potential but rare risk of serious and sometimes fatal side effects, related to blood clots, leading to heart attack or stroke in patients receiving EYLEA HD or EYLEA.
- The most common side effects reported in patients receiving EYLEA HD were cataract, increased redness in the eye, increased pressure in the eye, eye discomfort, pain, or irritation, blurred vision, vitreous (gel-like substance) floaters, vitreous detachment, injury to the outer layer of the eye, and bleeding in the back of the eye.
- The most common side effects reported in patients receiving EYLEA were increased redness in the eye, eye pain, cataract, vitreous detachment, vitreous floaters, moving spots in the field of vision, and increased pressure in the eye.

Long-lasting EYLEA HD:



Delivered significant vision improvements*



Is the only Wet AMD therapy that helped 8 out of 10 people go up to 4 months between injections after 3 initial monthly treatments[†]



May provide noticeable improvements on your retinal imaging that you and your retina specialist can see

*Patients on EYLEA HD saw an average of about 6 more letters on an eye chart in a clinical study at 1 year, similar to patients on EYLEA® (aflibercept) Injection. Results may vary.

[†]Combined trial results from 2 groups of people from each clinical trial who received EYLEA HD every 3 or 4 months after 3 initial monthly treatments. Dosing may vary.



**Scan to see
Ken's story**

**Ask your retina specialist
today about EYLEA HD for
vision improvement and the
potential for fewer injections.**

- You may experience temporary visual changes after an EYLEA HD or EYLEA injection and associated eye exams; do not drive or use machinery until your vision recovers sufficiently.
- For additional safety information, please talk to your doctor and see the full Prescribing Information for EYLEA HD and EYLEA.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

INDICATIONS

EYLEA HD® (aflibercept) Injection 8 mg is a prescription medicine approved for the treatment of patients with Wet Age-Related Macular Degeneration (AMD), Diabetic Macular Edema (DME), and Diabetic Retinopathy (DR).

EYLEA® (aflibercept) Injection 2 mg is a prescription medicine approved for the treatment of patients with Wet Age-Related Macular Degeneration (AMD), Macular Edema following Retinal Vein Occlusion (RVO), Diabetic Macular Edema (DME), and Diabetic Retinopathy (DR).

Please see Brief Summary of full Prescribing Information for EYLEA HD and EYLEA on the next page.

REGENERON®

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Consumer Brief Summary

EYLEA® HD (aflibercept) Injection 8 mg and EYLEA® (aflibercept) Injection 2 mg

This summary contains risk and safety information for patients about EYLEA HD and EYLEA. It does not include all the information about EYLEA HD and EYLEA and does not take the place of talking to your eye doctor about your medical condition or treatment.

What are EYLEA HD and EYLEA?

EYLEA HD and EYLEA are prescription medicines that work by blocking vascular endothelial growth factor (VEGF). VEGF can cause fluid to leak into the macula (the light-sensitive tissue at the back of the eye responsible for sharp central vision). Blocking VEGF helps reduce fluid from leaking into the macula.

What are EYLEA HD and EYLEA used for?

EYLEA HD is indicated for the treatment of patients with:

- Neovascular (Wet) Age-Related Macular Degeneration (AMD)
- Diabetic Macular Edema (DME)
- Diabetic Retinopathy (DR)

EYLEA is indicated for the treatment of patients with:

- Macular Edema following Retinal Vein Occlusion (RVO)
- Neovascular (Wet) Age-Related Macular Degeneration (AMD)
- Diabetic Macular Edema (DME)
- Diabetic Retinopathy (DR)

How are EYLEA HD and EYLEA given?

EYLEA HD and EYLEA are injections administered by your eye doctor into the eye. Depending on your condition, EYLEA HD and EYLEA injections are given on different schedules. Consult with your eye doctor to confirm which EYLEA HD or EYLEA schedule is appropriate for you.

Who should not use EYLEA HD or EYLEA?

Do not use EYLEA HD or EYLEA if you have an infection in or around the eye, eye pain or redness, or are allergic to aflibercept and/or any other ingredients in EYLEA HD or EYLEA.

What is the most important information I should know about EYLEA HD and EYLEA?

- EYLEA HD and EYLEA must only be administered by a qualified eye doctor. Injections into the eye with EYLEA HD or EYLEA can result in an infection in the eye, retinal detachment (separation of retina from back of the eye) and, more rarely, serious inflammation of blood vessels in the retina that may include blockage. Call your doctor right away if you experience eye pain or redness, light sensitivity, or a change in vision, after an injection
- In some patients, injections with EYLEA HD or EYLEA may cause a temporary increase in eye pressure within 1 hour of the injection. Sustained increases in eye pressure have been reported with repeated injections, and your eye doctor may monitor this after each injection
- There is a potential but rare risk of serious and sometimes fatal side effects related to blood clots, leading to heart attack or stroke in patients receiving EYLEA HD or EYLEA
- You may experience temporary visual changes after an EYLEA HD or EYLEA injection and associated eye exams; do not drive or use machinery until your vision recovers sufficiently

What are possible side effects of EYLEA HD and EYLEA?

EYLEA HD and EYLEA can cause serious side effects.

- **See important safety information listed under “What is the most important information I should know about EYLEA HD and EYLEA?”**

The most common side effects reported in patients receiving EYLEA HD include:

- Cataract
- Increased redness in the eye
- Increased pressure in the eye
- Eye discomfort, pain, or irritation
- Blurred vision
- Vitreous (gel-like substance) floaters
- Vitreous detachment
- Injury to the outer layer of the eye
- Bleeding in the back of the eye

The most common side effects reported in patients receiving EYLEA include:

- Increased redness in the eye
- Eye pain
- Cataract
- Vitreous detachment
- Vitreous floaters
- Moving spots in the field of vision
- Increased pressure in the eye

There are other possible side effects of EYLEA HD and EYLEA. For more information, ask your eye doctor.

It is important that you and/or your caregiver contact your doctor right away if you think you might be experiencing any side effects, including eye pain or redness, light sensitivity, or a change in vision, after an injection.

You are encouraged to report negative side effects of prescription drugs to the FDA.

Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

What should I tell my eye doctor before receiving EYLEA HD or EYLEA?

- Tell your eye doctor if you have any medical conditions
- Tell your eye doctor if you are pregnant or are planning to become pregnant. It is not known if EYLEA HD or EYLEA may harm your unborn baby
- Tell your eye doctor if you are breastfeeding. It is not known if EYLEA HD or EYLEA may harm your baby. You and your eye doctor should decide whether you should be treated with EYLEA HD or EYLEA, or breastfeed, but you should not do both

How are EYLEA HD and EYLEA supplied?

EYLEA HD is supplied in a clear to slightly opalescent, colorless to pale yellow solution. It is provided in a glass vial containing the amount of product required for a single injection into the eye, which is 0.07 mL of a 114.3 mg/mL solution (or 8 mg of the medicine product).

EYLEA is supplied in a clear, colorless to pale yellow solution. It is provided in a pre-filled glass syringe or vial containing the amount of product required for a single injection into the eye, which is 0.05 mL of a 40 mg/mL solution (or 2 mg of the medicine product).

Where can I learn more about EYLEA HD and EYLEA?

For a more comprehensive review of EYLEA HD and EYLEA safety and risk information, talk to your health care provider and see the full Prescribing Information at EYLEAHD.com and EYLEA.com.

 LISTEN TO THIS!

STATS & FACTS

Reviewed by
Neha Pathak, MD,
WebMD Lead Medical Editor

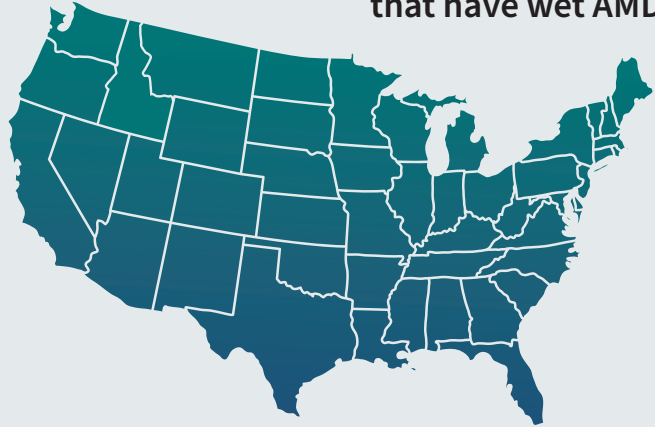
90%

Approximate amount
of people with wet AMD
who can stabilize or
improve their vision with
consistent treatment.



1 to 2 MILLION

Number of adults in the U.S.
that have wet AMD.



3

Top countries
with the highest
AMD cases: China,
India, and the United States.

SOURCES: Nature.com, Cleveland Clinic, American Academy of Ophthalmology

This content was created using several editorial tools, including AI, as part of the process. Human editors reviewed this content before publication.

 **LISTEN TO THIS!**

UNDERSTANDING WET AMD

Learn the basic facts
about your eye disease

By Rachel Reiff Ellis

Reviewed by Timothy Murray, MD, WebMD Medical Reviewer

Age-related macular degeneration (AMD) is a condition that, when advanced, damages your macula, the central part of the back of your eye (the retina). This is the part of your eye that gives you clear, sharp vision. You need your macula for seeing fine details during daily activities like reading, recognizing faces, and driving.

The damage to your macula from AMD blurs your central vision. When the disease

progresses untreated to an advanced stage, some people can lose their central vision completely.

WHAT'S "WET" ABOUT IT?

There are two types of AMD: dry and wet. Dry AMD causes a buildup of small deposits called drusen in your macula. Wet AMD causes the growth of abnormal blood vessels under or in your retina that leak blood and fluid into your macula.

"[This] can lead to scar tissue formation, all of which can damage the central vision," says Emily Y. Chew, MD, National Institutes of Health distinguished investigator and director of the Division of Epidemiology and Clinical Applications at the National Eye Institute (NEI) in Bethesda, MD.

Wet AMD is a late-stage disease and typically causes faster vision loss than dry AMD. If you have dry AMD, it can turn into wet AMD, but not the other way around.

COMMON SYMPTOMS

When you have wet AMD, you may notice:

- + Straight lines look wavy or crooked
- + A blurry area in the center of your vision
- + Blank spots in your vision
- + Colors are duller
- + You have trouble seeing in low light

HOW COMMON IS IT?

Wet AMD is not as common as dry AMD. About 10% to 15% of all AMD cases are the wet form. But although fewer people get it, it's much more serious. With wet AMD, you're at a higher risk of significant vision loss, especially if you don't treat the disease.

"In the overall landscape of age-related eye conditions, wet AMD is a relatively rare but serious threat to vision," says Tiarnán Keenan, MD, PhD, Stadtman Investigator in the Division of Epidemiology and Clinical Applications at the NEI in Bethesda, MD.

"Because of the risk of rapid and pronounced vision loss, it is essential for those diagnosed with AMD—particularly those with dry AMD who may be at risk of progression to wet AMD—to receive regular eye exams."

WHAT'S THE OUTLOOK?

While there's no cure for wet AMD, treatment can help preserve, and even improve, your remaining vision and

prevent further damage. The primary treatment for wet AMD is medication a doctor injects directly into your eye with a small needle.

Wet AMD can lead to severe central vision loss, but Chew says it typically doesn't cause total blindness.

"Most people with wet AMD retain their peripheral vision, meaning they can still detect movement and see things out of the corner of their eye," Chew says. "However, central vision loss from wet AMD can make it challenging to read, recognize faces, and perform other tasks that require detailed sight."

With early intervention, treatment, and low-vision aids, many people with wet AMD can live independently and continue activities they enjoy.

WHO'S MORE LIKELY TO GET WET AMD?

Emily Chew, MD, lists risk factors for the disease.

- + Older age
- + Family history of AMD
- + Race (higher rates in White adults)
- + Smoking
- + Diet (foods high in antioxidants and omega-3s lower your risk)
- + Poor cardiovascular health

 **LISTEN TO THIS!**

TREATMENT ADHERENCE

Sticking to your wet AMD management plan matters

By Rachel Reiff Ellis

Reviewed by Timothy Murray, MD, WebMD Medical Reviewer

No matter what disease you're treating, following doctor's orders for screening, medication, or other therapies is vital for getting the best outcome. This is especially true when you have wet AMD. Your outcomes improve—and you can preserve more of your vision—when you stay on schedule with your treatment visits.

AN OUNCE OF PREVENTION

A recent study in *JAMA Ophthalmology* shows 18% to 57% of people with AMD miss their ophthalmology appointments. What's more, the study showed that even missing one appointment can make a negative impact on your vision when you have AMD.

Treatment for your disease involves a physical injection in your eye that only an ophthalmologist can do in their office, and when you skip it, you're risking further vision loss.

“Just like blood pressure medications, for example, the drug must be delivered at certain

EXTRA VISITS

See your doctor if you have any of these symptoms between visits:

- + Pain or severe redness in your eye
- + Sensitivity to light
- + A feeling of pressure behind your eye
- + Eye floaters or flashers



SPACE_CAT/VIA GETTY IMAGES

BARRIERS TO CARE

Purnima S. Patel, MD, lists common reasons she sees for missed treatments.

- + Difficulty with transportation to frequent visits
- + Trouble coordinating visits with work and/or work-related travel
- + Feeling bothered by post-injection pain or irritation

intervals to assure its efficacy,” says Ninel Z. Gregori, MD, spokesperson for the American Academy of Ophthalmology and an ophthalmologist at the University of Miami Bascom Palmer Eye Institute in Florida.

Consistency is key. The goal is to keep fluid buildup at bay to avoid worsening symptoms.

HOW WET AMD ADVANCES

Wet AMD is a late stage of the disease and progresses faster than dry AMD. When you don’t treat wet AMD, you may start to notice the effects quickly.

“The natural course of wet AMD without treatments is typically severe loss of central vision, and this can significantly impact daily activities such as reading, driving, and working on the computer or iPad,” says Purnima S. Patel, MD, spokesperson for the American Academy of Ophthalmology and ophthalmologist at ORA Vision Laser Surgery Center in Norcross, GA.

Consistent treatment with injection medication can stop and even reverse vision loss in some cases, so make a plan and commit to prioritizing visits to help preserve your eyesight.

LISTEN TO THIS!

MY LIFE WITH WET AMD

Every day is fulfilling thanks to treatment and having good people around me

By Judy White

Reviewed by Timothy Murray, MD, WebMD Medical Reviewer

I've had wet AMD in my left eye since 2012 and in my right eye since 2015. When it converts from dry to wet AMD, it's a significant difference in your ability to see things. I can see a little bit out of the sides and the bottom of my left eye. And I can see things that are close to my nose.

The right eye is kind of amazing. I can see pretty normally. It's benefited a lot from the treatment. I have to rely on it 100% for my central vision.

I read for pleasure. I choose large-print books at the library. I read *The New York Times* on my iPad so I can make everything big. Also, my computer has a lot of fantastic features for me. I can touch the screen to make things bigger.

A huge help for me is the Geek Squad at Best Buy. It's always the same technician that comes to my house. He noticed that I have some vision problems and made a lot of adjustments to my

computer to help me.

I use large index cards to stay organized. I store things in clear plastic bins and label them with the large index cards that I write on in big letters with a fat marker. I also write all my appointments on large cards with a big marker, keep them in a clear plastic sleeve, and lay out the ones that I need for each week.

I get help where I need it.



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INSET PHOTOGRAPHY BY NAOMI LAWSON



In Orinda, California, the small town where I live, we have an organization called Seniors Around Town for younger adults to drive seniors to appointments. That has led to other things. The woman who drives me around got interested in politics because of me. She signed up for an event where she sent postcards to registered voters, and she invited

JUDY'S TIPS FOR MANAGING AMD



- Start taking the AREDS2 supplements as soon as you're diagnosed.
- Eat eye-healthy foods that include many colors, like spinach and red and yellow bell peppers.
- Get help where you need it, like with rides and tech support.

me to go. There, I met someone who does line dancing, and I went to a line dancing class with her. It's an hour and a half of pure dancing! I'm struggling, but I'm going to stick with it. Not bad for 85, eh?

Those activities have kept me from feeling like I'm isolated or boxed in because of my macular degeneration.

 **LISTEN TO THIS!**

MANAGING THE EMOTIONAL TOLL OF WET AMD

How to get help for depression or other difficult emotions

By Kendall K. Morgan

Reviewed by Timothy Murray, MD, WebMD Medical Reviewer

Depression is common when you have age-related macular degeneration (AMD), and the risk goes up as you lose vision. Avnish Deobhakta, MD, an ophthalmologist at the New York Eye and Ear Infirmary of Mount Sinai in Brooklyn, advises being up-front with your eye or retina specialist about any emotional struggles you're having.

"When patients come in for treatment, I ask how they are feeling and if they are functionally getting around," Deobhakta says. "Many patients come in and don't realize or aren't primed to talk about how this is affecting them in a functional and emotional way."

SEE A LOW-VISION SPECIALIST

Even if you aren't clinically depressed, you're likely to have a wide range of difficult emotions, including grief, anxiety, and frustration. To the extent your emotions are tied to changes in your vision, a low-vision specialist can help, Deobhakta says. For example, they can assist you with reading or in using

your smartphone or other devices.

"Low-vision specialists can help low-vision patients come up with a plan to address all the tools that they might need to be independent while still having vision loss," says Preeti Subramanian, PhD, director of vision science research at BrightFocus Foundation in Clarksburg, MD, a nonprofit dedicated to brain and eye health.





SIGNS YOU MAY NEED HELP FOR YOUR MENTAL HEALTH INCLUDE:

- + Mood swings
- + Isolating yourself from friends or family
- + Feeling sad, hopeless, depressed, or frustrated regularly
- + Worrying constantly
- + Trouble sleeping
- + Loss of appetite

FIND COMMUNITY

In addition to doctors and other specialists, look for a community of people who have similar experiences due to wet AMD or another eye condition. Subramanian notes that BrightFocus has a monthly AMD Community Circle ([BrightFocus.org/Get-Involved/AMD-](https://www.brightfocus.org/Get-Involved/AMD-)

Community-Circle) where you can come together virtually to learn how others have coped. She suggests asking your doctor about local support groups dedicated to AMD or vision loss, too.

BUILD A TEAM

Especially if you're experiencing extreme sadness or depression, Deobhakta encourages seeking help from a mental health professional. Bring in your primary care doctor and others for a well-connected approach to managing your wet AMD and its emotional toll.

"AMD isn't just a retinal disease—it's also psychological," Deobhakta says. If you lose function, there is the functional disability, but remember the possible emotional toll. This needs a team-based approach, he adds.

LISTEN TO THIS!

TAKE OUR TEST

How much do you know about Wet AMD?

By Kendall K. Morgan

Reviewed by Timothy Murray, MD,
WebMD Medical Reviewer



1. When your age-related macular degeneration (AMD) is the wet form, you're likely to lose vision faster.

☐ True ☐ False

2. AMD usually progresses in both eyes at the same time.

☐ True ☐ False

3. Wet AMD is much less common than dry AMD.

☐ True ☐ False

4. Dry AMD can turn into wet AMD at any stage.

☐ True ☐ False

1. TRUE. Without treatment, you'll lose vision faster with wet AMD than dry AMD. But treatments can virtually stop vision loss.

2. FALSE. You can have late-stage or more advanced AMD in only one eye. But your risk of worsening in the other eye will go up.

3. TRUE. Only 10% of macular degeneration cases are the wet AMD type, but this form of the disease causes more legal blindness.

4. TRUE. Wet AMD almost always starts after the dry form when abnormal blood vessels grow in and under the macula.

ANSWERS:

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