WebMD®

FOCUS ON

WET AGE-RELATED MACULAR DEGENERATION

GOOD TO KNOW

Doctor visits preserve vision

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SUMMER 2026

INSIDE THE ISSUE

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GETTY IMAGES

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THE LATEST ON Wet AMD

LJUBAPHOTO/VIA GETTY IMAGES

EASING THE TREATMENT BURDEN

For people with wet AMD, keeping up with frequent eye injections can be difficult, especially when regular visits are needed to manage the condition. Researchers looked at whether a higher-dose anti-VEGF (anti-vascular endothelial growth factor) treatment could reduce how often injections are needed across 22 eye clinics in the U.S. Results showed that many people had stable or better vision and less fluid in the eye. Some could go longer between treatments, though regular care is still important. Talk to your eye doctor about longer-lasting options.

SOURCE: *Journal of VitreoRetinal Diseases*

BARRIERS TO CARE

How well a treatment works may depend on several factors. Researchers in a U.S. study of over 184,000 treated eyes, found that corrected vision was more likely to be maintained or improved in patients who received seven or more anti-VEGF eye injections in the first year than those who received fewer. Factors such as older age, insurance type, and whether care was provided by a retina specialist or a general eye doctor influenced how often injections were received. Recognizing these factors may help patients and doctors identify barriers and ensure that treatment is received often enough to protect vision.

SOURCE: *Ophthalmology Retina*

82 MILLION

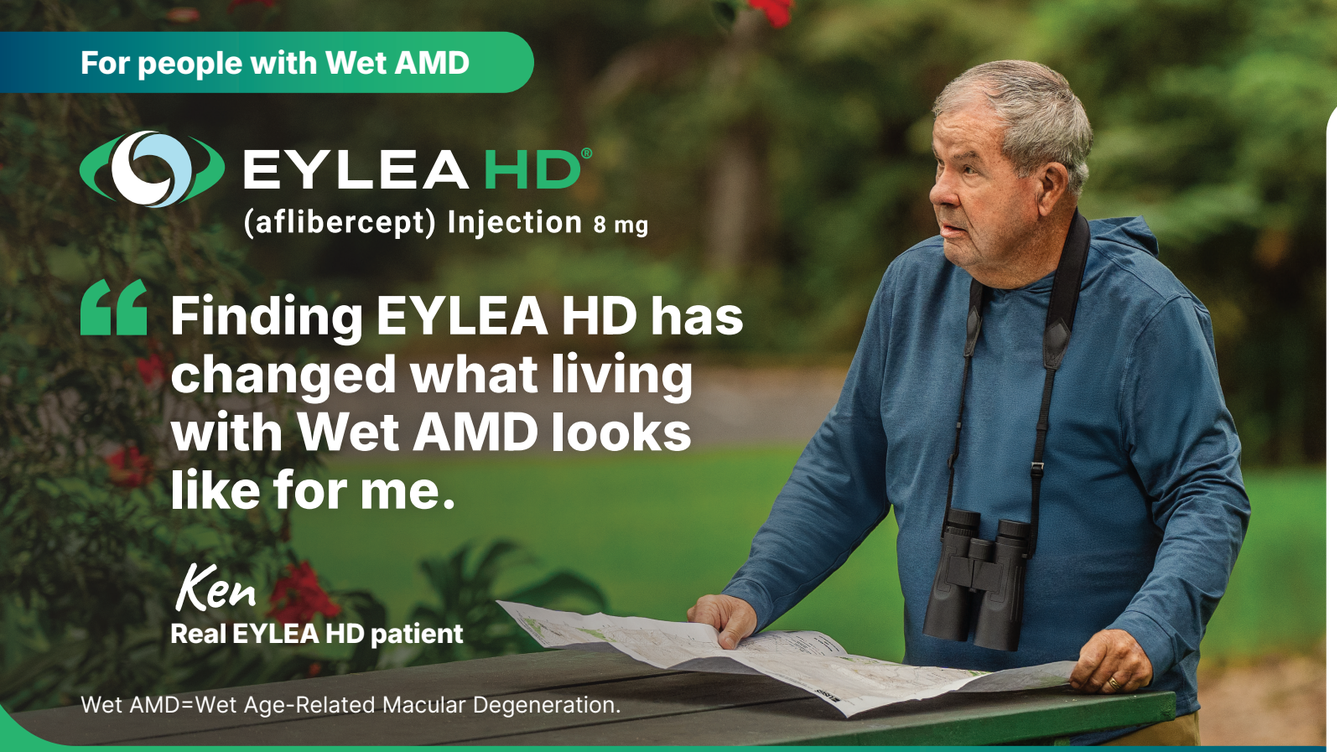
Number of people in the U.S. expected to be living with wet AMD by 2050.

SOURCE: *Bioengineering*

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

For people with Wet AMD

EYLEA HD®
(aflibercept) Injection 8 mg



“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.

EYLEA HD is the first and only treatment for Wet AMD that gives you a chance for 5 months between injections after 1 year of successful response.

After 3 initial monthly treatments, your retina specialist will choose a 2 to 4 month treatment schedule. Some patients may need to resume monthly treatments. After 1 year of successful response, your retina specialist may extend your treatment schedule to every 5 months. Dosing may vary.

Long-lasting EYLEA HD:

- Delivered significant vision improvements*

*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.

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

Scan to see Ken’s story

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

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, injury to the outer layer of the eye, increased pressure in the eye, eye discomfort, pain, or irritation, bleeding in the back of the eye, blurred vision, vitreous (gel-like substance) detachment, and vitreous floaters.
- 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.
- 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.
- These are not all the possible side effects of EYLEA HD or EYLEA. Call your doctor for medical advice about side effects. You may report side effects to the FDA at 1-800-FDA-1088.

INDICATIONS

EYLEA HD® (aflibercept) Injection 8 mg and EYLEA® (aflibercept) Injection 2 mg are prescription medicines approved for the treatment of patients with Wet Age-Related Macular Degeneration (AMD), Diabetic Macular Edema (DME), Diabetic Retinopathy (DR), and Macular Edema following Retinal Vein Occlusion (RVO).

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

REGENERON®

04/2026 US.EHD.26.02.0172

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:

- Macular Edema following Retinal Vein Occlusion (MEfRVO)
- 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 (MEfRVO)
- 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
- Injury to the outer layer of the eye
- Increased pressure in the eye
- Eye discomfort, pain, or irritation
- Bleeding in the back of the eye
- Blurred vision
- Vitreous detachment
- Vitreous (gel-like substance) floaters

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.

REGENERON®

Manufactured by:
Regeneron Pharmaceuticals, Inc.
777 Old Saw Mill River Road
Tarrytown, NY 10591

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US.EHD.25.07.0153

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STATS & FACTS

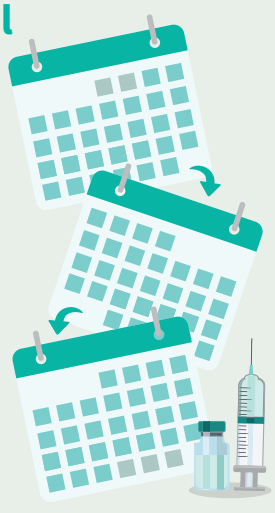
Reviewed by Brunilda Nazario, MD, WebMD Chief Physician Editor, Medical Affairs

NEARLY 200 Million

Number of people living with macular degeneration worldwide, a number projected to reach 288 million by 2040.

EVERY 4 TO 12 WEEKS

Typical interval between anti-VEGF (anti-vascular endothelial growth factor) eye injections used to treat wet AMD.



ABOUT 90%

Amount of cases of severe vision loss that happen in people with wet AMD.

SOURCE: Macular Degeneration Research

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VECTEEZY.COM

LISTEN TO THIS!

DOCTOR VISITS PRESERVE VISION

There are a lot of appointments, but they are key to keeping your eyesight

By Sonya Collins
Reviewed by Brunilda Nazario, MD, WebMD Chief Physician Editor, Medical Affairs

Regular doctor visits are one of the most important things you can do to protect your vision when you have wet age-related macular degeneration (AMD). While the schedule can feel demanding, these appointments play a direct role in preserving sight.

"People are living into their 80s, 90s, and even 100s," says Nimesh Patel, MD, assistant professor of ophthalmology at Harvard Medical School in Boston. "We want your eyes to last as long as you do."

HOW OFTEN YOU'LL SEE YOUR DOCTOR

"This depends on the stage of AMD, severity of disease, and what treatment the patient is receiving," says Charles C. Wykoff, MD, PhD, a retina specialist at Houston Methodist in Texas.

Many people with wet AMD receive eye injections, usually monthly at first, until the disease stabilizes. After that, doctors may gradually extend the time between visits, sometimes to eight, 12, or even 16 weeks. But there's no one-size-fits-all schedule. Ongoing monitoring is essential to find the safest interval.

WHY REGULAR VISITS MATTER

Each visit provides critical information. Doctors check your vision, discuss any changes you've noticed, and take pictures of the back of your eyes using optical coherence tomography (OCT) to look for fluid or bleeding in the retina. These scans can detect subtle changes before you notice symptoms, helping guide whether treatment should stay the same, be spaced out, or become more frequent.

Staying on schedule helps prevent permanent vision loss. Undertreatment or long gaps between injections can allow bleeding under the retina,

WESTEND61/VIA GETTY IMAGES

leading to scarring. Early, consistent treatment helps control this and reduces the risk of irreversible damage.

"Multiple lines of evidence suggest that undertreatment of active wet AMD leads to permanent vision loss," Wykoff stresses.

Regular visits also help protect your other eye. Ongoing monitoring increases the chance of catching a conversion to wet AMD early—when treatment is most effective.

"If you're staying on top of your appointments, you'll potentially catch something bad happening in your good eye," Patel says. "The faster the time to treatment, the better the outcome will be."

STAY ON TRACK

If monthly appointments are hard to manage, ask your doctor about:

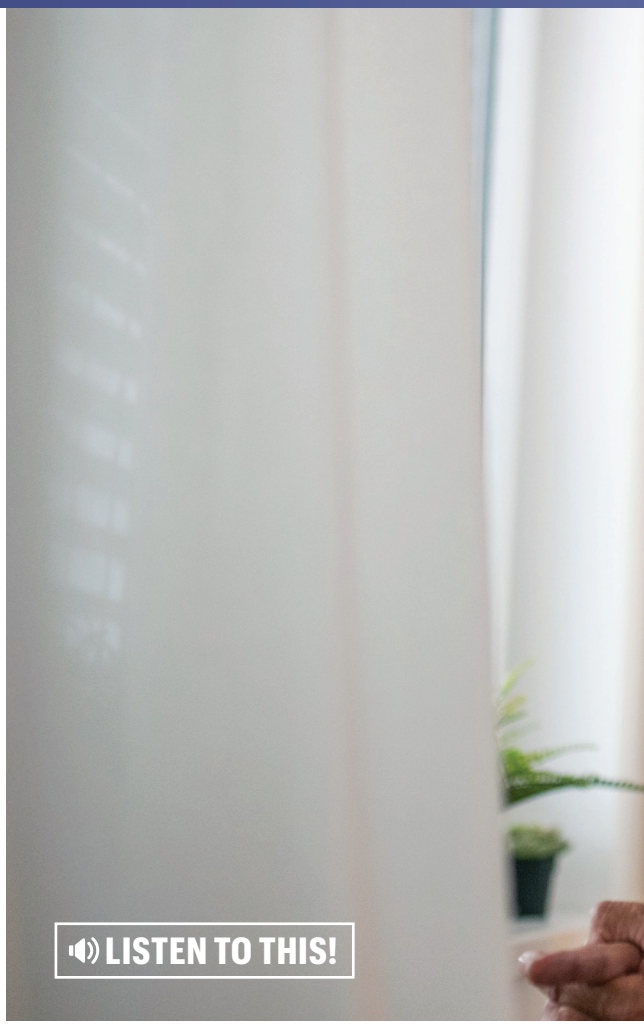
- Paratransit services that may help
- A social worker who can offer solutions
- New medications that may work for longer intervals

If the appointment schedule feels overwhelming, you're not alone. But sticking with it can help preserve your vision for the future.

FACING THE FEELINGS

Get the tools you need to take back control of your life

By Sonya Collins
Reviewed by Brunilda Nazario, MD,
WebMD Chief Physician Editor, Medical Affairs



HALFPOINT IMAGES/VIA GETTY IMAGES

A diagnosis of wet age-related macular degeneration (AMD) can feel like a sudden loss of control—over your vision, independence, and daily life. It's perfectly normal to feel sad or angry.

"Three emotions that everyone with this condition experiences at some point throughout the process are frustration, grief, and fear," says Diane B. Whitaker, OD, chief of vision rehabilitation and performance at Duke Health in Durham, NC.

You can learn to cope and live well with wet AMD.

IT'S NORMAL TO FEEL THIS WAY

Frustration often stems from losing the ability to do tasks that were once effortless, such as reading fluidly or finding the right key on your key ring.

Grief runs deeper. "You're grieving the loss of your most precious sense, of participating in society or activities that might bring you pleasure, of your independence," Whitaker says.

You might fear being a burden, becoming socially isolated, or losing more vision. Some fears are unfounded. "Many people with AMD believe that they'll go completely blind. AMD can make your central vision bad enough that you're legally blind, but you will never be in total darkness," Whitaker says.

Regaining a sense of control can help. Here's how to start.

KNOW THE SIGNS

Depression with wet AMD is common and treatable. Talk to your doctor if you're:

+ Isolating yourself from others
+ Struggling to stay motivated
+ Losing interest in activities
+ Unable to get through daily tasks because of your low mood

ASK FOR LOW-VISION REHABILITATION

Ask your doctor for a referral to low-vision rehabilitation—occupational therapy designed to help you maintain independence and continue meaningful activities with lower vision.

GET SUPPORT

Connect with vision-focused organizations that offer counseling, support groups, and practical training tailored to your needs.

"These services are meant to help you accept your condition and move forward with your life to regain your independence and do the things you need to do," says Andrea Zimmerman, OD, a low-vision specialist at Lighthouse Guild in New York City.

STAY SOCIAL

Prioritize staying social, even if it feels difficult. If you're struggling to recognize faces, be open about your limitations to ease your anxiety and prevent misunderstandings.

"If you're comfortable, tell people that you have vision impairment, that you can't recognize your friends' faces, and that you are not ignoring them," Zimmerman says.

Wet AMD may change how you see the world. With the right tools and support, it doesn't have to take you out of it.

LISTEN TO THIS!

LESSONS **LEARNED**

Getting shots and staying engaged and active help me see

By Muriel Smith **Reviewed by** Brunilda Nazario, MD, WebMD Chief Physician Editor, Medical Affairs

I got up one morning and thought there was heavy rain. I couldn't see out the window. I go to Mass every morning, and I noticed some candles on the back of the altar looked like they were bent over.

I called for an eye exam, and I couldn't get it for five weeks. After the doctor got the preliminary results, he told me to start shots the next day. He said it might not get better, but he could arrest the process. Fortunately, it has gotten better. All my candles are straight now.

ACCEPTING CHANGE

I don't see people's faces, but I hear their voices. I was a reporter and then editor for a newspaper, so I was with people all the time. Not being able to recognize people is probably the thing that bothers me the most.

The sun bothers me, but I now have a sun visor that comes down in front of me in the car. I find that's magnificent for driving even when there is early morning sun going east. I'm not reading as much as I used to, but I just finished reading a book about a whaling ship that wrecked in the 1800s.

LIVING FULLY EACH DAY

People tell me this all the time: I'm in terrific health for my age. I'll be 90 this year, and I've always been very active. I was married for 51 years. It was the best thing I ever did. I worked my whole life, had four children. I still write my blog every day. I cover meetings at night. I'm a mediator for the Superior Court system in Monmouth

GEORGE PACHANTOURIS/VIA GETTY IMAGES; INSET PHOTOGRAPHY BY VENIVIDISCRIPTO, JIM SMITH PHOTOGRAPHER

County in New Jersey. Of course, I'm still active at church.

If I weren't active, I'm sure I wouldn't be able to see. The shots help, but if I didn't have a desire to do anything else, I don't think they would be effective. I have 14 steps I go up and down each day. I walk a half-mile to church four mornings a week. It's enforced exercise. I think because I'm so active that's why I can handle this.

MURIEL'S TIPS

- **Get regular eye exams.** If you catch wet AMD early enough, you can do something about it.
- I'm a firm believer that **"if you don't use it, you'll lose it."**
- **Recognize the problem, do something about it immediately, and then keep going.** Don't feel sorry for yourself.

LISTEN TO THIS!

TRUST THE JOURNEY

Finding my new normal

By John M. Thomas
Reviewed by Brunilda Nazario, MD,
WebMD Chief Physician Editor, Medical Affairs

In 2015, I went in for my routine eye exam. When they were testing my right eye, all I could see was just a big black circle. The optometrist got really distressed by that and said I needed to go see a specialist.

JOHN'S TIPS

+ **Talk to other people to help raise awareness** because, before my diagnosis, I had never heard of macular degeneration.
+ **Have a good relationship with your retina specialist,** so you can count on them telling you the truth.
+ **I attend the monthly AMD Community Circle at BrightFocus Foundation.** It's a good place to learn about the latest science, ask questions, and meet other people to talk with about managing this condition.

FG TRADE/VIA GETTY IMAGES; INSET PHOTOGRAPHY BY CONNIE THOMAS

STARTING TREATMENT

The first thing the specialist did was inject me with a dye. They had these monitors where they could see where the dye went in your eye. You can see the leakage from your retina.

They told me they were going to treat me with eye injections. That doesn't really sound good, but

they did their best to reassure me that it would be a small needle. I would be anesthetized. It'd be a little uncomfortable and, basically, that's what it was.

REACHING A STABLE STATE

I kept going there for a couple of years until I changed my provider. My new provider had an ophthalmology practice and retina specialist. I kept getting eye injections. Initially, it was about every eight weeks. Once my vision stabilized, it went to about 12 weeks. This last time, they saw just a hint of leakage, so I went to 10 weeks.

Each time, your eye feels gritty for a day. At first, I'd have a little blood splotch on my eye from the injection site. My wife used to get excited about that, but your eye will absorb that over the course of a few days.

A NEW NORMAL

Slowly, after the injections, the leakage stopped. What's remaining is scar tissue, which I guess accounts for the wavy lines you see and blind spot in your center vision. My vision loss isn't as severe as it is for some. I can't see stark black and white, but I still have some color vision. I get the distortions, and it's hard to make out faces, but I can still make out some things. I don't drive at night, but my peripheral vision is still good.

So far, my left eye compensates quite well for me, and I haven't needed any assistive devices. My wife takes me to my appointments, and I've just accepted it as my way of life from now on.

LISTEN TO THIS!

GETTING AN ASSIST

Maximize your vision with the right devices

By Kendall K. Morgan
Reviewed by Brunilda Nazario, MD, WebMD Chief Physician Editor, Medical Affairs

While anti-VEGF injections for wet AMD can help to protect your vision, assistive devices can make it easier to make the most of the vision you still have.

"Assistive devices can provide magnification, contrast enhancement, and text to speech output that can help individuals with wet AMD to engage in valued activities more easily," says Brenna Carr, an occupational therapist who works with people with impaired vision at Lighthouse Guild in New York City.

WHEN TO GET HELP

It's a good idea for anyone with low vision or vision changes to explore assistive devices. Carr says it's especially important if your vision makes essential activities or tasks hard to do.

"Many people start to explore devices when they have trouble reading, but devices can also be helpful for other tasks such as watching TV or performances, cooking, crafting, playing music, and more," she says.

Assistive technology can help you with many other everyday tasks, including identifying money, medications, street signs, or grocery items.

SEE A SPECIALIST

See a low vision specialist who has experience with a wide range of tools and devices you can try out.

"Choosing the right assistive device is a very personal experience," Carr says. "Everyone has their own goals and life circumstances, so something that may work great for one person may not be the best option for another person with the same eye condition."

KNOW YOUR OPTIONS

Common assistive devices include:

+ Electronic or handheld magnifiers
+ Meta glasses with AI
+ Text-speech readers

Free apps for your smartphone or tablet include:

+ Seeing AI
+ Be My Eyes
+ ReBokeh
+ weZoom

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