WebMD®

FOCUS ON

WET AGE-RELATED MACULAR DEGENERATION



GOOD TO KNOW

Understanding wet AMD

page 8

CARING FOR YOU

Managing the emotional toll

page 12

FIRST PERSON

Lessons learned

page 14

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SCAN ME

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FALL 2026

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INSIDE THE ISSUE

7
NEWS
The latest research

8
GOOD TO KNOW
Understanding wet AMD

10
HEALTH SMARTS
Treatment adherence



SCAN ME

WE WANT TO HEAR FROM YOU!
TAKE OUR SURVEY

Your feedback matters! Tell us what you think about our condition guides and workbooks. Use your smartphone camera to activate the QR code.

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12

CARING FOR YOU

Managing the emotional toll

14

FIRST PERSON

Lessons learned

16

BY THE NUMBERS

Stats and facts





GETTY IMAGES

For people with Wet AMD

EYLEA HD®
(aflibercept) Injection 8 mg



“I have a great relationship with my retina specialist and have complete trust in him. With the EYLEA HD treatment schedule I’m on, I’m going 8 weeks between treatments.

Harold
Real EYLEA HD patient

Individual results may vary.
Wet AMD=Wet Age-Related Macular Degeneration.

Harold was diagnosed with Wet AMD 12 years ago. He’s now on EYLEA HD and going 8 weeks between injections. In between treatments, you can find him out on the golf course with his friends.

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.

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*

*In a clinical study, patients on EYLEA HD saw an average of about 6 more letters on an eye chart 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 Harold’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.
- 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®

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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:

- 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®

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THE LATEST ON Wet AMD



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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.

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.

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

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.

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

+ Older age
+ Family history of AMD
+ Race (higher rates in White adults)
+ Smoking
+ Diet (high intake of red meat and refined sugars may increase 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

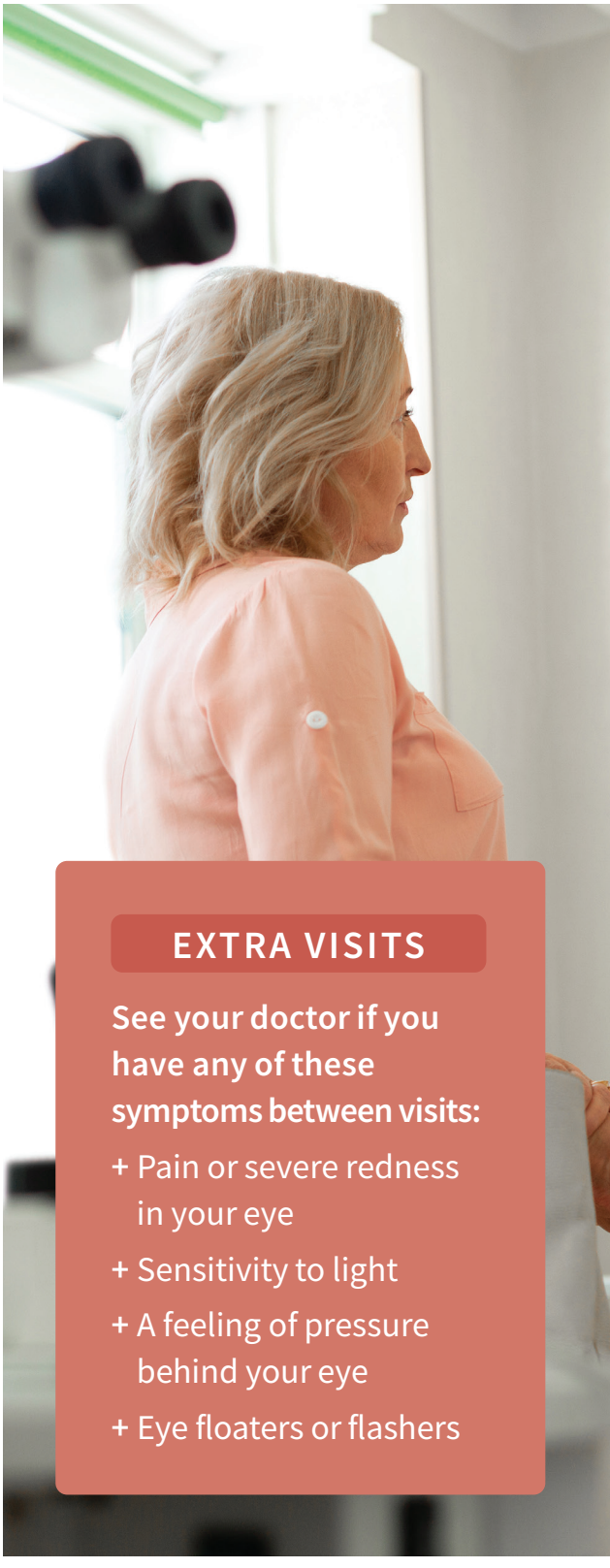
No matter what disease you're treating, following doctor's orders for screening, medication, or other therapies is vital for getting the best outcome. This is especially true when you have wet AMD. Your outcomes improve—and you can preserve more of your vision—when you stay on schedule with your treatment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

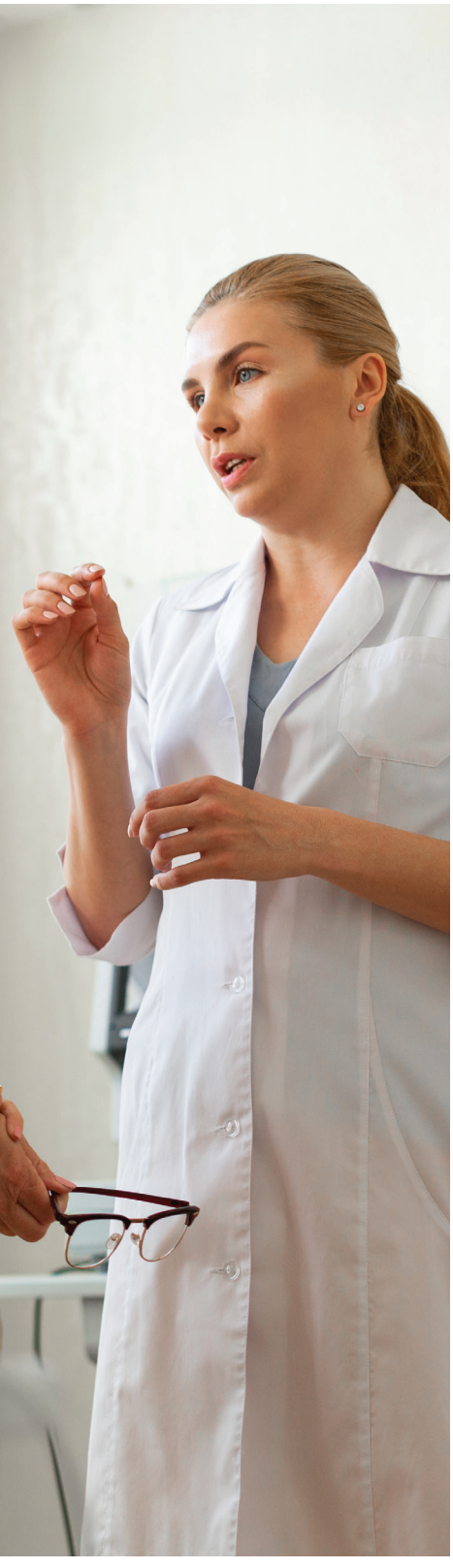
"Just like blood pressure medications, for example, the drug must be delivered at certain



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



ZINKEVYCH/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!

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.



VLADIMIR VLADIMIROV/VIA GETTY IMAGES

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-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!

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

DMITRII ANIKIN/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!

STATS & FACTS

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

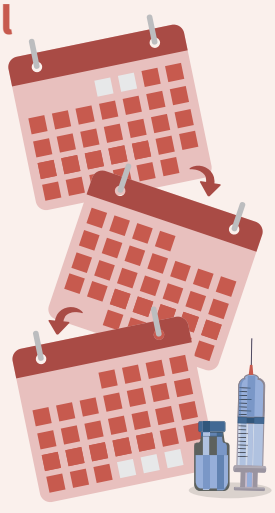
NEARLY 200 Million

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

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

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