FOI 7679 – Q2

. Please provide the number of injections/implants by eye condition for the four-month period from September to December 2023:

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| --- | --- | --- |
| **Number of Injections/Implants: September - December 2023** |   |   |
|  | **Eye Conditions** |
| **Treatment** | Wet Age-Related Macular Degeneration (wAMD) | Diabetic Macular Oedema (DMO) | Retinal Vein Occlusion (RVO) |
| Aflibercept | 680 |  113 |  301 |
| Bevacizumab |  <5 |  0 |  0 |
| Dexamethasone |  <5 |  10 |  <5 |
| Faricimab | 591 |  151 |  <5 |
| Ranibizumab - Lucentis | <5  |  0 |  0 |
| Ranibizumab - Ongavia |  0 | 0  | 0  |