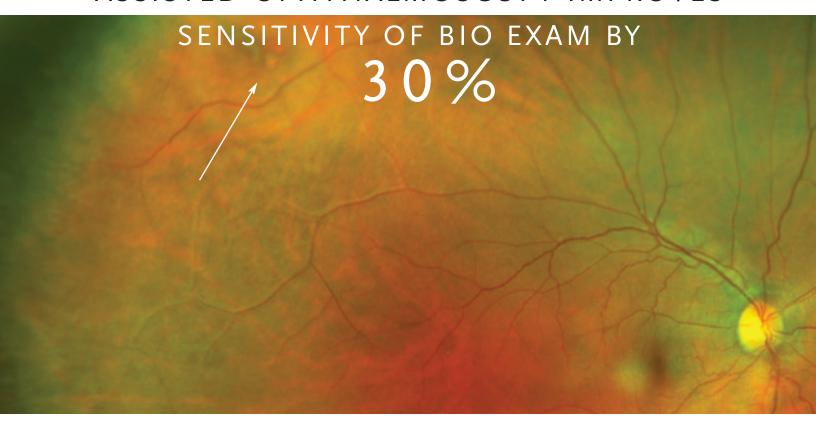
optomap®

ASSISTED OPHTHALMOSCOPY IMPROVES



A study published in Eye and Brain suggests that adding an optomap® to a traditional BIO exam may improve sensitivity by up to 30%.

- Results from this cross-sectional study found good agreement between image-assisted and traditional fundus examination.
- In cases of disagreement, the adjudicator agreed with the image-assisted method in over 70% of cases.
- This suggests that adding nonmydriatic imaging,
 optomap UWF SLO in this case, to the clinical examination, can improve the examiner's ability to detect or rule out lesions by up to 30%.

"Image-assisted fundus examination may enhance detection of retinal lesions compared with traditional fundus examination alone"

— Eye and Brain 2014

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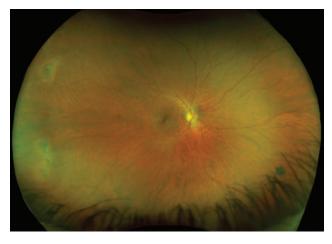


CLINICAL SUMMARY

Comparison of Image-assisted Versus Traditional Fundus Examination

Brown, Sewell, Trempe, Peto, Travison Eye and Brain | 2014

Image-assisted fundus examination may enhance detection of retinal lesions by 30% compared with traditional fundus examination alone.



optomap color image of lattice degeneration.

- This cross-sectional study found good agreement between image-assisted and traditional fundus examination.
- There was a higher rate of detection of posterior pole lesions using the image-assisted method in this study (90.1%).
- The image-assisted method detected 92.2% of all vitreoretinal interface abnormalities while the traditional examination detected 54.7%.
- Image-assisted method detected 90.6% of drusen in the posterior pole compared with 43.8% detected by the traditional fundus examination alone.
- · When the methods disagreed for any lesion type, the image-assisted method was correct in 75% of the disagreements.
- Agreement between image-assisted and traditional fundus examination varied by lesion type and was excellent for staphyloma (kappa 0.76), fair for suspicious cupping (kappa 0.66), drusen in the posterior pole/macula and mid-to-peripheral retina (0.45, 0.41), retinal pigment epithelial changes in the posterior pole/macula (0.54), peripheral retinal degeneration (0.50), cobblestone (0.69), vitreoretinal interface abnormalities (0.40), and vitreous lesions (0.53).
- When the methods disagreed, the results indicated a statistically significant advantage for the image-assisted examination in detecting suspicious cupping (P = 0.04), drusen in the posterior pole/macula and mid-to-peripheral retina (P = 0.004, P < 0.001), retinal pigment epithelial changes in the posterior pole/macula (P = 0.04), nevi in the posterior pole/macula and mid-to-peripheral retina (P = 0.01, P = 0.007), peripheral retinal degeneration (P < 0.001), hemorrhage in the mid-to-peripheral retina (P = 0.01), and vitreous lesions (P < 0.001).
- The sensitivity of dilated ophthalmoscopy in previous studies ranged from 32% to 82%.

Reference: Brown et al. Comparison of image-assisted versus traditional fundus examination. Eye and Brain, 2014











