**eTable 3.** Characteristics of the Individual Studies Evaluating T&E in PCV

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Study\*** | **Country** | **Group** | **n†** | **Duration** | **BCVA Outcomes** | **Treatment Interval** | **Number of Injections** |
| **Clinical trials (4 studies)**  *3 randomized trials;1 prospective, nonrandomized trial.* | | | | | | | |
| PLANET;  Lee et al 20187 / Wong et al 201913 | 8 countries‡ | Aflibercept monotherapy (i.e. plus sham PDT);  Year 1: q8, Year 2: Optional T&E§ | 157 | 96 weeks | Mean change from BL to Week 96: +10.7 ETDRS letters; mean change from Week 52 to Week 96 (optional T&E phase): 0 ETDRS letters | Proportion of patients treated at ≥12-week intervals at Week 96: 41.2% | Mean from BL to Week 52: 8.1; from Week 52 to Week 96: 4.6; over 96 weeks: 12.7 |
| Aflibercept plus active (“rescue”) PDT; Year 1: q8, Year 2: Optional T&E§ | 161 | 96 weeks | Mean change from BL to Week 96: +9.1 ETDRS letters; mean change from Week 52 to Week 96 (optional T&E phase): −1.7 ETDRS letters | Proportion of patients treated at ≥12-week intervals at Week 96: 37.0% | Mean from BL to Week 52: 8.1; from Week 52 to Week 96: 4.6; over 96 weeks: 12.6 |
| ALTAIR (PCV subgroup); Ohji et al 201861 | Japan | Aflibercept T&E  (2-week) | 46 | 96 weeks | Mean change from BL at Week 96: +3.7 ETDRS letters | Mean ± SD last treatment interval at Week 96: 12.1 ± 3.7 weeks; proportion of patients treated at ≥12-week intervals at Week 96: 54.3%, or a 16-week interval at Week 96: 41.3% | Mean ± SD from BL to Week 52: 7.1 ± 1.0; from Weeks 54 to 96: 3.4 ± 1.8; from BL to Week 96: 10.0 ± 2.9 |
| Aflibercept T&E  (4-week) | 44 | 96 weeks | Mean change from BL at Week 96: +4.9 ETDRS letters | Mean ± SD last treatment interval at Week 96: 12.7 ± 3.6 weeks; proportion of patients treated at ≥12-week intervals at Week 96: 62.8%, or a 16-week interval at Week 96: 48.8% | Mean ± SD from BL to Week 52: 6.7 ± 1.1; from Weeks 54 to 96: 3.5 ± 1.4; from BL to Week 96: 9.9 ± 2.5 |
| Teo et al 202159 | Singapore | Aflibercept T&E (“personalized”)¶ | 40 | 12 months | Adjusted mean (95% CI) change from BL at Month 12: +8.1 (6.5, 10.6) ETDRS letters | Proportion of patients treated at ≥12-week intervals at Month 12: 47.4% | Mean ± SD from BL to Month 12: 8.2 ± 0.9 |
| Aflibercept q8 (“fixed”) | 13 | 12 months | Adjusted mean (95% CI) change from BL at Month 12: +7.9 (5.2, 10.4) ETDRS letters | NA | Mean ± SD: 8.0 ± 0 |
| Maruko et al 2020; prospective60 | Japan | Aflibercept T&E (PCV subgroup) | 49 | 26 months | Mean ± SD (logMAR) at BL: 0.18 ± 0.31; at Year 1: 0.05 ± 0.23; at Year 2: 0.05 ± 0.20 | Proportion of patients treated at 3-month intervals at Year 2: 67.3% | Mean ± SD from BL to Year 1: 7.0 ± 2.4; from BL to Year 2: 12.0 ± 3.0 |
| Aflibercept T&E (typical nAMD subgroup) | 45 | 26 months | Mean ± SD (logMAR) at BL: 0.35 ± 0.36; at Year 1: 0.19 ± 0.29; at Year 2: 0.22 ± 0.33 | Proportion of patients treated at 3-month intervals at Year 2: 51.1% | Mean ± SD from BL to Year 1: 7.8 ± 2.0; from BL to Year 2: 14.3 ± 4.5 |
| **Retrospective observational studies (4 studies)** | | | | | | | |
| Hosokawa et al 201758 | Japan | Aflibercept T&E | 37 | 12 months | Mean ± SD (logMAR) at BL: 0.37 ± 0.37; at Month 12: 0.21 ± 0.29 | Mean interval at Month 12: 9.7 weeks; proportion of patients treated at 12-week intervals at Month 12: 59.5% | Mean (range): 8.2 (7–12) |
| Morizane-Hosokawa et al 201855 | Japan | Aflibercept T&E | 37 | 24 months | Mean ± SD (logMAR) at BL: 0.39 ± 0.36; at Month 24: 0.21 ± 0.30 | Mean ± SD interval at Month 24: 11.8 ± 4.4 weeks; proportion of patients treated at 16-week intervals at Month 24: 47.3%|| | Mean ± SD: 13.8 ± 3.7 |
| Morimoto et al 201757 | Japan | Aflibercept T&E | 58 | 24 months | Mean ± SD (logMAR) at BL: 0.27 ± 0.04; at Month 12: 0.12 ± 0.04; at Month 24: 0.15 ± 0.04 | Proportion of patients treated at 12-week intervals: 48.3% | Mean ± SE from BL to Month 12: 7.71 ± 0.16; from Month 12 to Month 24: 5.45 ± 0.30 |
| Tamachi et al 202156 | Japan | Aflibercept T&E | 51 | 12 months | Mean ± SD (logMAR) at BL: 0.25 ± 0.32; at Month 12: 0.18 ± 0.31 | Proportion of patients treated at 13-week intervals at Month 12: 60.8% | Mean ± SD: 7.5 ± 1.9 |

\*Study name (if applicable), first author, and year of publication.

†Number of subjects receiving treatment in each comparison group.

‡Australia, Germany, Hong Kong, Hungary, Japan, Singapore, South Korea, and Taiwan.

§From Weeks 52 to 96, patients who did not meet the rescue criteria could have their treatment intervals extended at the discretion of the investigator and was not mandated as part of the study protocol. Patients who did not have their treatment intervals extended continued the same treatment regimen as in Year 1.

¶At Week 12, patients in the “personalized” group with complete regression of polypoidal lesions on ICGA commenced the T&E phase. Patients with presence of polypoidal lesions on ICGA (with or without fluid on OCT) continued 4-weekly injections until Week 24 and commenced the T&E phase thereafter.

||Outcomes represent those from 19 patients with polypoidal regression (PR+ group) on ICGA after the loading dose.

BCVA indicates best-corrected visual acuity; BL, baseline; CI, confidence interval; ETDRS, Early Treatment Diabetic Retinopathy Study; ICGA, indocyanine green angiography; logMAR, logarithm of the minimum angle of resolution; NA, not applicable; nAMD, neovascular age-related macular degeneration; OCT, optical coherence tomography; PCV, polypoidal choroidal vasculopathy; PDT, photodynamic therapy; q8, every 8 weeks; SD, standard deviation; SE, standard error; T&E, treat-and-extend.