Post Hoc Analysis of Clinical Suprachoroidal Injection Experience Across Indications

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Financial Disclosures

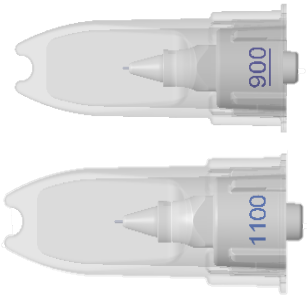
- MB: Clearside Biomedical (R), RegenxBio (C), Bausch & Lomb (C)
- TC: Clearside Biomedical (E, I)
- CW: Clearside Biomedical (E, I)
- BK: Clearside Biomedical (E, I)
- CH: Clearside Biomedical (E, I)

C = Consultant; E = Employment; R = Recipient; I = Personal Financial Interest

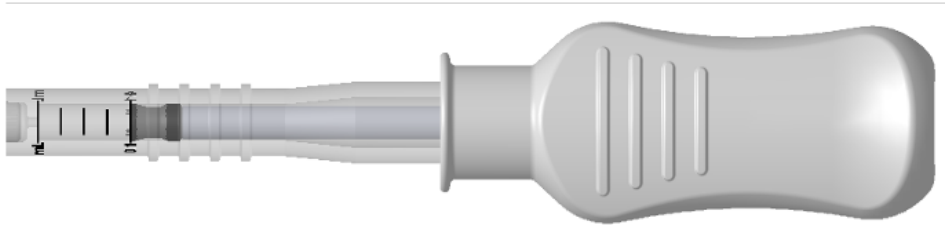
Suprachoroidal Injection (SCI) with the SCS Microinjector®

- SCI Performed 1,000+ times in clinical trials to date
- Emerging as an effective drug delivery route to the back of the eye
- Two needle lengths included to accommodate variation in patient anatomy, when starting with 900 µm needle.

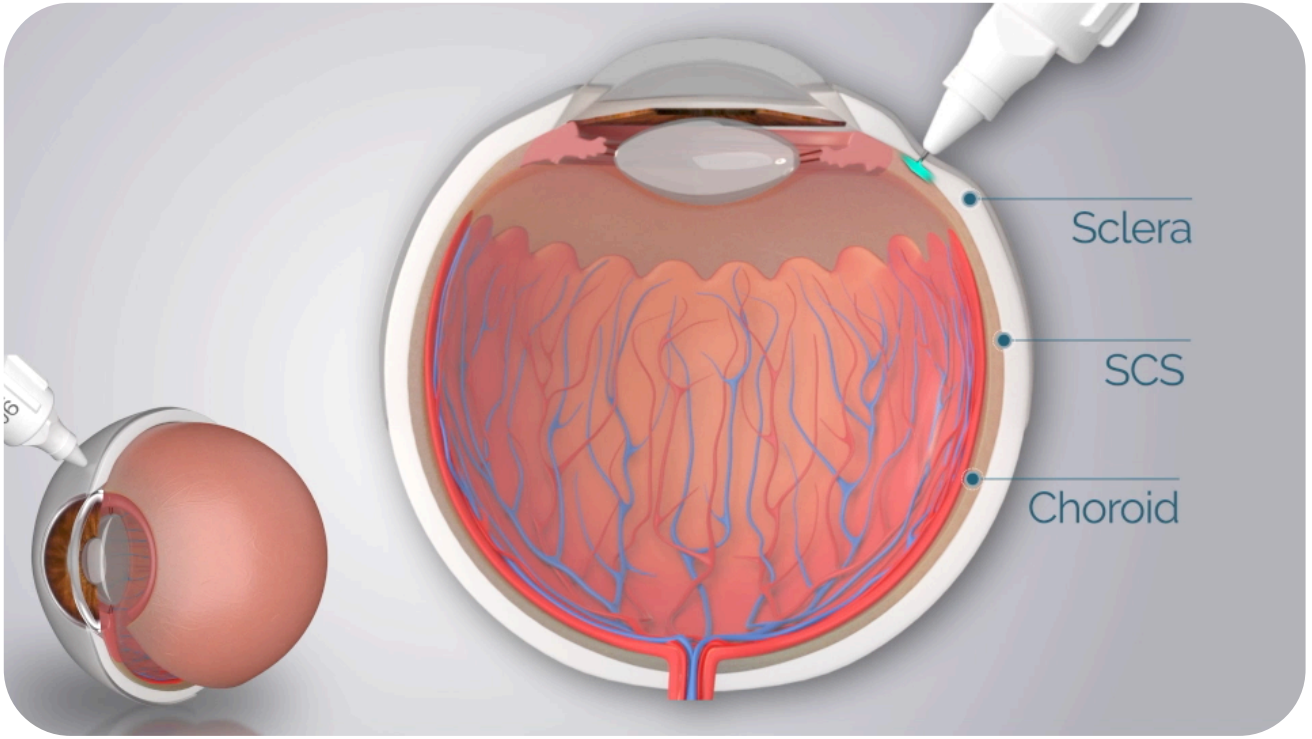
900 µm and 1100 µm Needles (capped)



SCS Microinjector® Syringe



Suprachoroidal Injection (SCI) with the SCS Microinjector®



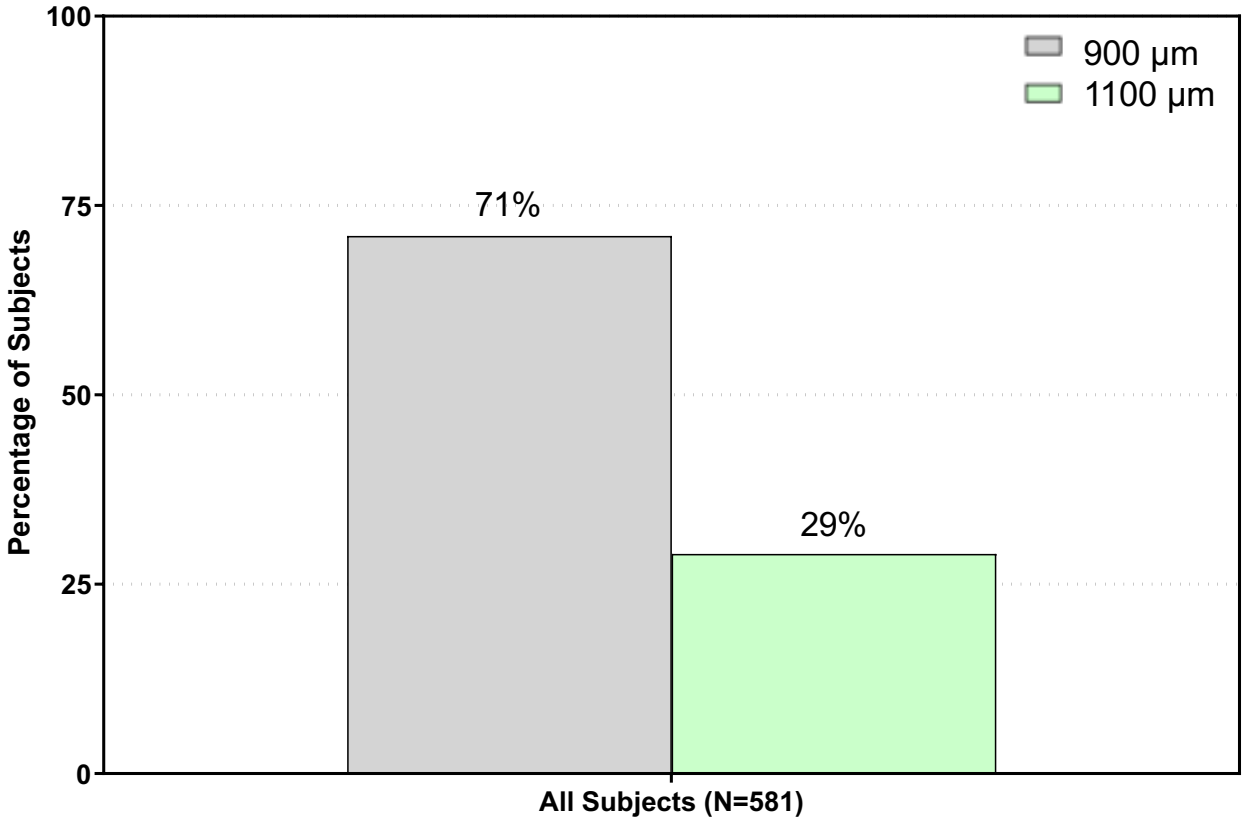
Methods

- Retrospective evaluation of correlation between usage of 900 µm / 1100 µm needle in SCIs and demographics and ocular characteristic data
  - Included baseline injections to minimize experience bias
  - Included SCIs where the investigator determined CLS-TA was administered
- Six controlled trials across 3 disease states
- Pearson chi-square analysis and biserial correlations were performed for univariate analysis of categorical and continuous variables
  - Confirmed by multivariate logistical regression

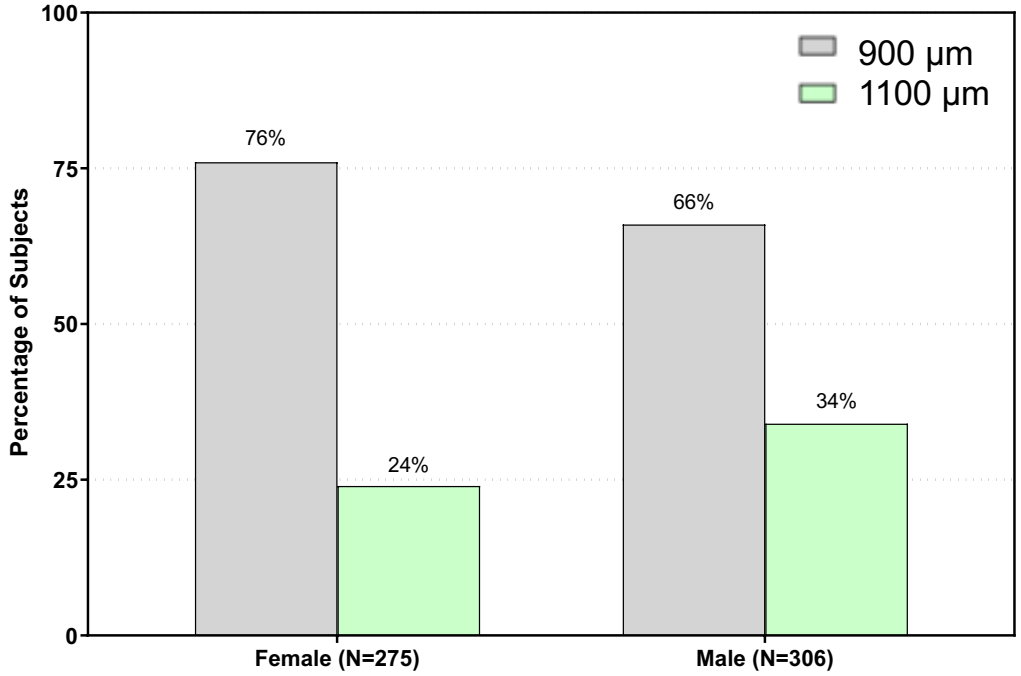
Results

- SCIs in 133, 36, and 412 patients with NIU, DME, and RVO, respectively
- 71% of all SCIs were completed with the 900 μm needle
- Patient gender and quadrant of administration correlated with needle length used
- No statistically significant relationships were found between needle length and:
  - visual acuity
  - intraocular pressure
  - retinal central subfield thickness
  - lens status
  - indication
  - age
  - race

Overall, 71% of Baseline SCIs Completed with the 900 µm Needle



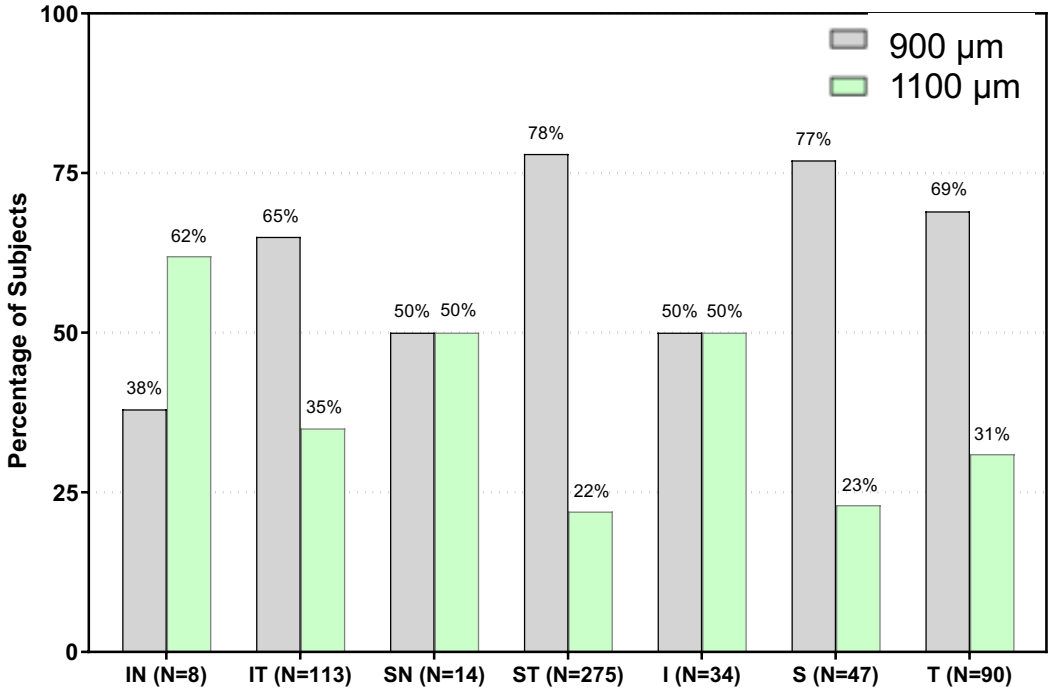
Gender moderately correlated with needle length used



P-value (Pearson chi-square): 0.0061.

The variations by gender could be confounded by other factors, such as height or weight differences between male and female study subjects, which were not assessed.

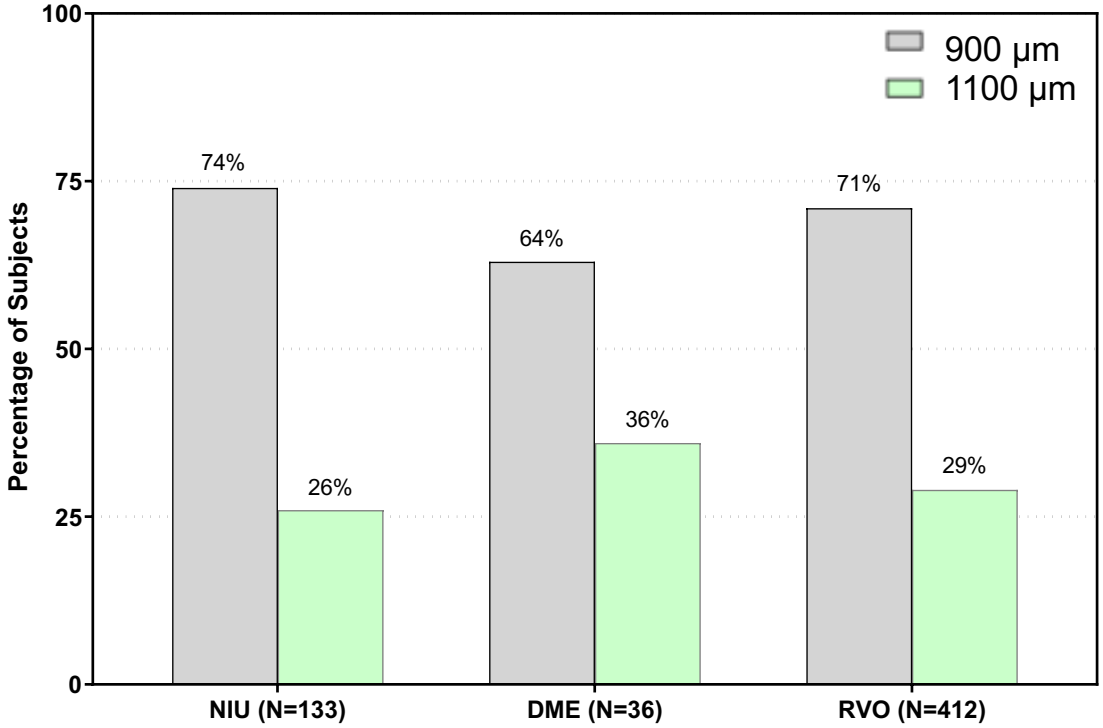
Administration quadrant correlated with needle length used



P-value (Pearson's chi-square): 0.0005.

The variations in administration quadrant corroborates literature reports of thinner sclera in the superior hemisphere, compared to the inferior, at the pars plana

Disease indication did not correlate with needle length used



P-value (Pearson's chi-square): 0.5035.

64 – 74% of injections were completed with the 900 µm needle for NIU, DME, and RVO indications

Conclusion

- Overall, the two needles provided in the kit accommodated patient ocular anatomic and demographic variation
- SCIs showed consistency across demographics and ocular characteristics
- Small correlations exist between needle length and gender or injection quadrant

Note: These correlations should not be used to inform clinical decisions