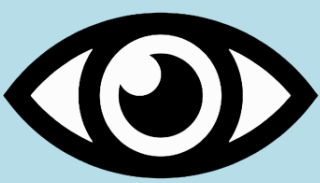


Management of Idiopathic Macular Telangiectasia Type 2


Khodabande, A., Roohipoor, R., Zamani, J. et al. Ophthalmol Ther (2019) 8: 155. <https://doi.org/10.1007/s40123-019-0170-1>

Indication



MacTel


Therapy



Various


Background

MacTel is a relatively rare disease with limited treatment options. Recent advances in understanding the pathiophysiology of this disease has resulted in a shift in proposed treatment paradigms.



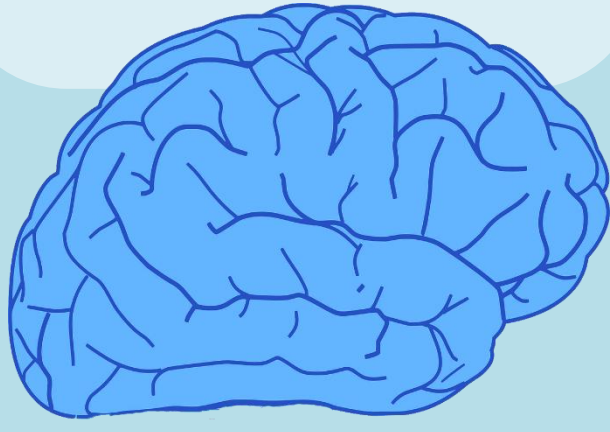
Aim

We aimed to provide an up-to-date summary of treatment options and emerging research for this condition.



Key messages

MacTel pathogenesis has shifted from considering this a vascular condition to a principally **neurodegenerative disease**.

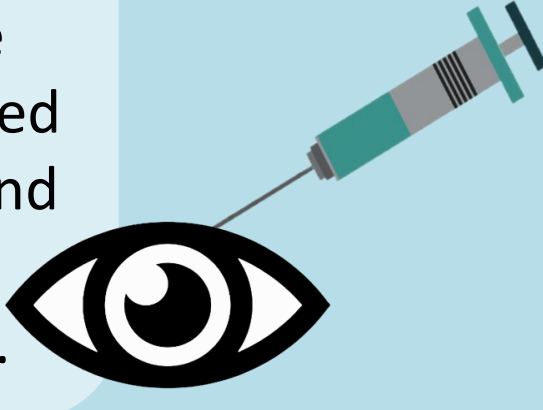


Studies evaluating treatment of the **non-proliferative phase** have more focused on **neuroprotective agents**.




- **Carotenoid supplementation** has had mixed results.
- **CNTF** has demonstrated some promising early results, but further study is necessary to determine its actual effect.
- Some structural improvements have been seen in the non-proliferative phase with **oral acetazolamide** but without accompanying functional improvement.

Anti-VEGF therapy of proliferative phase is associated with structural and functional improvements.



Lack of level I evidence in the current literature should be resolved with multicenter trials.



Abbreviations:

Anti VEGF – Anti vascular endothelial growth factor, CNTF - Ciliary neurotrophic factor, MacTel - Idiopathic Macular Telangiectasia Type 2