Ask the Expert Event – Dr. Brittany Yelle, OD, Precision Cornea Center, Ottawa

Endoret PRGF Experience Sharing
Virtual Meeting Supported by Labtician Ophthalmics
February 7, 2024

Questions & Answers

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Who are the key individuals	Dr. Yelle, Optometrist, Precision Cornea Center, Ottawa, ON
present at the meeting?	Participants – Optometrists
	MaryAnn Klassen, Director of Marketing, Labtician Ophthalmics
	Eris Ligu, Clinical and Scientific Advisor, Labtician Ophthalmics
What is the objective of the meeting?	The objective is to provide an interactive and informal platform for attendees to ask questions, share experiences with Endoret PRGF, and learn from each other.
What is Dr. Yelle's experience with Endoret PRGF?	Dr. Yelle has referred over 100 patients into the Endoret program.
What are the key insights shared by Dr. Yelle about Endoret PRGF?	Dr. Yelle shared her positive experiences with Endoret, highlighting its effectiveness in treating chronic dry eye and its benefits for various patient cases, including those with poor healing neurotrophic ulcers, PEEs, and post-cataract surgery.
How do you determine the dosing for treatment?	Start with QID, assess at one month, adjust based on response.
How many rounds of	Dependent on improvement and corneal response, taper based on
treatment do you do and when do you know when to come off?	symptoms and examination.
Would the glaucoma patient suffering from DED need to be on PRGF indefinitely or just for three to six months?	Dependent on improvement, may be forever or pulsed over time, considering the patient's condition and cost.
Are there any particular cases when one treatment cycle is not sufficient?	Neurotrophic cases may require retreatment, and some severe dry eye patients such as those related to Sjögren's may need a second round of treatment or pulse-therapy.
How do you feel about starting treatment earlier for chronic declining conditions?	Consider starting treatment earlier for chronic, declining conditions to prevent reaching the same stage after going through the entire treatment algorithm.
How often do patients decline due to cost?	Rarely do patients decline due to cost. They often ask if it's necessary and are willing to proceed if recommended.
When to select thermal	Patients with diagnosed autoimmune conditions or on specific
treatment option?	medications are recommended for thermal treatment.
What does the thermal treatment really do?	The thermal treatment targets the activity of the complement C and Ig E. Patients suffering from autoimmune conditions or known with hypersensitivity type IV such as seasonal allergies, etc. often have increased activity of these proteins. The additional thermal treatment makes the Endoret safer for these patients while it preserves its biological profile.

Use of PRGF for corneal wound healing and scar prevention?	PRGF may help in faster wound closure, potentially reducing scar formation, especially in persistent epithelial defects. Note: Endoret PRGF is abundant in platelets, adhesion proteins, and growth factors such as PDGF, TGF-\(\beta\)1 and \(\beta\)2, IGF-1, VEGF, EGF, FGF-2, and more. These are all essential in the wound healing and regeneration process.
Decision between Endoret and amniotic membrane?	Amniotic membrane is preferred for larger defects, while Endoret is used for smaller defects or to prevent reopening of defects.
Preference between PRGF and amnion for neurotrophic cases?	PRGF may be chosen for reducing inflammation, while amnion is preferred for creating an extra barrier on the cornea.
How long can Endoret be kept in the freezer if the patient feels better and comes off it before all their droppers have been used?	Endoret is stable in the freezer for six months.
What do you recommend if patients need symptom relief between their doses?	Patients can use their go-to artificial tear in between doses, but excessive use of PRGF should be avoided.
Can cyclosporine and PRGF be used together?	Cyclosporin and PRGF can be used together, as they have different mechanisms of action and can complement each other's effects.