Age-Related Macular Degeneration with Concurrent Hydroxychloroquine Use: Managing a Specific Population

Ruth Hyatt, OD
William V. Chappell, Jr., VA Multispecialty Clinic, Daytona Beach, FL
11/8/2016
ruth.hyatt@va.gov

Objective: Rule out HCQ maculopathy in context of AMD

“Flying Saucer” Sign (Chen, et al.)
mfERG helps confirm absence of toxicity (Dettoraki, et al.)

Objective: Identify (updated) risk factors for HCQ maculopathy development (Marmor, et al.)

Pattern of Retinopathy: Asian ancestry- toxicity commonly pericentral (within arcades) so use HVF 24-2/30-2 and wide OCT scans

Dose: <5.0mg/kg
<1% risk in years 0-5
<2% risk up to year 10
20% risk after 20 years

Major Risk Factors
High dose
Long duration of use
Renal disease
Tamoxifen use (5-fold increase in risk)
Retinal/Macular Disease?

No longer risk factors
Age
Hepatic Disease

Recommended Reading

