

# Real-World Time Savings on Patient Education and Call-Backs Related to Post-Cataract Therapy Using an Intracanalicular Dexamethasone Insert

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# FINANCIAL DISCLOSURES

Cynthia Matossian, Alanna S. Nattis, and Lisa M. Nijm were participants in the survey

Alyssa M. Montieth, Leah K. Depperschmidt, Srilatha Vantipalli, Jamie Lynne Metzinger and Michael H. Goldstein are employees of Ocular Therapeutix, Inc.

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# Introduction and Rationale

## Burden of Post-Cataract Surgery Eyedrops on Physicians

- Clinicians invest time on:
  - training patients eyedrop administration
  - following up to ensure compliance
  - addressing complications from improper technique
- Patient and pharmacy questions regarding use of post cataract surgery eyedrops are major drivers of calls to physician offices<sup>1</sup>

## DEXTENZA (dexamethasone ophthalmic insert) 0.4 mg

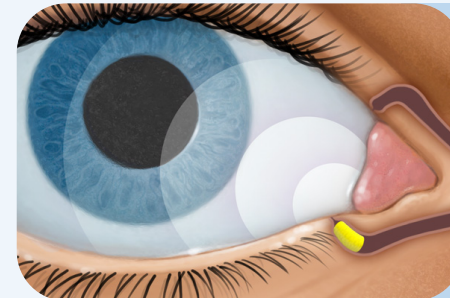
- Intracanalicular, sustained-release, bioresorbable, hydrogel-based insert that releases dexamethasone over 4-weeks<sup>2</sup>
- FDA-approved for treatment of ocular inflammation and pain following ophthalmic surgery<sup>2</sup>

***Because the insert is physician-administered, this study evaluated the impact of using the intracanalicular dexamethasone insert instead of topical steroid eye drops***



### Activates:<sup>2,3</sup>

- With moisture
- Swells to fit in the canaliculus



### Releases:<sup>2,3</sup>

- Dexamethasone for up to 30 days



### Resorbs:<sup>2,3</sup>

- Slowly through the course of treatment
- Clears via the nasolacrimal duct

# Methods: Study Design

## Phase 4 Experiential Cross-Sectional Survey Study

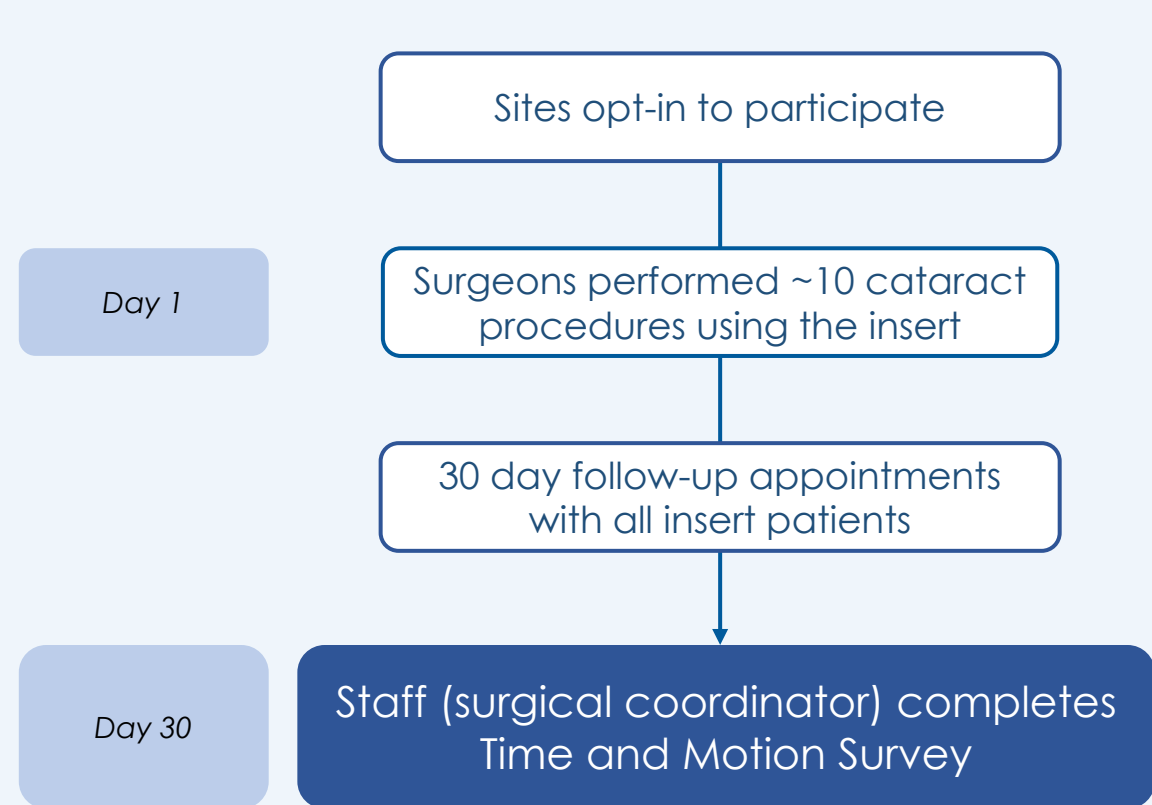
### Early Experience Program

- The Early Experience Program (EEP) collected initial user experience and feedback with the intracanalicular dexamethasone insert in cataract surgery patients

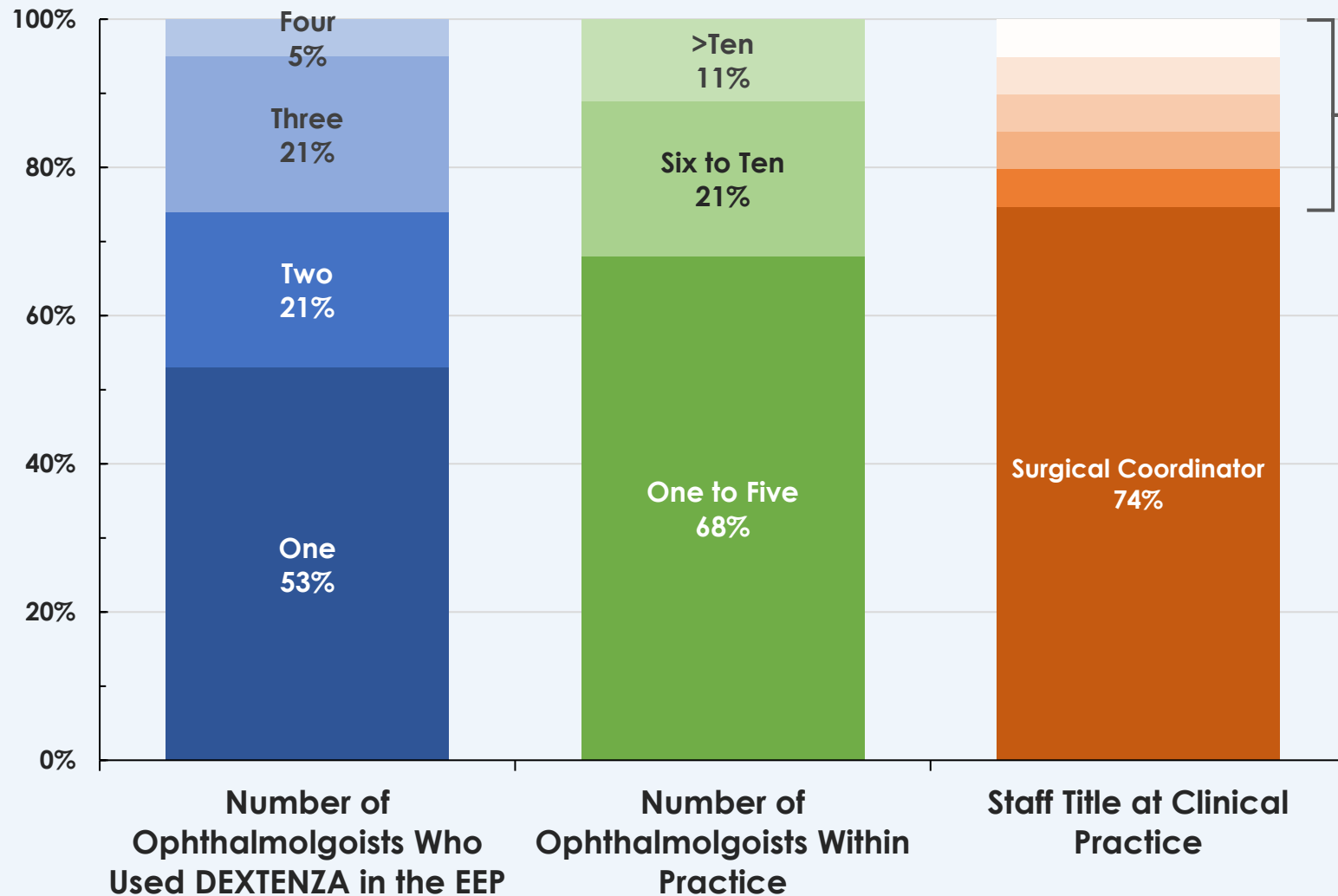
### Survey Respondents

- Practice staff (surgical coordinators) from 23 US sites, including ambulatory surgical clinical settings and outpatient clinical settings
- Sites selected based on geographic region, presence of >2 surgical ophthalmologists, and cataract surgery volume
- 19 staff representatives were surveyed at 1 month following cataract surgery with the intracanalicular dexamethasone 0.4 mg insert administration

### Study Flow: Staff Representatives



# Practice Demographics (N=19)



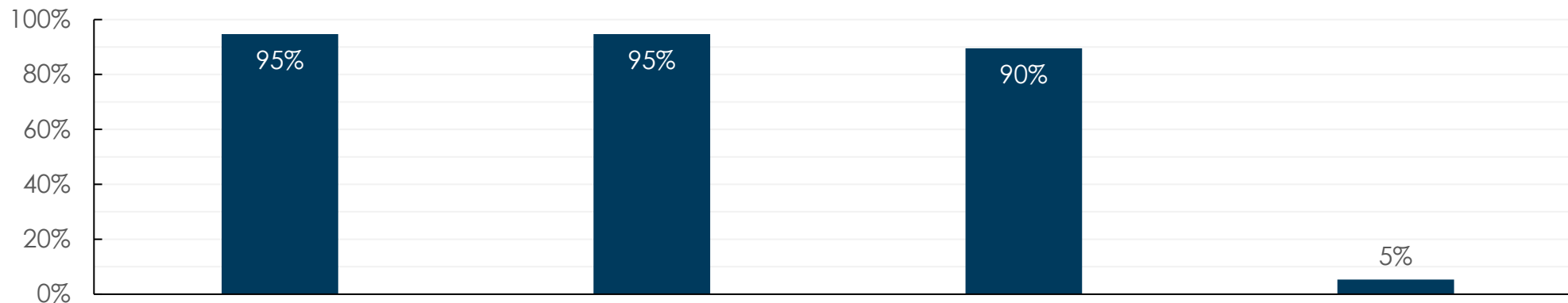
**5% Each:** Office Manager, Lead Ophthalmic Technician, Surgery Coordinator Supervisor, Research Director, COA Surgical Coordinator

## Predominant functions of staff representatives included:

- scheduling surgery with hospital/ambulatory surgical center
- patient counseling
- scheduling surgery with patient
- answering post-operative patient question
- verifying insurance coverage

# The Most Common Eyedrop Regimens After Cataract Surgery are 4 Weeks of Steroids (78%), 4 Weeks of NSAIDs (68%), and 1 Week of Antibiotic Drops (65%)

Standard of Care Eyedrop (N=19)



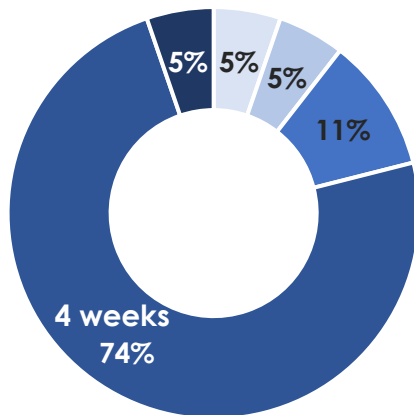
Steroid

NSAID

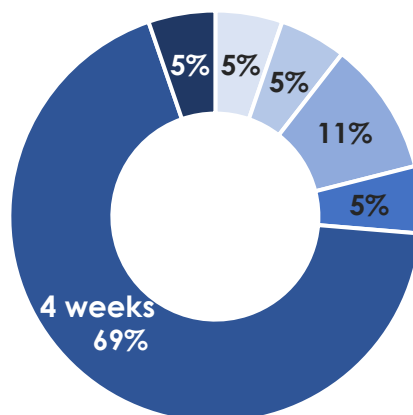
Antibiotic

Other

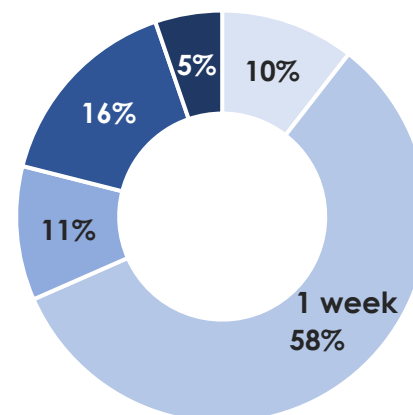
Typical Length of Use of Eyedrop (N=19)



Mean of 3.9 weeks of steroid use after surgery



Mean of 3.7 weeks of NSAID use after surgery

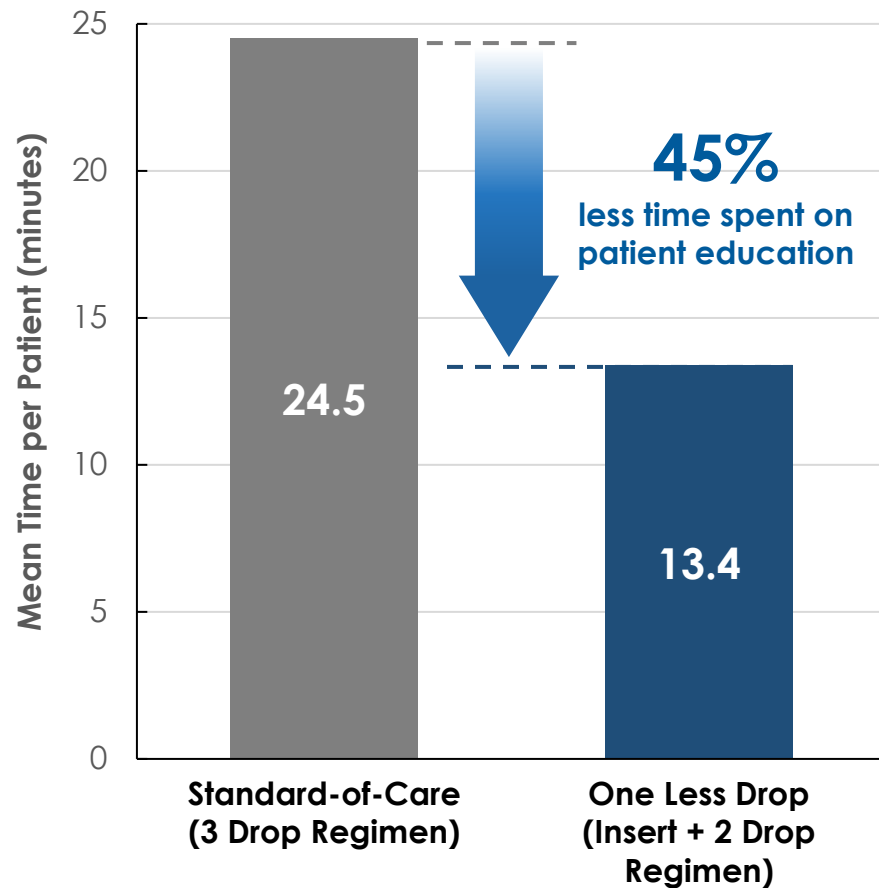


Mean of 2.0 weeks of antibiotic use after surgery

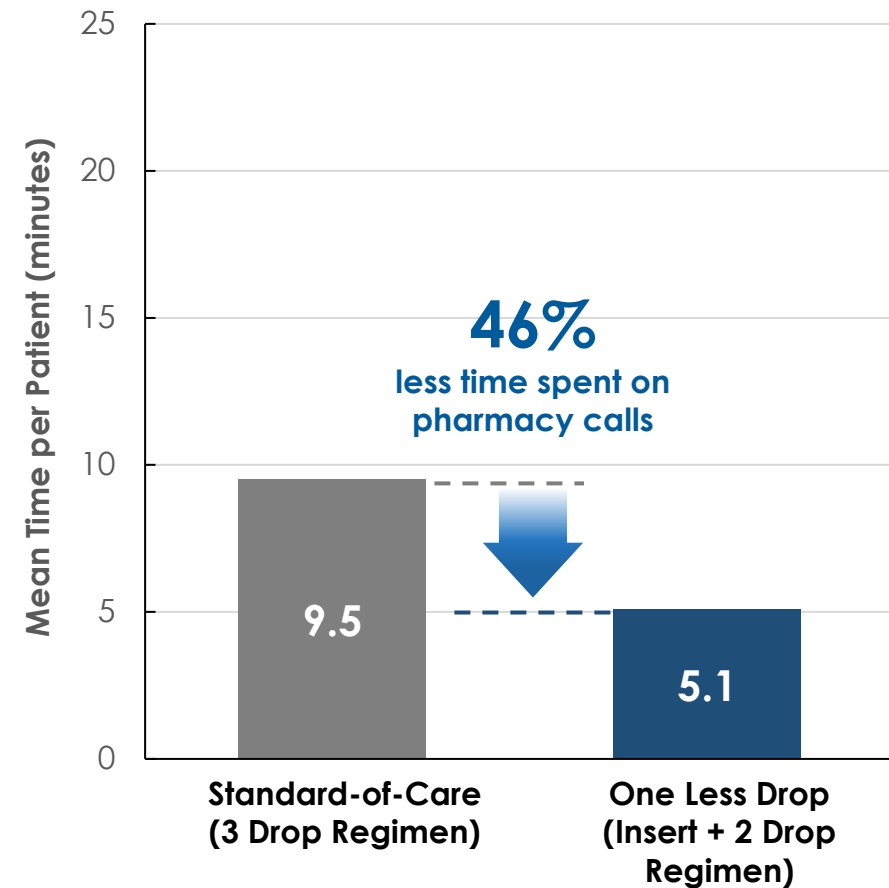


# DEXTENZA Reduced the Amount of Time Staff Spent on Postoperative Drop Counseling by 45% per Patient

Amount of Time Practice Staff Spend on Patient Education per Patient (N=19)



Amount of Time Practice Staff Spend on Pharmacy Calls per Patient (N=19)



# Time Savings with Using the Intracanalicular Dexamethasone Insert Equates to Approximately 40 Staff Hours in a Week

Mean of **8.3 ophthalmologists** per practice

Mean of **19.3 surgeries per ophthalmologist** in a week

Average case volume of surveyed practices is **160.2 surgeries per practice in a week**

**11.1 minutes** saved on patient education

**4.4 minutes** saved on pharmacy calls

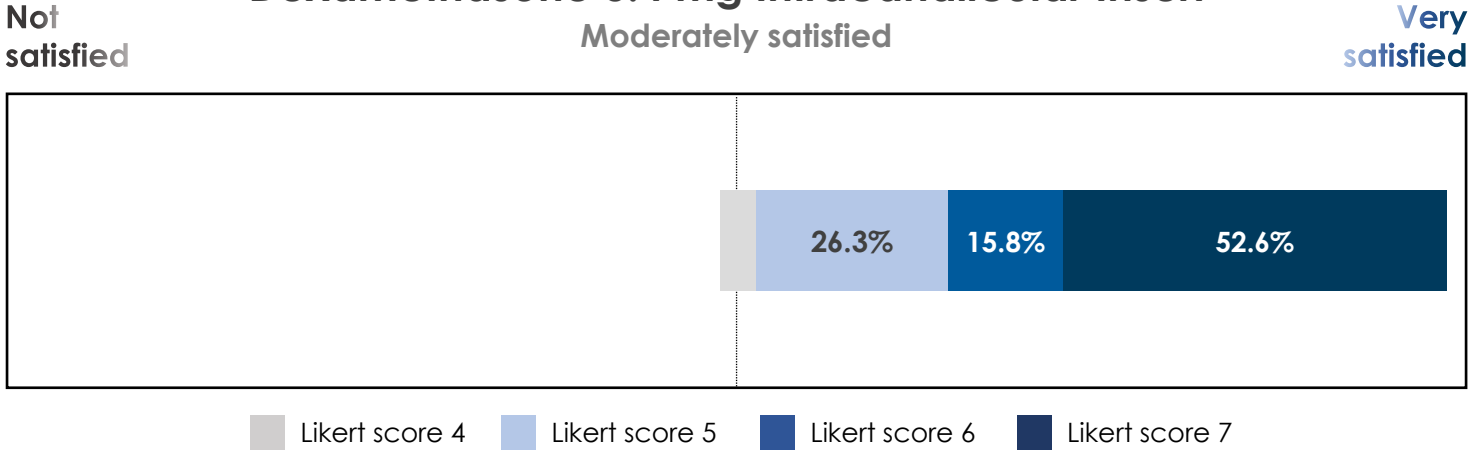
Practice staff spend a total of **15.5 minutes less on each patient**

**41.4 staff hours saved in a week** per practice by using the intracanalicular dexamethasone insert



# Overall, a Majority of Staff (95%) were Satisfied with the Dexamethasone 0.4 mg Intracanalicular Insert

## Staff Representatives' Overall Satisfaction with the Dexamethasone 0.4 mg Intracanalicular Insert\*



\*Staff representatives (N=19) were asked to rate how satisfied they were with DEXTENZA as a new means of providing 30 days of steroid treatment for cataract patients on a Likert scale of 1 (extremely dissatisfied) to 7 (extremely satisfied)

# Conclusions

Utilization of the intracanalicular dexamethasone 0.4 mg insert conserves time practice staff spent on patient education and callbacks



The most common standard-of-care eyedrop regimens after cataract surgery were 4-week taper of steroids, 4 weeks of NSAID use, and 1 week of antibiotic drops



Real-world practice evidence demonstrated **the time surgical staff spent on patient education and pharmacy calls was almost halved with the use of the intracanalicular dexamethasone 0.4 mg insert** compared to standard-of-care



For a typical practice that participated in the survey, time savings with using the intracanalicular dexamethasone 0.4 mg insert was approximately **40 staff hours per week**



A majority of staff reported **high satisfaction** with the use of the intracanalicular dexamethasone 0.4 mg insert as a postoperative steroid treatment following cataract surgery