

**TABLE 3-1. AREDS ASSESSMENT OF RISK FOR DEVELOPMENT OF ADVANCED DISEASE\***

<b>NO. OF RISK FACTORS</b>	<b>RISK, %</b>
<b>0</b>	0.4
<b>1</b>	3.1
<b>2</b>	11.8
<b>3</b>	25.9
<b>4</b>	47.3

\*One point per eye for the presence of large drusen; 1 point per eye for the presence of pigmentary changes; 1 point total for extensive intermediate drusen in both eyes; 2 points for advanced AMD in one eye.

Adapted from Ferris FL, Davis MD, Clemons TE, et al. A simplified severity scale for age-related macular degeneration: AREDS report no. 18. *Arch Ophthalmol.* 2005;123(11):1570-1574.

## CLASSIFICATION BASED ON FLUORESCEIN ANGIOGRAPHY APPEARANCE

A classification system based on FA findings was devised for wet AMD, which was especially relevant in the laser and photodynamic therapy era but is becoming less relevant in the era of anti-vascular endothelial growth factor (anti-VEGF) therapy.<sup>11</sup> On FA, CNV can be divided into 2 main types: classic CNV and occult CNV. The classification of wet AMD based on FA appearance is discussed in more detail in Chapter 4, Section 3.

Choroidal neovascular membranes that show combined features of classic and occult CNV are further subclassified into predominantly classic and minimally classic. Those that show classic features for at least 50% of their total area are called predominantly classic, whereas those that show classic features for less than 50% of their total area are called minimally classic.

Choroidal neovascular membranes can also be subdivided based on their relationship to the center of the foveal avascular zone (FAZ). CNV membranes are considered extrafoveal if they are  $\geq 200$  and  $< 2500$   $\mu\text{m}$  from the center of the FAZ, juxtafoveal if they are 1 to 199  $\mu\text{m}$  from the center of the FAZ, and subfoveal if they involve the center of the FAZ.

## RISK STRATIFICATION BASED ON EXAMINATION FINDINGS

Using the original 4-category staging system used in the AREDS, the 5-year risk of developing advanced AMD in at least one eye was 1.3% for eyes in category 2, 18.3% in category 3, and 43.9% in category 4 (Table 3-1).<sup>18</sup> In 2005, the AREDS Research Group defined a “simplified severity scale” to help to better determine the risk of developing