B30

Adriana Kaganovski B.A.

Advisor(s): Roland Theodore Smith Ph.D.,M.D.

Co-author(s): Alauddin Bhuiyan , Anisha Kasi, Sofie Chen, Robert Thomson, Tasin Bhuiyan, Arun Govindaiah, Avnish Deobhakta, Gareth Lema , Katy Tai, Matthew A. Weissman, Leonard Amoruso

Elevated Prevalence of Age-Related Macular Degeneration in Urban Primary Care Setting

Purpose: Age-related macular degeneration (AMD) is the most common cause of vision loss in individuals over age 50. Given the disease's insidious onset and the current gap in the literature on the prevalence of AMD in primary care medical practices, it is imperative to characterize disease prevalence in diverse, urban, and primary care settings. We performed a post hoc analysis of a cross-sectional study to determine the prevalence of AMD among a diverse cohort of urban primary care patients.

Methods: 312 patients were recruited when obtaining routine health services from their primary care physician at a busy hospital-based primary care practice, Mount Sinai Hospital-Union Square (MSH), in lower Manhattan near one of the busiest subway stations in New York City, attracting a diverse group of patients. Participants were not selected on the basis of existing ocular pathologies. After obtaining informed consent, color fundus photographs were acquired for each recruited patient and read by two physicians and, as needed, an adjudicator, who categorized each patient as referable or non-referable with regards to AMD. Patients included in this post hoc analysis were limited to those aged 50-89.

Results: The prevalence of AMD within this cohort was significantly greater than the projected stratified values reported by the CDC at all age stratification levels. The most significant difference in AMD prevalence between the MSH cohort and the CDC values were found in the 50-54 age range, with the MSH prevalence of 39.47% being over five times greater than the CDC reported value of 7.84% for the same age group.

Conclusions: This study found higher prevalence of referable AMD at an urban primary care center, compared to CDC-published national averages. This underscores the need for improved screening and early detection to prevent irreversible vision loss in at-risk populations.