

Short-term effects of ocular 2% dorzolamide, 0.5% timolol or 0.005% latanoprost on the anterior segment architecture in healthy cats: a prospective study.

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Jean-Baptiste Barbry, Anne-Sophie Poinsard, Thierry Bastogne, Olivier Balland. Short-term effects of ocular 2% dorzolamide, 0.5% timolol or 0.005% latanoprost on the anterior segment architecture in healthy cats: a prospective study. Open Veterinary Journal, 2020. hal-02396549

HAL Id: hal-02396549 https://hal.science/hal-02396549v1

Submitted on 6 Dec 2019

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23 Abstract

Dorzolamide 2%, timolol 0.5% and latanoprost 0.005% are widely used in the medical 24 25 management of glaucoma in humans and pets. In this study, we wanted to evaluate the effect 26 of these three molecules belonging to different hypotensive families on intraocular pressure 27 (IOP) and anterior segment architecture in clinically healthy cats and compare these data with those obtained in a previous study under the same conditions in healthy dogs. In this prospective 28 29 study 45 cats were included and divided into 3 homogeneous groups. For 7 days eye drops were instilled in the right eye (treated eye), dorzolamide 2% BID for the first group, timolol 0.5% 30 BID for the second group and latanoprost 0.005% SID for the third group. The left (untreated) 31 32 eye of all these cats constitute a control group useful for the statistical analysis of the data. On D0 and D7, the IOP was measured with Tonovet® and then, a high frequency ultrasound 33 34 (ultrasound biomicroscopy UBM) was undertaken under general anesthesia. A biostatistical 35 study of the 1440 data was then performed. Statistical test validated the use of the controlateral 36 eye as a control, and the representativeness of a sample of 15 animals per group. At D7, the 37 IOP of healthy cats treated with dorzolamide 2% BID decreased significantly whereas no 38 variation was obtained with instillation of timolol 0.5% and latanoprost 0.005%. According to 39 our protocol, these three hypotensive molecules do not significantly affect the architecture of 40 the anterior segment of the clinically healthy feline eye as in dogs.

41

42 Keywords

43 Cats, dorzolamide, latanoprost, timolol, UBM.

44

45 Running title

46 Effects of three anti-glaucomatous drugs on the anterior segment architecture in cats.

47

48 Introduction

49 A common feature of all glaucoma in animals is the neurodegenerative disorder of retinal 50 ganglion cells (RGCs) and their axons, an abnormal increase in intraocular pressure (IOP) 51 represents a constant risk factor [Stiles, 2013]. The IOP is maintained at a relatively constant 52 level and the rate of aqueous humor (AH) formation equals the outflow. Increase in IOP results from impairment of the aqueous humor outflow through the trabecular conventional pathway 53 54 and/or through the uveoscleral pathway. It is estimated that glaucoma can affect about 1% of 55 cats over the age of seven [Kroll et al., 2001] and most cases of feline glaucoma are secondary 56 [Stiles, 2013].

57 Current therapy for feline glaucoma follows the same guidelines used in other species. Medical therapeutic option includes many topical hypotensive agents used in humans and dogs. Among 58 59 hypotensive drugs, 3 families are commonly used: carbonic anhydrase inhibitors (such as 60 dorzolamide), beta-blockers (such as timolol) and prostaglandin analogs (such as latanoprost). Dorzolamide reduces the active formation of HA by inhibiting the action of carbonic anhydrase, 61 62 which is found abundantly in the ciliary body epithelial cells. Timolol as a beta-blocker, lowers 63 aqueous humor flow by altering the adrenergic neuronal control of aqueous humor formation 64 by blockade of the beta-receptors in the ciliary body processes, it may also inhibit active 65 transport and ultrafiltration related to sodium transfer system. Latanoprost reduces IOP by increasing the uveoscleral outflow. The remodeling of the extracellular matrix between the 66 ciliary muscle fibers by local metalloproteases contributes to this pharmacological effect 67 68 [Plummer et al., 2013].

In a recent study by Poinsard et al., 2018, these three hypotensive drugs lowered significantly IOP in dogs without modification of the biometry of the iridocorneal angle (ICA). This result is consistent with the hypotensive effect of dorzolamide and timolol on ciliary body epithelium but it is more surprising with latanoprost which increases the uveoscleral outflow of aqueous humor, all the more so as a previous study shows that the biometry of the anterior segment and
the ciliary cleft is modified two hours after the application of a drop of latanoprost 0,005% in
dogs [Gelatt and Mackay, 2001].
The goal of this study was to compare the effect of these three hypotensive molecules on IOP
and biometry of the anterior segment of healthy cats, as well as to compare these data with
those obtained by Poinsard et al., 2018 in healthy dogs with the same protocol under the same

79 conditions. To evaluate the biometry of the anterior segment, we used high-frequency 80 immersion ultrasound with high definition (20-50µm) for structures up to 5mm deep 81 [Leibmann, 1998], while being non-invasive, and for which most of the parameters of the 82 anterior segment have already been objectified in healthy cats [Aubin, 2003].

83

84 Materials and Methods

85

86 1. Inclusion criteria

This prospective study with a control group was performed using 45 healthy cats without any 87 88 current local or systemic treatment. These 45 cats belonged to staff or customers of the Lorrainevet veterinary clinic. All the dogs were included with the consent of their owners. A 89 90 complete general and ophthalmic examination including slit-lamp biomicroscopy and indirect 91 ophthalmoscopy without pupillary dilatation was performed, followed by an evaluation of IOP using a rebound tonometer (Tonovet®, Icare, Vantaa, Finland). All animals with an 92 93 ophthalmologic history or a difference greater than 2 mmHg IOP (on an average of three IOP 94 measurements) on both eyes were excluded from the study.

95

96 2. <u>Experimental protocol</u>

Commenté [MOU1]: cats

97 Cats were divided into 3 homogeneous groups (weight, age, sex, race) of 15 cats (Table I). The 98 study was done in two steps, spaced 7 days apart. The first step (D0) was performed in a 99 mesopic environment, a complete general and ophthalmic examination, without dilation and 100 without any instillation, was carried out between 10 am and 1 pm for each animal. IOP was an 101 average of three measures on each eye. Ultrasound biomicroscopy (UBM) examination 102 (Aviso®, Quantel Medical, Cournon d'Auvergne, France) was then performed under isoflurane 103 gas anesthesia after medetomidine premedication and ketamine induction. At the awakening of 104 each animal, eye drops were instilled into the right eye. For group 1, one drop of dorzolamide 105 2% (Trusopt 20mg / ml eye drops ND, MSD, Courbevoie, France) was instilled twice daily, at 106 7am and 7pm, from D0 at 7pm until D7 at 7am. For group 2, one drop of 0.5% timolol 107 (Timoptol 0.5% eye drops, MSD, Courbevoie, France) was instilled twice daily according to 108 the same protocol as group 1. For group 3, one drop of latanoprost 0.005% (Xalatan 0.005% 109 eye drops ND, Pfizer, Paris, France) was instilled once a day at 10pm in the fornix of the right 110 eye for seven days, from D0 at 10 pm until D6 at 10 pm included.

In the second step, on day 7, all animals were re-examined 12 hours after the last drop of latanoprost and 6 hours after the last drop of dorzolamide or timolol, with the same procedure under the same conditions as on D0. All examinations and UBM ultrasound were performed by the same operator on D0 and D7.

115 3. <u>UBM high frequency ocular ultrasound</u>

The ultrasound biomicroscopy for this study was a 50Mhz monotransducer with immersion probe with a geometric focalization and line scanning (UBM Aviso®, Quantel Medical, Cournon d'Auvergne, France). The patient was positioned in dorsal recumbency with its head stabilized in a vacuum pillow. Two video sequences were recorded for each eye at D0 and D7. The first sequence was recorded by placing the probe both centrally and perpendicular to the corneal surface to determine the distance between the apex of the corneal endothelium and the apex of the anterior capsule of the lens, at the 12 o'clock position. In the second sequence, the outflow pathways were evaluated in the dorsal quadrant with the probe placed perpendicular to the corneoscleral limbus at the 12 o'clock position. From each video sequence, one image was chosen for analysis (Figure 1).

126 4. <u>The anterior segment parameters</u>

127 Nine parameters were evaluated (Figure 2): (a) the ICA, (b) the width of the entrance of the 128 ciliary cleft (CC), (c) the width of the mid-CC, (d) the length of CC, (e) the depth of the anterior 129 chamber (AC), (f) the thickness of cornea at the corneoscleral limbus note, (g) the distance 130 between Schwalbe's line (the borderline between the cornea and sclera) and the anterior lens 131 capsule according to Kawata and Hasegawa., 2013 and (h) the area of the ciliary cleft. These parameters were those described by Dulaurent et al., 2012 and used by Poinsard et al., 2018. 132 133 The ICA (a) was the angle formed by the base of the iris in the region of the CC entry and the 134 inner corneoscleral junction. The length of the CC noted (d) corresponded to the distance 135 between the pectinate ligament (or the most anterior visible portion of the uveal trabecular 136 meshwork) and the anterior part of the ciliary body. The width of the CC entry, marked (b) was 137 the distance between the corneoscleral limbus and the iris root. The width of the mid-CC (c) 138 was the distance between the inner sclera and the ciliary process in the central portion of the 139 CC. The anterior chamber depth (e) was determined as the distance between the corneal 140 endothelium in the apical region of the cornea and the anterior pole of the lens. The thickness 141 of the cornea at the limbus (f) was the measure between the epithelium of the cornea and the 142 endothelium in its most peripheral transparent part. The distance between the anterior capsule 143 of the lens and the Schwalbe's line (g) was described by Kawata and Hasegawa., 2013. The area of the ciliary cleft (h) was calculated by the area formula (CC) = (d / 2 x (b + c) / 2) +144 145 ((cxd) / 4). All these measurements were performed by the UBM software caliper.

146 5. <u>Statistical evaluation</u>

147 For this study, 45 cats were divided into 3 homogeneous groups (weight, racial type, sex, age) 148 of 15 individuals. Sample size n = 15 was determined using Student's t-test. Only five breeds 149 of cats with a majority of European cats was represented in the three groups, the distribution 150 was made in such a way as to obtain ages between 1 year and 10 years, an average weight of 151 4.1 kg and a male / female ratio close to 50% (Table I). Each animal was submitted to only one 152 experiment (one type of eye drops) and two general anesthesia 7 days apart. The 1440 data 153 obtained, including measurements of IOP and anterior segment biometry on the left (untreated) 154 and right (treated) eyes, on D0 and D7 were integrated into a statistical model, in which the 155 experimental unit was a cat, and the variable factor was the type of eyedrops instilled for 7 days. 156 The objective of the statistical study was to determine the effects of these three molecules on 157 anterior segment biometry and IOP. For this, two statistical methods were used: the non-158 parametric Wilcoxon test to evaluate the significant or non-significant differences between two 159 independent groups and a one-way analysis of variance (ANOVA) to compare the sample 160 means. The level of significance was set at p < .05 for all statistical analyses.

161

162 Results

163

164 The IOP and biometric measurements of the anterior segment of the untreated eye (left eye) did 165 not significantly differ between D0 and D7. And no significant difference in the biometric data 166 of the anterior segment was found on day 0 between the untreated eye and the treated eye. After 167 one week of instillation of dorzolamide 2%, the IOP of the treated eye was significantly 1mmHg 168 lower (Figure 3). This decrease was relatively moderate (5.3%). After one week of instillation 169 of latanosprost or timolol, the IOP of the treated eye did not significantly decrease (Figure 3). 170 About biometric data, ICA values (a), the width of the entrance of the CC (b), the width of the 171 mid-CC (c), the length of the CC (d), the anterior chamber depth (e), the distance between the

172 anterior capsule of the lens and the Schwalbe's line (g) and the area of the ciliary cleft (h) were 173 not significantly altered after 7 days of instillation whatever the eye drops. Only a significant 174 decrease of 1.4% in corneal thickness (f) was observed with the instillation of dorzolamide 175 (Figure 4), whereas there was a significant increase of 1.6% in thickness of the cornea (f) with 176 the instillation of timolol (Figure 4).

177

178 Discussion

179

In this study, the parameters measured on the untreated eye (IOP and biometric data) did not 180 181 vary between D0 and D7. It was therefore admitted that eye drops instilled on the treated eye 182 (OD) for 7 days had no significant effect on the parameters measured on the untreated eye (OS) 183 and this despite a possible systemic diffusion of eye drops. In addition, the absence of a 184 significant difference in the data measured between the treated (OD) and untreated (OS) eye on 185 D0 allowed to validate the use of the untreated eye (OS) as a control at D0 and D7. The study 186 could also have been performed by comparing the data of the treated eye (OD) to D0 and D7. 187 Both analyses were performed with the same statistical tests and we observed the same 188 variations.

189 In contrast with healthy dogs for which these three types of hypotensive agents cause a 190 significant decrease in IOP [Poinsard et al., 2018], only instillation of dorzolamide at 2% twice 191 daily for 7 days resulted in a moderate but significant decrease in IOP in healthy cats in this 192 study. This result is similar to previous studies evaluating the effects of 2% dorzolamide 193 instilled in the eyes of healthy cats [Rainbow and Dziezyc, 2003], [Dietrich et al., 2007] and 194 [Rankin et al., 2012]. This moderate decrease in IOP of 1 mmHg (5.5%) is close to the decrease 195 (1.6 mmHg) in the Dietrich study (2007) when 2% dorzolamide is instilled twice daily. 196 Increasing the frequency of instillation of dorzolamide 2% to 3 times daily does not appear to

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197 significantly increase the hypotensive effect of dorzolamide in healthy cats [Dietrich et al., 198 2007]. This modest effect of topical carbonic anhydrase inhibitors on the feline eye is also 199 viewed in an earlier study of 20 healthy cats, where IOP did not significantly decrease after 200 instillation of 1% brinzolamide for 7 days, twice a day [Gray and al., 2003]. This moderate 201 response in healthy cats does not question the interest of dorzolamide in the medical 202 management of glaucoma in cats, since the Sigle study in 2011 [Sigle and al., 2011] reveals an 203 interesting decrease in IOP of 7 cats with primary congenital glaucoma with dorzolamide 204 instilled 3 times a day.

The instillation twice daily of timolol for 7 days on the eyes of healthy cats did not lead to a significant reduction in IOP between day 0 and day 7 in this study. This result is similar to that obtained in the Kiland study [Kiland and al., 2016] and contrary to the older studies of Wilkie and Latimer in 1991 and Colasanti and Trotter in 1981. In the Dietrich study (2007), concomitant administration of dorzolamide and timolol did not have a more intense hypotensive effect than dorzolamide alone.

Finally, instillation of latanoprost once daily for 7 days in healthy cats' eyes did not decrease the IOP between day 0 and day 7 in this study, which is consistent with previous studies on the effects of latanoprost on the IOP of healthy cats [Mc Donald and al., 2016], [Studer and al., 2000]. This lack of efficacy of PGF2 alpha receptor analogs is attributed to species differences in prostaglandin receptors in the ciliary bodies of the cat's eye that express EP and DP receptors rather than FP receptors, found in particular in humans [Regnier and al., 2006].

The absence of significant modification of the anterior segment biometry in this study during
instillation of timolol and latanoprost in healthy cats confirms the lack of response of these
molecules to IOP after 7 days of treatment.

Regarding dorzolamide 2%, the absence of significant modification on the biometry of the anterior segment confirms that dorzolamide acts on the IOP by lowering the production of HA without interacting on the outflow pathway of HA. The lack of effect on AIC biometrics of these three molecules in healthy cats is similar to the results obtained in healthy dogs using the same protocol and the same operator [Poinsard and al., 2018]. A decrease of 1.4% in the thickness of the peripheral cornea in cats treated with dorzolamide was found, this decrease similar to treated dogs [Poinsard and al., 2018] can be related to a transient dehydration of the cornea. Conversely, a 1.6% increase in the thickness of the peripheral cornea in cats treated with timolol was noted: this can be related to a transient edema of the cornea.

229 Differences in IOP results with some studies during instillation of timolol may be related to the 230 type of tonometer used. Nevertheless, Tonovet® provides accurate and reproducible IOP 231 measurements in cats [McLellan and al., 2013]. Although all the qualitative measurements on 232 the anterior chamber angle and sclerociliary cleft are perfectly described by Dulaurent et al., 233 2012, the precision of the UBM measurements remains a variable dependent on the experience 234 of the operator. It is important to remember that the comparison of the data between healthy 235 dogs and healthy cats is reinforced by the fact that these two studies were carried out by the 236 same operator and under the same conditions.

This study has the same limitations as the study by Poinsard et al., 2018, limitations related to the recruitment mode (private structure) causing a double selection bias, especially for breeds that may have specificities, and the number of cats presented. Even if these three molecules showed little or no influence on IOP and anterior segment biometry in healthy cats, it would be interesting to carry out the same study in a context of glaucomatous cats.

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243 Conclusion

This prospective study revealed a significant decrease in IOP in healthy cats treated with dorzolamide at 2% BID for 7 days. Timolol 1% BID and latanoprost SID have no effect on IOP after 7 days of treatment in healthy cats. Finally, dorzolamide 2%, timolol 0.5% and latanoprost

| 247 | 0.005% have | no effect on t | he biometry | of AIC in | healthy cat | s with the | protocol 1 | used and | the |
|-----|-------------|----------------|-------------|-----------|-------------|------------|------------|----------|-----|
|-----|-------------|----------------|-------------|-----------|-------------|------------|------------|----------|-----|

252 Acknowledgments:

- 253 The authors are grateful to Dr. Isabelle Raymond for the iconography and to Pr Thierry
- 254 Bastogne for the statistical analysis.

256 Conflict of interest:

- $257 \qquad \text{The Author(s) declare(s) that there is no conflict of interest.}$

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326 Iconography

Figure 1: Utrasound biomicroscopy (UBM) of the iridocorneal angle and ciliary cleft in a
 normal cat.

Figure 2: Histological aspect of the anterior segment of a dog's eye showing the main biometric
 parameters studied in cats.

- 334 <u>Table I</u>: Summary of race, age, gender and weight data for cats in the cohort.
- Figure 3: Box chart of IOP variations after one week of anti-glaucoma therapy on the treated
 eye (DOR: dorzolamide 2%, TI: timolol 0.5%, LAN: latanoprost 0.005%).
- Figure 4: Box chart of corneal thickness variations (f) after one week of anti-glaucoma
 treatment on the treated eye.

Table II: Mean value of the IOP (mmHg) after one week of anti-glaucoma treatment on the
 treated eye.

Table III: Mean value of the corneal thickness (f) (mm) after one week of anti-glaucoma treatment on the treated eye.
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Table IV: Mean value of the width of the entrance of the ciliary cleft (b) (mm) after one week
 of anti-glaucoma treatment on the treated eye.

Table I: Summary of race, age, gender, and weight data for cats in the cohort

| Group 1 | | | | Group 2 | | | | Group 3 | | | |
|----------|-----|--------|--------|----------|-----|--------|--------|----------|-----|--------|--------|
| Breed | Age | Gender | Weight | Breed | Age | Gender | Weight | Breed | Age | Gender | Weight |
| European | 5 | Mn | 4 | European | 8 | Fn | 5 | European | 1 | Mn | 4 |
| European | 2 | Fn | 4 | European | 1 | Mn | 3 | European | 1 | Fn | 3 |
| European | 8 | Mn | 5 | European | 1 | Mn | 3 | Persian | 1 | М | 4 |
| European | 1 | Fn | 4 | European | 6 | Fn | 5 | European | 7 | Mn | 5 |
| European | 1 | Fn | 6 | European | 1 | Mn | 3 | European | 6 | Fn | 6 |
| Persian | 2 | Mn | 3 | European | 8 | Mn | 6 | European | 9 | Fn | 5 |

| European | 1 | F | 3 | Oriental | 1 | Mn | 3 | European | 4 | Mn | 6 |
|----------|----|----|---|----------|----|----|---|----------|---|----|---|
| European | 4 | Mn | 4 | European | 2 | Fn | 4 | European | 4 | Mn | 4 |
| European | 6 | Mn | 4 | European | 6 | Fn | 5 | European | 6 | Fn | 4 |
| European | 1 | Mn | 6 | European | 10 | Mn | 5 | European | 1 | Mn | 3 |
| European | 8 | Fn | 3 | European | 8 | Fn | 3 | European | 4 | Fn | 4 |
| European | 9 | Mn | 6 | European | 3 | Mn | 4 | European | 2 | Mn | 3 |
| European | 6 | Fn | 3 | European | 3 | Fn | 4 | European | 8 | Mn | 5 |
| Somali | 4 | F | 2 | Abyssin | 2 | Fn | 3 | European | 4 | Mn | 4 |
| European | 10 | Fn | 5 | European | 1 | Fn | 3 | Somali | 1 | Fn | 3 |

$\underline{\text{Table II:}}$ Mean value of the IOP (mmHg) after one week of anti-glaucoma treatment on the treated eye. 366 367

| | Dorzolamide 2% | Timolol 0,5% | Latanoprost 0,005% |
|--------------------|----------------|--------------|--------------------|
| PIO Mean D0 (mmHg) | 17,6 | 16,8 | 18,3 |
| IO Mean D7 (mmHg) | 16,6 | 17 | 18,6 |
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391 <u>Table III</u>: Mean value of the corneal thickness (f) (mm) after one week of anti-glaucoma
 392 treatment on the treated eye.
 393

| | Dorzolamide 2% | Timolol 0,5% | Latanoprost 0,005% |
|------------------|----------------|--------------|--------------------|
| (f) Mean D0 (mm) | 0,64 | 0,63 | 0,64 |
| (f) Mean D7 (mm) | 0,63 | 0,64 | 0,64 |
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418 <u>Table IV</u>: Mean value of the width of the entrance of the ciliary cleft (b) (mm) after one week
419 of anti-glaucoma treatment on the treated eye.
420

| | Dorzolamide 2% | Timolol 0,5% | Latanoprost 0,005% | |
|------------------|----------------|--------------|--------------------|--|
| (b) Mean D0 (mm) | 0,82 | 0,80 | 0,85 | |
| (b) Mean D7 (mm) | 0,84 | 0,8 | 0,86 | |