INTRODUCTION:
- Retinopathy of Prematurity (ROP) is a leading cause of childhood blindness.
- Infants with ROP receive intense surveillance of their ROP status while they are in the Neonatal Intensive Care Unit (NICU).
- There is a paucity of research regarding the outcomes and treatment of infants with unresolved ROP following discharge from the NICU.

PURPOSE:
- The purpose of our study was to focus on infants who were classified as having unresolved type 2 or low-grade ROP at discharge and determine the number of those infants who required ROP treatment following discharge.

METHODS:
- This descriptive study was conducted at an academic eye center.
- Using an ROP registry (2006-2020), we identified infants with:
  - Type 2 ROP (defined as ROP without plus disease that is stage 1-2 in zone 1, or stage 3 in zone 2)
  - Low-grade ROP (defined as ROP not qualifying as type 1 or type 2 ROP)
- We examined the infants’ medical record following discharge to determine the clinical follow-up and to specifically identify the number of infants who required ROP treatment after discharge.

RESULTS:
- The total number of infants screened for ROP during the study period was 2,258 (Figure 1).
- We found 547 infants had type 2 ROP or low-grade ROP before discharge from the NICU.
  - 114 of the 547 infants (21%) had type 2 ROP, and 433 of the 547 infants (79%) had low-grade ROP.

RESULTS CONT:
- 337 infants of the 547 (61.6%) were followed through resolution of ROP as an outpatient at our institution.
- Three (0.9%) of these infants required ROP treatment after discharge.
- Details of these infants provided in Table 1.

LIMITATIONS:
- From our retrospective chart review, the follow-up details through resolution were not available on a subset of the cohort (follow-up by physicians outside of our institution).

CONCLUSIONS:
- Among infants with type 2 and low-grade ROP, we found less than 1% required laser treatment after discharge from the hospital.
- The majority of infants received all outpatient ROP care through resolution at our institution.
- While the percentage of infants who required laser was encouragingly low, adequate follow-up remains essential to prevent negative outcomes.

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