

Clinical Trial Protocol

Iranian Registry of Clinical Trials

11 Sep 2026

: Combined anti-VEGF and low-dose triamcinolone intravitreal injections versus anti-VEGF alone for treatment of macular edema due to central retinal vein occlusion: A Randomized clinical trial

Protocol summary

Study aim

Comparison of combined anti-VEGF and low-dose triamcinolone intravitreal injections versus anti-VEGF alone for treatment of macular edema due to central retinal vein occlusion

Design

A clinical trial of two groups of patients with macular edema due to CRVO with parallel double-blind groups will be performed on 64 randomized eyes by simple method.

Settings and conduct

The study was conducted at the Institute of Ophthalmology in Shiraz to compare the injection of intravitreal bevacizumab alone and bevacizumab with triamcinolone in two groups of patients with macular edema due to CRVO.

Participants/Inclusion and exclusion criteria

inclusion criteria: Participants Patients with center-involved macular edema due to CRVO, baseline BCVA between 20/400 and 20/40, and a CSFT of more than 320 microns on Heidelberg Spectralis SD-OCT machine. Eyes with previous treatment were allowed to be enrolled if they had intravitreal anti-VEGF or corticosteroids for at least two and four months before The exclusion criteria comprised monocular patients, presence of any ocular neovascularization or ONH shunts, pathologic myopia, glaucoma, any significant media opacity or concomitant retinal disorder (such as aging macular degeneration, diabetic retinopathy, vitreomacular traction, epiretinal membrane, etc.), previous intraocular surgery (other than uneventful cataract surgery), and noncompliance with any of the therapeutic or diagnostic interventions

Intervention groups

Two treatments are compared to bevacizumab alone and bevacizumab plus triamcinolone for the treatment of macular edema due to CRVO. Group 1 will receive Intravitreal bevacizumab and Group 2 will receive Intravitreal bevacizumab and Triamcinolone injections.

Main outcome variables

best corrected visual acuity, Intraocular pressure, Cataract formation, central subfield foveal thickness

General information

Reason for update

Acronym

IRCT registration information

IRCT registration number: **IRCT20201120049450N7**

Registration date: **2026-07-13, 1405/04/22**

Registration timing: **retrospective**

Last update: **2026-07-13, 1405/04/22**

Update count: **0**

Registration date

2026-07-13, 1405/04/22

Registrant information

Name

Ehsan Namvar

Name of organization / entity

Country

Iran (Islamic Republic of)

Phone

+98 71 3627 4088

Email address

namvar_e@sums.ac.ir

Recruitment status

Recruitment complete

Funding source

Expected recruitment start date

2026-04-05, 1405/01/16

Expected recruitment end date

2026-07-06, 1405/04/15

Actual recruitment start date

empty

Actual recruitment end date

empty

Trial completion date

empty

Scientific title

: Combined anti-VEGF and low-dose triamcinolone intravitreal injections versus anti-VEGF alone for treatment of macular edema due to central retinal vein occlusion: A Randomized clinical trial

Public title

: Combined anti-VEGF and low-dose triamcinolone intravitreal injections versus anti-VEGF alone for treatment of macular edema due to central retinal vein occlusion

Purpose

Treatment

Inclusion/Exclusion criteria**Inclusion criteria:**

Participants Patients with center-involved macular edema due to CRVO baseline BCVA between 20/400 and 20/40 CSFT of more than 320 microns on Heidelberg Spectralis SD-OCT machine previous treatment were allowed to be enrolled if they had intravitreal anti-VEGF or corticosteroids for at least two and four months before

Exclusion criteria:

comprised monocular patients presence of any ocular neovascularization or ONH shunts pathologic myopia glaucoma any significant media opacity concomitant retinal disorder (such as aging macular degeneration, diabetic retinopathy, vitreomacular traction, epiretinal membrane, etc.) previous intraocular surgery (other than uneventful cataract surgery) noncompliance with any of the therapeutic or diagnostic interventions

Age

From 18 years old

Gender

Both

Phase

2-3

Groups that have been masked

- Participant
- Care provider
- Investigator
- Outcome assessor
- Data analyser

Sample size

Target sample size: 64

Randomization (investigator's opinion)

Randomized

Randomization description

"Patients who meet all eligibility and registration criteria will be randomized to the treatment groups using simple randomization based on a table of random numbers, with an allocation ratio of 1:1. Randomization will be performed only after a participant has been confirmed as eligible and enrolled in the study. To minimize selection and allocation bias, the randomization sequence will be implemented by an assistant who is not involved in patient recruitment, clinical management, treatment

administration, or outcome assessment. The treating investigators will not participate in the allocation process. This procedure is intended to ensure that group assignment remains unbiased and independent of clinical decision-making."

Blinding (investigator's opinion)

Double blinded

Blinding description

"This study will employ a double-blind design. Blinding will extend to all individuals involved in the trial to minimize potential biases that could arise from knowledge of treatment allocation. Specifically: Participants: Will be unaware of which treatment arm they have been assigned to. The Principal Investigator: Will be blinded to the treatment assignments throughout the study duration. Healthcare Providers: All healthcare professionals directly involved in the care of participants during the trial, including those administering treatments or managing participant well-being, will be blinded. Data Collectors: Individuals responsible for collecting data at any point during the trial will be unaware of the participants' treatment allocation. Outcome Assessors: Personnel responsible for assessing participant outcomes, both before and after the intervention period, will be blinded to treatment assignments."

Placebo

Not used

Assignment

Parallel

Other design features**Secondary Ids**

empty

Ethics committees**1****Ethics committee****Name of ethics committee**

ethics committee at Shiraz university of Medical Sciences

Street address

Khalili street

City

Shiraz

Province

Fars

Postal code

7193616641

Approval date

2025-12-10, 1404/09/19

Ethics committee reference number

IR.SUMS.REC.1404.484

Health conditions studied**1****Description of health condition studied**

retinal disorders

ICD-10 code

H35

ICD-10 code description

Other retinal disorders

Primary outcomes**1****Description**

BCVA (best corrected visual acuity)

Timepoint

one month after injection

Method of measurement

According to refractive errors acuted by auto spectacle with correcting lenses examined to achieve best corrected vision by snellen chart

2**Description**

IOP(Intraocular pressure)

Timepoint

one day and one month after injection

Method of measurement

Tonometry is the method of measurement which is performed by many different method in our study it is constructed by airpuff

3**Description**

Cataract formation

Timepoint

one month after injection

Method of measurement

LOCS II grading system

4**Description**

CSFT(central subfield foveal thickness)

Timepoint

one month after injection

Method of measurement

Macular optical coherence tomography macular volume demographic thickness map

Secondary outcomes

empty

Intervention groups**1****Description**

Intervention group: intravitreal injection of combined bevacizumab and triamcinolone. Participants in this group will receive intravitreal injections of both an anti-vascular endothelial growth factor (anti-VEGF) agent and a low-dose corticosteroid (Triamcinolone Acetonide).

Category

Treatment - Surgery

2**Description**

Control group: intravitreal injection of bevacizumab. Participants in this group will receive intravitreal injections of an anti-VEGF agent alone.

Category

Treatment - Surgery

Recruitment centers**1****Recruitment center****Name of recruitment center**

shiraz university of medical science

Full name of responsible person

Ehsan Namvar

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khalili hospital, khalili street, shiraz, fars, iran

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Fax**Email**

namvar_e@sums.ac.ir

Web page address**Sponsors / Funding sources****1****Sponsor****Name of organization / entity**

Shiraz University of Medical Sciences

Full name of responsible person

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Grant name**Grant code / Reference number****Is the source of funding the same sponsor organization/entity?**

Yes

Title of funding source

Shiraz University of Medical Sciences

Proportion provided by this source

100

Public or private sector

Public

Domestic or foreign origin

Domestic

Category of foreign source of funding

empty

Country of origin

Type of organization providing the funding

Academic

Person responsible for general inquiries

Contact

Name of organization / entity

Shiraz University of Medical Sciences

Full name of responsible person

Ehsan Namvar

Position

assistant professor

Latest degree

Subspecialist

Other areas of specialty/work

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Web page address

Sharing plan

Deidentified Individual Participant Data Set (IPD)

Yes - There is a plan to make this available

Study Protocol

No - There is not a plan to make this available

Statistical Analysis Plan

No - There is not a plan to make this available

Informed Consent Form

No - There is not a plan to make this available

Clinical Study Report

No - There is not a plan to make this available

Analytic Code

No - There is not a plan to make this available

Data Dictionary

No - There is not a plan to make this available

Title and more details about the data/document

: Combined anti-VEGF and low-dose triamcinolone intravitreal injections versus anti-VEGF alone for treatment of macular edema due to central retinal vein occlusion: A Randomized clinical trial

When the data will become available and for how long

6 months after publication

To whom data/document is available

people working in academic institutions

Under which criteria data/document could be used

references or meta-analysis

From where data/document is obtainable

namvar.e@gmail.com

What processes are involved for a request to access

data/document

email to responsible person

Comments