# A Data-Driven Natural Language Processing Platform for Clinician-Led Exploration of Retinal Fluid Dynamics in Neovascular AMD

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# Background:

# Automated OCT algorithms

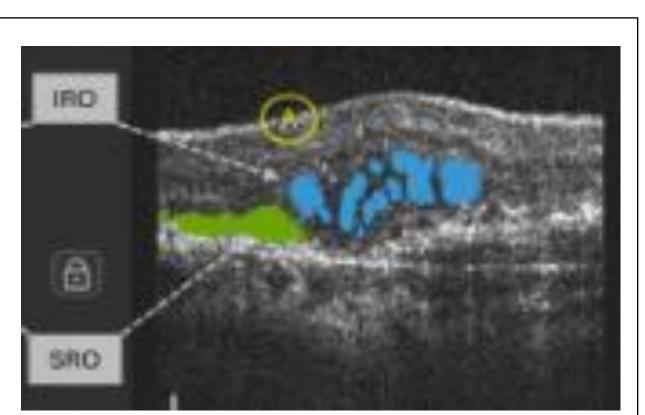
are becoming widely available and provide accurate longitudinal information on retinal fluid dynamics

# Real-World nAMD Data Complexity

- Large and diverse data sources, incl. demographics, visual acuity, volumetric retinal fluid OCT parameters, treatments (injection dates, intervals, types)
- Highly variable baseline characteristics and treatment responses
- Longitudinal data with significant heterogeneity
- Inconsistent follow—up time points

#### Figure 1:

Example of OCT scan with automatically detected intra- and subretinal fluid (blue and green, respectively).



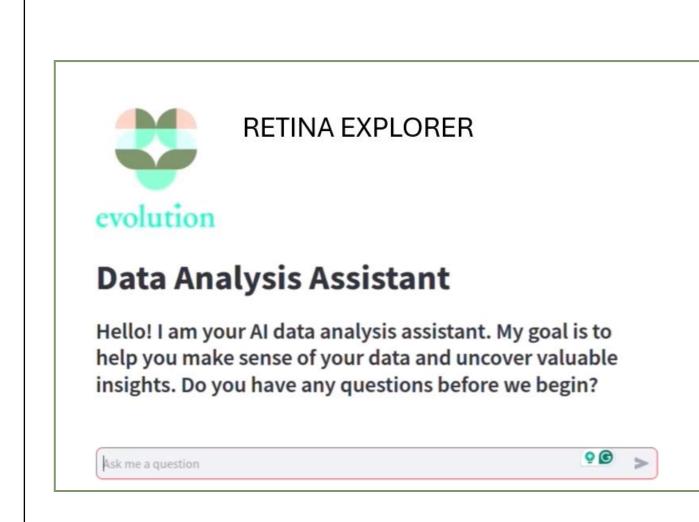
## **Purpose:**

To develop an AI-powered, clinician-friendly interface for real-time nAMD data exploration: An intuitive, NLP-driven system that enables clinicians to explore and analyze large-scale real-world nAMD datasets using simple queries—no coding experience required

# **Methods:**

Developed based on TLVMC real-world nAMD dataset

- •710 eyes of 548 nvAMD patients
- •7,262 VA exams
- •5,675 OCT voume scans (analyzed with NOA)
- •11,260 anti-VEGF injections



#### Figure 2:

Web-based secured interface of the "RETINA EXPLORER" platform, allowing queries as clinician-friendly natural language search

#### **Categorization - Clinician Expertise**

- Fluid volume categories based on fluid amounts as SRF/IRF/ PED/ 1/3/6mm
- Responder classification by fluid response and fluctuations
- Visual acuity categories and longitudinal change
- Treatment intensity categories (drug type, injection intervals)

# **AI-Enhanced Natural Language Querying**

- OpenAI language model to accurately interpret nAMD-specific queries
- •Enable clinician-friendly natural language search

#### **Web-Based Interface**

- •Built with Streamlit for an interactive, user-friendly experience
- Accessible intuitive navigation, without coding
- •Supports visualized treatment patterns, aims data-driven decision-making

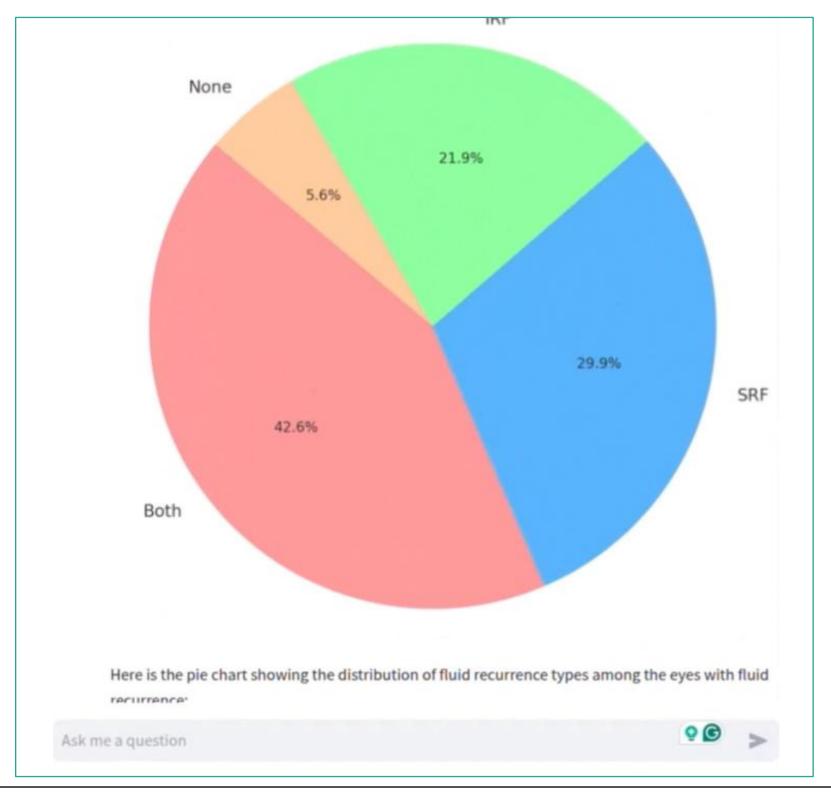


Figure 3:

Example of output as visuals, displayed as a pie graph showing fluid distribution in a patient subgroup.

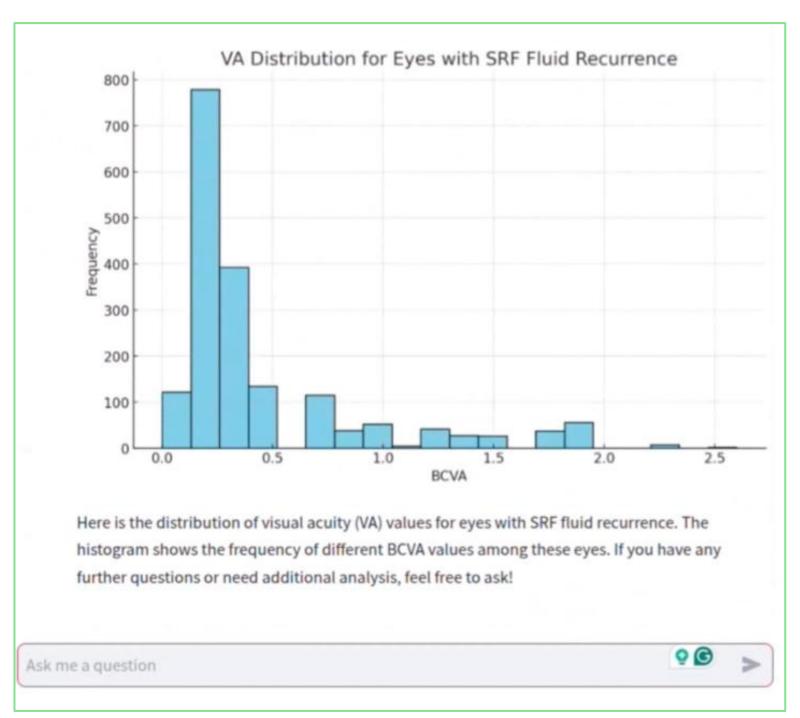


Figure 4:

Example of results,

displayed as a

histogram showing

visual acuity

distribution in a

subgroup of patients

with SRF recurrence in

the first treatment year.

#### **Conclusions:**

We developed a natural language processing platform enabling real-time exploration of complex nAMD datasets without coding. The platform facilitates independent data analysis by retina specialists, enhancing clinical decision-making based on real-world evidence. The method is based on structured Data Categorization, and incorporates clinician-defined fluid volume dynamics, treatment response patterns, and longitudinal visual acuity changes.

Future Directions: We aim to implement decision tree models to identify meaningful patient subgroups and optimize personalized treatment strategies through advanced AI-driven pattern recognition.