**DISCUSSION**

**RESULTS / OCT, en Face OCT :**
- lesion evaluation: overview, overall, front view (angiography)
  - SD study: retinal structure, layers, lesions, in all axis, above and below
  - structural study of retina tissue, layers, lesions morphologic study of retina tissue, layers, lesions
  - comparison of the tissues, layers, per se and in between
  - thickness evaluation, comparison of the layers, per se and in between,
  - to all retina (keeping in mind morphology, thickness functional correlation is not complete)
- lesions characteristics: morphology, constitution, size, topography

**RESULTS / Cuticular DRUSEN :**
- small punctate, white, homogenous, quite similar in all cross-section
  - under Pigment Epithelium layer
  - equal basal laminar deposit aspect

**RESULTS / SOFT DRUSEN :**
- more irregular IS/OS facing and outer nuclear, plexiform layer too
  - more pigment mounts and abnormalities above
  - more accurately B category

**RESULTS / OCT , en Face OCT :**
  - Lipid metabolic approach: mostly A category
  - dark, homogenous, optical empty, Lipid kind (Soft drusen)
  - white, heterogeneous, mixed, Cellular debris kind

**RESULTS / DRUSENOID PED :**
- convergence of soft drusen, roughly less even fatty
  - abnormal Pigment epithelium above, but layer quite preserved
  - dense, white, heterogeneous PED, below Pigment epithelium granular, as Basal Laminar Deposit
  - different in all cross-section
  - abnormal Pigment epithelium above, heavily unstructured layer interrupted, cells disappeared, irregular IS/OS facing

**RESULTS / PSEUDO-VITELLIFORM AMD :**
- like Drusenoid PED
  - more accurately B category
  - more pigment mounts and abnormalities above
  - more irregular IS/OS facing and outer nuclear, plexiform layer too

**RESULTS / SUBRETINAL DEPOSITS :**
- white, homogenous, quite similar in all cross-section
  - just above, nearby upper side Pigment Epithelium layer
  - similar cuticular drusen
  - equal basal laminar deposit aspect, less dense, more regular

**COMMENTS / RESULTS :**
- OCT, En Face OCT allow us to better analyse drusen and drusenoid material:
  - drusenoid material is very polyhomogenous
  - anyway 3 sorts seems arise:
    - dark, homogenous, optical empty, Lipid kind (Soft drusen)
    - white, heterogeneous, mixed, Cellular debris kind
  - 2 metabolic disorders ways seem appear:
    - Lipid metabolic approach
    - Cellular metabolic approach: oxidative stress (mitochondria, etc.), ROS...
      - inflammation (complement, alternative complement pathway...)
  - 2 different AMD complications:
    - Lipid metabolic approach with mostly ATROPHIC complication and evolution
    - Cellular metabolic approach with NEOVASCULAR complication even if Atrophy is also seen in those cases
      - Anyway: Neovascularity / Atrophy = different Process !!

**CONCLUSION**

OCT en Face contribute to and improve study and knowledge of AMD Drusenoid deposits.