

UVEITIS

Uveitis is **inflammation** of the eye's uvea. The uvea is the eye's middle layer that consists of the iris, ciliary body and choroid.

Uveitis is often classified by which part of the uvea it affects. Anterior uveitis (IRITIS) refers to inflammation of the iris alone or the iris and ciliary body; anterior uveitis is the most common form. Intermediate uveitis refers to inflammation of the ciliary body. Posterior uveitis is inflammation of the choroid. Diffuse uveitis is inflammation in all areas of the uvea.

Many cases of uveitis are chronic, and they can produce numerous possible complications, including cataracts, lowered or raised intraocular pressure, glaucoma, retinal problems (such as neovascularization or retinal detachment), cystoid macular edema and band keratopathy. These complications can result in vision loss.

Symptoms and Signs

With anterior uveitis, your symptoms will likely affect only one eye. You will feel mild to strong pain and will have redness and light sensitivity. Your vision may also be blurred.

Uveitis complications: cataracts, glaucoma, high intraocular pressure, retinal detachment

Both intermediate and posterior uveitis are usually painless. Symptoms are blurred vision and floaters, typically in both eyes. Most people who develop intermediate uveitis are in their teens, 20s or 30s.

Diffuse uveitis has a combination of symptoms of all types of uveitis.

What Causes Uveitis?

Uveitis has dozens of causes, including viral, fungal, and bacterial infections, but in many cases, the cause is unknown (idiopathic). Ophthalmologists can sometimes identify the cause if there has been trauma to the eye, such as from surgery or a blow, or if you have an infectious or immunological systemic disorder.

Uveitis Treatment

Your doctor will likely prescribe a steroid to reduce the inflammation in your eye. Whether the steroid is in eyedrop, pill or injection form depends on the type of uveitis you have. Because anterior uveitis affects the front of the eye, it's easy to treat with eyedrops. Intermediate uveitis can go either way, and posterior uveitis usually requires tablets or injections.

Steroids and other immunosuppressants can produce many serious side effects, such as kidney damage, higher blood sugar, higher blood pressure, osteoporosis, and glaucoma. This is especially true of steroids in pill form because the dose must be relatively high in order for enough of the drug to find its way to the back of the eye. So it is important to follow your doctor's dosage instructions carefully and to keep visiting him or her regularly to monitor the progress.

If you have anterior uveitis, your doctor will likely prescribe, in addition to the steroids, pupil-dilating eyedrops to reduce pain. You may also need eyedrops to lower your intraocular pressure if it's elevated.

If you have a known systemic condition, your doctor or doctors will treat that as well.