

UVEITIS

UNDERSTAND MORE ABOUT UVEITIS



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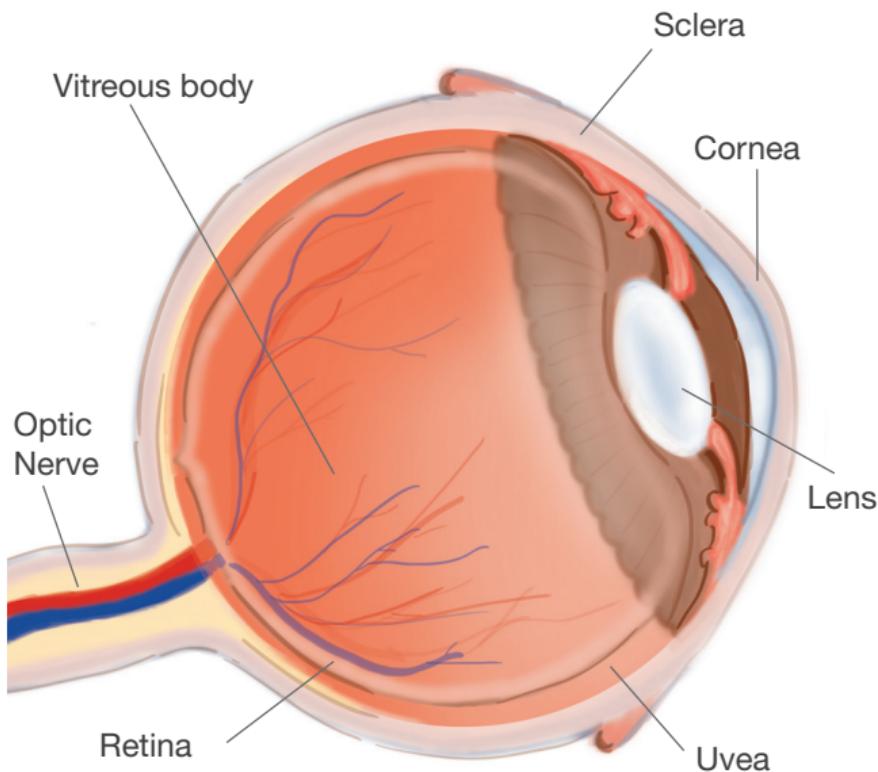
Singapore National
Eye Centre

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Uveitis

What is uveitis?

Uveitis is inflammation of the uvea, the middle layer of your eye. The eye is shaped much like a tennis ball, with three different layers of tissue surrounding a central gel-filled cavity known as the vitreous. The innermost layer is the retina, which senses light and sends images to your brain. The outermost layer is the sclera, the strong white wall of the eye. The middle layer between the sclera and retina is called the uvea.



The uvea contains many blood vessels - the veins, arteries and capillaries - that carry blood flow to the eye. Because the uvea nourishes many important parts of the eye (such as the retina), inflammation of the uvea can result in poor vision.

There are different types of uveitis, depending on the part of the eye which is affected:

- When the uvea is inflamed near the front of the eye in the iris, it is called **iritis** or **anterior uveitis**. Iritis usually has a sudden onset and may last six to eight weeks; usually the eye is red and painful.
- If the uvea is inflamed in the middle of the eye, it is called **intermediate uveitis**. Patients frequently experience floaters and poor vision from retinal swelling.
- An inflammation in the back of the eye is called **posterior uveitis**, which includes **retinitis**, **choroiditis** and **vasculitis**, when it affects the retina, choroid layer, or retinal vessels respectively.
- An inflammation that involves the whole eye is called **panuveitis**. If this serious condition is untreated, it may result in poor vision from damage to your eye structure.

What causes uveitis?

Uveitis is caused by a dysfunction in your immune system, when your white blood cells act against a protein in your eye, or an infection within your eye. In some cases, it can be associated with an autoimmune disease in another part of the body, such as your joints or kidneys. You may also have an infection in your body caused by:

- A virus, such as herpes
- A bacteria, such as tuberculosis or syphilis
- A fungus, such as candida
- A parasite, such as toxoplasmosis

Blood tests and x-rays are sometimes needed to find out the cause. In some cases, the cause may remain unknown.

What are the symptoms?

The symptoms of uveitis may include:

- Redness of the eye
- Eye pain
- Light sensitivity
- Blurred vision
- Floaters

A case of simple “red eye” may be a serious problem of uveitis. If your eye becomes red or painful, and does not clear up quickly, you should be examined and treated by an ophthalmologist.

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How is uveitis diagnosed?

An eye examination by an ophthalmologist is extremely important when symptoms occur. Inflammation inside the eye can permanently affect sight or even lead to blindness, if it is not treated.

Your ophthalmologist will examine the inside of your eye. Blood tests, x-rays and eye fluid tests are often needed to diagnose the condition.

Since uveitis can be associated with diseases in other parts of the body, your ophthalmologist will need to understand your overall health. You may require further assessment and treatment by other medical specialists.

How is uveitis treated?

Uveitis is a serious eye condition that may damage the eye with scarring. You need to have it treated as soon as possible. Eye drops, especially steroids and pupil dilators, can reduce inflammation and pain. For more severe inflammation, oral medication or injections may be necessary.

Uveitis, if left untreated, may lead to:

- Glaucoma (increased pressure in the eye)
- Cataract (clouding of the eye's natural lens)
- Neovascularisation (growth of new, abnormal blood vessels)

These complications may require further treatment using eye drops, conventional surgery or laser surgery. If you have a “red eye” that does not clear up, make an appointment to see your ophthalmologist.

LOCATION MAP



This patient information leaflet is a general guide to help patients understand specific eye conditions, treatment or tests. The information does not replace the need for individual advice from an ophthalmologist. Please consult with your ophthalmologist about your specific eye condition and/or concerns.

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