

Paediatric information

Uveitis

The medical term is:

Uveitis [yoo-vee-eye-tiss]

But it is often known as:

Iritis

How you see the world

You may have trouble with one or both eyes being sore, painful, and sensitive to light. You may have blurred vision.

How the world sees you

Your eyes might look red and inflamed.

How did I get it?

Uveitis is one of the conditions in which the immune system attacks a part of your own body – called an “autotimmune condition”. The cells of your body’s immune system, which is meant to protect you from germs which cause infection, become activated as if they are fighting off an infection, although there is no infection there! The immune cells then damage part of your own body. In uveitis, the part of your body affected is usually the iris (the

coloured part of the eye around the pupil), and sometimes also the retina at the back of the eye.

How can the doctor tell?

The doctor can tell by looking at your eyes with a slitlamp microscope, checking whether there are any immune cells inside your eye at the front or back of your eye. They can also get a special scan which shows whether there is any swelling in the retina at the back of the eye (OCT, or ocular coherence tomography). OCT is like ultrasound. It uses reflections from within the retina and measures the amount of retinal swelling (macular oedema), which helps decide which treatment is needed. OCT is also used to monitor your retina over time and to show how effective treatment may have been.

If the doctor thinks you may have uveitis, they might arrange blood tests and a chest X-Ray. They might also ask a doctor for children and young people (paediatrician) to see you, to make sure that you are well. Some children and



young people with uveitis have other conditions such as arthritis as well.

Getting it sorted

The first big step is to make sure that there really is no infection or a cause of the eye problem, and that's why blood tests and X-rays can be important. The treatment depends on how bad the uveitis is. If it is mild, the doctor will prescribe eyedrops that reduce the inflammation and stop immune cells getting into the eye. If your eyes are very sensitive to light this is often because the iris muscle which controls your pupil size goes into spasm. Your doctor may prescribe drops that relax the iris and widen (dilate) the pupil.

Sometimes uveitis or the drops used for treatment can cause high pressure in the eye. This can damage the optic nerve, which is called glaucoma. If you have high pressure in the eye, the doctor will prescribe different drops to bring the pressure down.

If the uveitis does not settle on drops alone, the doctor can prescribe medicines that come as tablets or syrups, or even as injections, for example steroids, methotrexate or "biologics" (antibodies that stop your immune cells damaging your eye). These medicines all lower the activity of your immune system. If you are on these treatments you may need some

regular blood tests to check for any medicine side effects.

If the uveitis is severe and continues for a long time, it is possible in a small number of people for the eye to be affected in other ways such as cataract (a cloudy lens of the eye which might require an operation) and problems in the retina at the back of the eye.

Further reading: Ocular Immunology and Uveitis Foundation: <http://www.uveitis.org>

If you also have Juvenile Idiopathic Arthritis, this website may be useful: <http://www.arthritisresearchuk.org>

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Moorfields Direct telephone helpline

Phone: 020 7566 2345

Monday-Friday, 9am-9pm

Saturday, 9am-5pm

Information and advice on eye conditions and treatments from experienced ophthalmic-trained nurses.



Patient advice and liaison service (PALS)

Phone: 020 7566 2324 or 020 7566 2325

Email: pals@moorfields.nhs.uk

Moorfields' PALS team provides confidential advice and support to help you with any concerns you may have about the care we provide, guiding you through the different services available at Moorfields. The PALS team can also advise you on how to make a complaint.

Your right to treatment within 18 weeks

Under the NHS constitution, all patients have the right to begin consultant-led treatment within 18 weeks of being referred by their GP. Moorfields is committed to fulfilling this right, but if you feel that we have failed to do so, please contact our patient advice and liaison service (PALS) who will be able to advise you further (see above). For more information about your rights under the NHS constitution, visit www.nhs.uk/choiceinthenhs.