**What is uveitis?**

Uveitis occurs when the middle layer of the eyeball gets inflamed (red and swollen). This layer, called the uvea, has many blood vessels that nourish the eye. Uveitis can damage vital eye tissue, leading to permanent vision loss.

**Three types of uveitis**

There are 3 types of uveitis. They are based on which part of the uvea is affected.

Swelling of the uvea near the **front** of the eye is called **anterior uveitis**. It starts suddenly and symptoms can last up to 8 weeks. Some forms of anterior uveitis are ongoing, while others go away but keep coming back.

Swelling of the uvea in the **middle** of the eye is called **intermediate uveitis**. Symptoms can last for a few weeks to many years. This form can go through cycles of getting better, then getting worse.

Swelling of the uvea toward the **back** of the eye is called **posterior uveitis**. Symptoms can develop gradually and last for many years.

In severe cases, all layers may be involved.

**What are uveitis symptoms?**

Uveitis can develop suddenly. Symptoms can include:

- having a red eye with or without pain
- being very sensitive to bright light
- having blurry vision
- seeing “floaters” (specks or moving clouds in your vision) all of a sudden

Contact your ophthalmologist right away if you notice any of these symptoms.

**What causes uveitis?**

Doctors do not always know what causes uveitis. You are more likely to get uveitis if you have or have had:

- infections such as shingles virus, herpes simplex virus, syphilis, Lyme disease, and parasites such as toxoplasmosis.
- a systemic inflammatory disease such as inflammatory bowel disease (IBS), rheumatoid arthritis or lupus
- an eye injury

Smoking (cigarettes, cigars or pipes) also increases your risk of getting uveitis.
How is uveitis diagnosed?
Your ophthalmologist will examine the inside of your eye. Since uveitis is often connected with other diseases or conditions, some tests may be needed. They may include a physical exam, blood or skin tests, examination of eye fluids, and imaging tests, such as X-rays. Your ophthalmologist may ask about other diseases or health problems you have had.

How is uveitis treated?
Uveitis needs to be treated right away to prevent lasting problems. Ophthalmologists often treat uveitis with eyedrop medicine that reduces inflammation (corticosteroids). They may also use an eye drop to widen (dilate) the pupil, which helps reduce pain and swelling. Sometimes medicine may need to be given by injection (shots) or taken by mouth. Often times, your ophthalmologist will work with a special kind of doctor called a rheumatologist to help treat you.

Summary
Uveitis is when the middle layer of the eyeball (uvea) gets inflamed. You are more likely to get uveitis if you have had certain diseases, viruses or an eye injury. Symptoms include a red eye, pain and blurry vision. This is a serious condition that must be treated immediately to save vision. Treatment often includes eyedrop medicine to reduce swelling and pain.

If you have any questions about your eyes or your vision, speak with your ophthalmologist. He or she is committed to protecting your sight.

Get more information about uveitis from EyeSmart—provided by the American Academy of Ophthalmology—at aao.org/uveitis-link.