Anterior Uveitis

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. The uvea has three regions. Anterior uveitis affects the front region of the uvea, which is closest to the white of the eye and the iris. Anterior uveitis can damage the blood vessels in the uvea, leading to vision loss. Anterior uveitis is also known as iritis.

What are symptoms of anterior uveitis?
Anterior uveitis can develop suddenly. Symptoms can include:

- having a red eye with or without pain
- being very sensitive to bright light
- having blurry vision

Anterior uveitis usually starts suddenly and symptoms can last up to eight weeks. Some forms of anterior uveitis are ongoing, while others go away but keep coming back. Contact your ophthalmologist right away if you notice any of these symptoms.

What causes anterior uveitis?
Doctors do not always know what causes anterior uveitis. But you are more likely to get it if you have or have had:

- a certain gene in your body (called the HLA-B27 gene)
- taken certain medications
- shingles and other herpes viruses
- a sexually transmitted disease called syphilis
- an infection of the lungs called tuberculosis
- a systemic inflammatory disease such as sarcoidosis, inflammatory bowel disease (IBS), or psoriasis
- an eye injury

Smoking (cigarettes, cigars or pipes) may also increase your risk of getting anterior uveitis. In 50 percent (half) of anterior uveitis cases, no cause is found.
How is anterior uveitis diagnosed?
Your ophthalmologist will examine the inside of your eye. Since anterior 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 anterior uveitis treated?
Anterior uveitis needs to be treated right away to prevent lasting problems. Ophthalmologists often treat it with eye-drop medicine that reduces inflammation (corticosteroids). They may also use an eye drop to widen (dilate) the pupil, which helps reduce pain. Sometimes medicine may need to be given by injection (shots) or taken by mouth.

Anterior uveitis can be caused by autoimmune diseases (when the body's immune system attacks its own tissues). In these cases, medication may be given by mouth that weakens the immune system. This can lessen the symptoms of anterior uveitis.

When anterior uveitis is caused by an infection, an antibiotic may be given to fight the infection.

Often times, your ophthalmologist will work with a special kind of doctor called a rheumatologist to help treat you.

Summary
Anterior uveitis is inflammation of the front layer of the uvea. You are more likely to get anterior 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 eye-drop 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.

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