

Uveitis in Juvenile idiopathic arthritis

What is uveitis?

Uveitis is inflammation that occurs in the eye. Inflammation is normally one of the body's protective responses to infection or injury, but in diseases such as uveitis, uncontrolled inflammation can cause damage. Uveitis is the most common eye problem associated with juvenile idiopathic arthritis (JIA). Uveitis is more common in children who have a positive anti-nuclear antibody (ANA).

What are the symptoms of uveitis?

There are different kinds of uveitis associated with JIA. The most common form of uveitis has no symptoms ('silent uveitis'), which is why regular eye check ups are essential. However your child may complain of blurring of vision, sensitivity to light, and rarely, eye redness or pain. If left untreated, uveitis can result in loss of vision.

What causes uveitis in JIA?

The immune system, which usually fights infections, attacks the inner part of the eye. No one knows why this occurs in JIA patients.

How is uveitis diagnosed?

As there may be no symptoms, all children with JIA need to be regularly assessed by an ophthalmologist (specialist eye doctor). The ophthalmologist will look into the back of your child's eyes with a special microscope called a slit lamp. Some children may be assessed by an optometrist, particularly older children (e.g. over 8 years of age).

How often each child needs to be seen will be decided by their ophthalmologist or optometrist. For children without uveitis they may be seen initially every three months then over time this may extend to less often (e.g. six monthly). Children with active uveitis may need to be seen much more often by an ophthalmologist but your child's doctor will direct this plan.

How is uveitis treated?

If uveitis occurs, the ophthalmologist and rheumatologist will work together to treat your child to prevent permanent eye damage. Treatment may require steroid eye drops. Sometimes other eye drops are required. If the eye drops don't control the uveitis or the uveitis is severe, your child may require other medicines by mouth or injection. These medicines aim to suppress their immune system and may include methotrexate and TNF blockers. Some children who develop complications of severe uveitis may require eye surgery to improve their vision and protect their eyes.

How can I help my child?

Looking after your child's eyes is an important part of managing their JIA, therefore it is important to attend all your child's eye doctor and rheumatology appointments and follow their recommendations. Remember, uveitis may be present even when your child's arthritis is under control.

Living with uveitis.

Most children will have no restrictions on their everyday life from their uveitis. Occasionally vision problems can occur.

What is the outlook for my child?

The presence or absence of uveitis is not related to the severity of your child's arthritis.

If your child has JIA they will require regular eye check ups for a number of years to check for uveitis.

If your child is diagnosed with uveitis, they may require treatment and follow up for many years. Most children's uveitis resolves as they get older and can be well controlled with current treatments.

A small percentage of children may have more severe visual problems, including increased pressure in the eyes, cataracts and damage to the cornea, which can impair vision, but this can, in a majority of patients, be prevented with early diagnosis and treatment.

Where can I find more information?

Useful websites: Useful information sheets:

- www.printo.it/pediatric-rheumatology/information/UK/index.htm

Useful information sheets:

- Refer *Methotrexate* information sheet
- Refer *TNF Blockers* information sheet

Key points:

- Uveitis is inflammation of the inside of the eye
- Uveitis often has no symptoms
- Regular eye check ups are essential
- Treatment of uveitis can minimise the risk of long-term eye problems

CONTACT YOUR LOCAL ARTHRITIS OFFICE
FOR MORE INFORMATION SHEETS ON
ARTHRITIS.

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Helpline 1800 011 041 www.arthritisaustralia.com.au

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