

**PROFILE OF UVEITIS IN A TERTIARY CARE CENTRE IN  
SOUTH INDIA  
(ABSTRACT AND KEYWORDS)**



**DISSERTATION SUBMITTED TOWARDS FULFILLMENT OF  
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## Abstract

### PURPOSE:

To study anatomic, demographic and etiologic profile of patients attending a uvea clinic in a tertiary hospital in South India. To study the characteristics, treatment response and complications of uveitis

### METHODS:

Hospital-based cross-sectional study of 104 uveitis patients conducted over a twelve-month period, from November 2015 to November 2016. The patients were categorized into anatomical and etiological groups. The pattern of inflammation was described.

### RESULTS:

- The age of the patients ranged from 3 to 87 years with mean age was 38.75 years. The age group of 31 – 40 years had the highest prevalence of uveitis. Gender distribution was almost equal. Visual disturbance was the most common symptom at presentation. Systemic illness were associated with uveitis in 43% of patients with non-infectious etiology. The most common location of inflammation was the anterior eye segment. Thirty-six percent of patients had no known identifiable causes. Bilateral eye involvement was found in 75% of non-infectious disease and 55% of idiopathic cases. Vogt-Koyanagi-Harada disease was the most common identifiable cause among non-infectious etiologies and viral uveitis among infections. Toxoplasmosis and tuberculosis were the commonest cause of posterior uveitis. Vogt Koyanagi Harada disease was the commonest cause of panuveitis. Childhood uveitis accounted for 7.6% of all uveitis cases. Commonest cause was Juvenile idiopathic arthritis related uveitis. Viral etiology was the commonest cause of those patients with a high intraocular pressure during the episode of uveitis.

## CONCLUSIONS:

Idiopathic anterior uveitis was the most prevalent diagnosis. Patients with non-infectious and idiopathic uveitis had a higher recurrence rate of inflammatory episodes. Most patients were young and presented with non-infectious etiologies having more bilateral presentations. One-third of the patients in the study had visual impairment. Uveitis may have a strong socioeconomic and quality of life impact because it often affects younger working-age patients.

**KEYWORDS-** Inflammation uveitis, Active uveitis Anterior uveitis, Tubercular uveitis, . Iridocyclitis, Leprosy, Herpes Simplex uveitis, Cytomegalovirus, chorioretinitis, HIV, Toxoplasmosis, Non Infectious Uveitis, Ankylosing Spondylitis, Reactive Arthritis, Vogt-Koyanagi-Harada (VKH) Disease, Sympathetic Ophthalmitis, Sarcoidosis, Behcet disease, Childhood Uveitis, Juvenile idiopathic arthritis

