

Insight ophthalmology

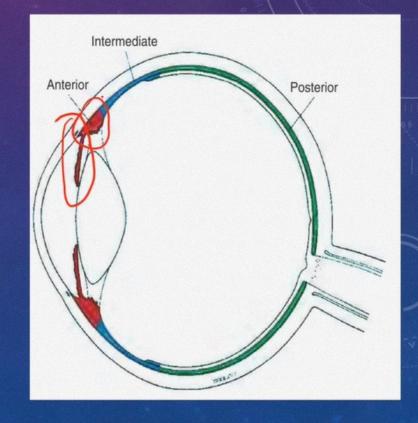
# UVIETIS SERIES

INTRODUCTION AND **CLASSIFICATIONS** 



### WHAT IS UVEA?

- Highly vascular layer that lines the sclera
- Principal function is to provide nutrition to the eye.
- IRIS:-metabolism of the anterior segment, by diffusion of metabolites through the aqueous.
- CILIARY BODY: secretes aqueous which bathes the avascular structures of the anterior segment
- 00:01:02 :- supplies the retina





SYSTEMIC VASCULAR DISEASES

**VASCULARISATION** 

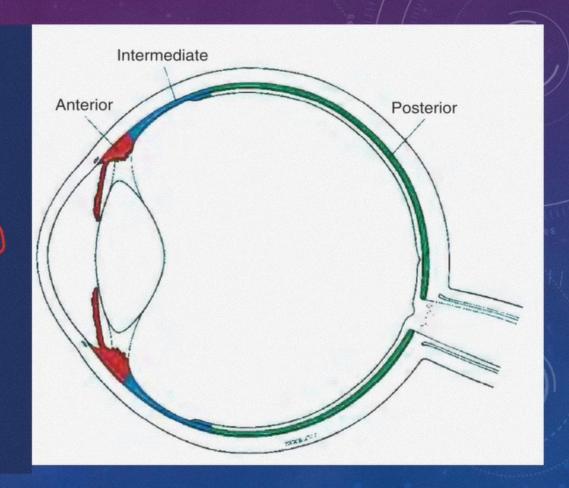
• SYSTEMIC INFECTIONS

SYSTEMIC INFLAMMATIONS

00:00:18



Inflammation of uvea is UVIETIS



00:01:14



### SUN GROUP:-STANDARDISATION OF UVIETIS NOMENCLATURE

- ANTERIOR
- INTERMEDIATE
- POSTERIOR

00:02:28

· PAN UVIETIS

## TABLE 1. The SUN\* Working Group Anatomic Classification of Uveitis

Type	Primary Site of Inflammation <sup>†</sup>	Includes
Anterior uveitis	Anterior chamber	Iritis
		Iridocyclitis
		Anterior cyclitis
Intermediate uveitis	Vitreous	Pars planitis
		Posterior cyclitis
		Hyalitis
Posterior uveitis	Retina or choroid	Focal, multifocal, or
		diffuse choroiditis
		Chorioretinitis
		Retinochoroiditis
		Retinitis
		Neuroretinitis
Panuveitis	Anterior	
	chamber,	
	vitreous, and	
	retina or	
	choroid	
		<b>200</b>

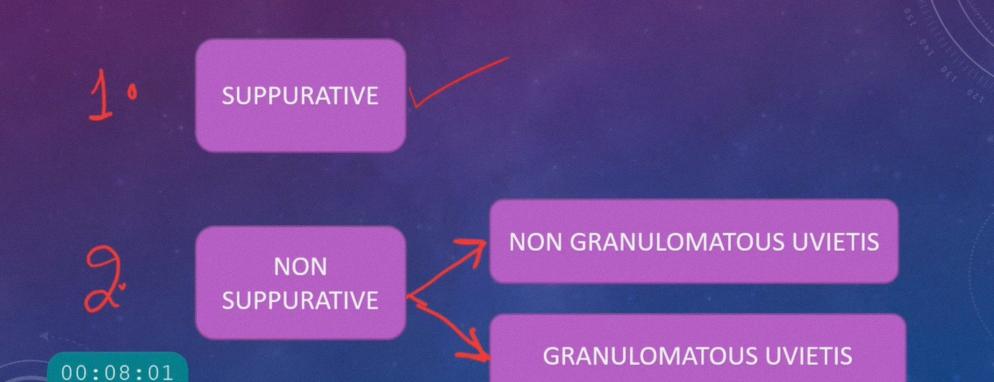
#### TABLE 2. The SUN\* Working Group Descriptors of Uveitis

Category	Descriptor	Comment	
Onset	Sudden /		
	Insidious		
Duration	Limited	≤3 months duration	
	Persistent	>3 months duration	
Course	Acute	Episode characterized by sudden onset	
	and limited duration		
	Recurrent	Repeated episodes separated by	
		periods of inactivity without	
		treatment ≥3 months in duration	
	Chronic	Persistent uveitis with relapse in <3	
00:05:25		months after discontinuing treatment	

<sup>\*</sup>SUN = Standardization of uveitis nomenclature.



## PATHOLOGICAL CLASSIFICATION

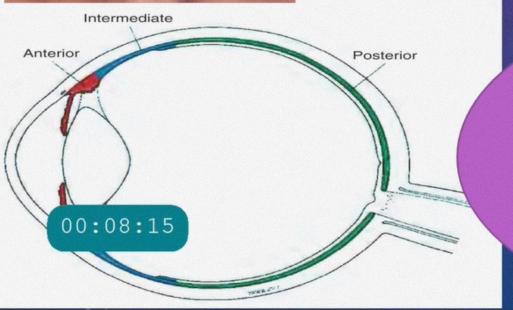






#### **PURULENT/ SUPPURATIVE UVIETIS:**

- Endophthalmitis or pan ophthalmitis
- Exogenous infection by pyogenic organisms which include staphylococcus, streptococcus,psuedomonas, pneumococcus and gonococcus.



## OUTPOURING OF PURULENT EXUDATE AND INFILTRATION BY POLYMORPHONUCLEAR CELLS

- Thickened uveal tissue
- Necrosis
- Pus filled cavities



# PATHOLOGY ( NON SUPPURATIVE UVI CLASSIFICATION)

#### **GRANULOMATOUS UVIETIS**

- Chronic inflammation
- Response to anything which acts as an irritant foreign body,
- Inorganic or organic material introduced from outside
- Haemorrhage or necrotic tissue within the eve.
- certain specific organisms of non-pyogenic and relatively nonvirulent

- Tuberculosis
- Leprosy
- Syphilis
- Brucellosis,
- Leptospirosis,
- Most viral
- Mycotic
- Protozoal
- Helminthic infections
- Sarcoidosis, sympathetic ophthalmitis and vogt-koyanagiharada's disease.



# PATHOLOGY (NON SUPPURATIVE UVIETIS) (WOODS CLASSIFICATION)

#### **GRANULOMATOUS UVIETIS**

- Chronic inflammation
- Response to anything which acts as an irritant foreign body,
- Inorganic or organic material introduced from outside
- Haemorrhage or necrotic tissue within the eve.
- certain specific organisms of non-pyogenic and relatively nonvirulent

## NON GRANULOMATOUS UVIETIS

 physical and toxic insult; different hypersensitivity reaction



# PATHOLOGY ( NON SUPPURATIVE UVI CLASSIFICATION)

#### **GRANULOMATOUS UVIETIS**

- Chronic inflammation
- Response to anything which acts as an irritant foreign body,
- Inorganic or organic material introduced from outside
- Haemorrhage or necrotic tissue within the eve.
- character character

- Tuberculosis
- Leprosy
- Syphilis
- Brucellosis,
- Leptospirosis,
- Most viral
- Mycotic
- Protozoal
- Helminthic infections
- Sarcoidosis, sympathetic ophthalmitis and vogt-koyanagiharada's disease.



#### Hla b27 associated

- Bechet's disease
- · Lens induced glaucoma
- Ugh syndrome
- Corneal graft rejection
- Glaucomatocyclitic crises
- Trauma
- Secondary syphilis
- Chronic
- Juvenile chronic arthritis
- Fuchs heterochromic iridocyclitis

00:01:55











### E UVIETIS) (WOODS

## NON GRANULOMATOUS UVIETIS

 physical and toxic insult; different hypersensitivity reaction

in

ced

of ent



#### **GRANULOMATOUS**

- Lymphocytes, plasma cells, with large mononuclear cells which eventually become epithelioid and giant cells and aggregate into nodules
- Iris nodules are usually formed near pupillary border (koeppe's & busaccas nodules).
- Nodular collection of the cells is deposited at the back of cornea in the form of mutton fat keratic precipitates.

00:04:09

flare is minimal.

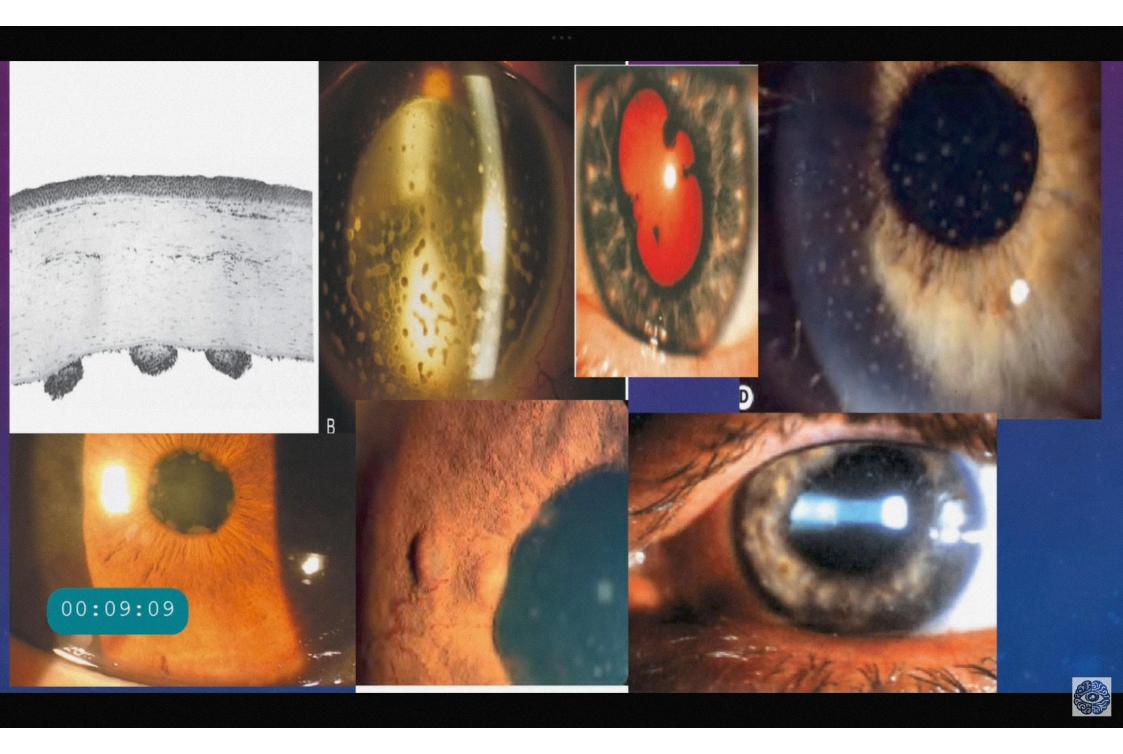
#### **NON GRANULOMATOUS**

- Dilatation and increased permeability of vessels
- Breakdown of blood aqueous barrier with an outpouring of fibrinous exudate and infiltration by lymphocytes, plasma cells and large macrophages of the uveal tissue.
- More diffuse inflammation
- Aqueous flare



Feature	Granulomatous	Non-granulomatous
Onset Pain Photophobia Ciliary congestion Keratic precipitates (KPs) Aqueous flare Iris nodules	Insidious Minimal Slight Minimal Mutton fat Mild Usually present	Acute Marked Marked Marked Small Marked Absent
Posterior synechiae Fundus	Thick and broad based Nodular lesions	Thin and tenuous  Diffuse involvement





### ETIOLOGICAL CLASSIFICATION (DUKE AND ELDER)

- IDIOPATHIC
- INFLAMMATORY
- INFECTIVE
- TRAUMATIC
- NEOPLASTIC / masquerade. :- (Neoplastic, e.g. lymphoma, anterior segment melanoma Non-neoplastic, e.g. juvenile xanthogranuloma)

00:11:49

