

## EYE HEALTHCARE

### EYE INFLAMMATION

Inflammation of the internal eye is not uncommon. It has a variety of causes, though in many cases a single cause cannot be identified with certainty. The classic symptoms (generally in one eye) of pain, grittiness, redness, blurred vision (sometimes with floaters) and sensitivity to light are often very annoying and can be dangerous, but with prompt accurate treatment, sight usually improves again.

Approximately 90% of internal eye inflammations occur at the front part (anterior) of the eye - This is called 'Iritis', where the Iris (controls light inflow) and ciliary body (controls focusing) are affected; so hence the symptoms of photophobia and blurred vision respectively. Unique to Iritis is the fact the light sensitivity is present in the affected eye (direct) and also, separately, gives a reaction if light is shone into the unaffected eye (consensual), unlike other eye conditions, e.g. Conjunctivitis. Characteristically, the redness on the 'white' part of the eye (sclera), comes as a 'haze' or 'flush' of mild redness, often localised in a circular form around the cornea. As optometrists, we also look for characteristic 'Aqueous Flare', which are small inflammatory cells floating in the anterior chamber under high (X40) magnification. Another firm diagnosis is

the presence of 'Keratic Precipitates', which are clumps of white blood cells located on the cornea's back surface.

Eye inflammation can occur on its own, or come secondary to other inflammatory conditions in the body such as 'Sarcoidosis' (where the inflammation could be anywhere), 'Ankylosing spondylitis' (a type of arthritis of the lower spine) or even parasitic infectious diseases such as 'Toxoplasmosis' (coming from undercooked lamb, pork or soil contaminated with cat faeces).

With accurate diagnosis on the type of eye inflammation (Uveitis), treatment is quite easy, usually being addressed by steroid drops e.g. Maxidex 0.1% (dexamethasone), which are then reduced (tapered off) gradually. Also, pupil dilators (cyclopegics) are used as a prevention of any adhesions (synechiae) developing between the posterior Iris and the eye's lens. Thankfully, all the symptoms generally resolve within the week, where the individual keeps a close watch for any recurrences, as it lies latent.

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