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## Ocular inflammatory disease observed in rheumatology clinic at a tertiary-care hospital

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Ocular inflammatory diseases can be sight-threatening and require prompt management and proper collaboration between ophthalmologists and rheumatologists. The purpose of this study was to determine the most prevalent ocular inflammatory disease observed in a general rheumatology clinic to provide physicians in both fields an insight into the nature of inflammatory disorders anticipated in the clinic. Electronic health records of 75 patients with ocular inflammatory disorders seen in the rheumatology clinic from 2004-2015 were reviewed. Nine patients were excluded due to lack of adequate available records. Data regarding patient demographics, rheumatologic diagnoses, ophthalmologic diagnoses, serology results, and status of disease activity at last follow-up visit were collected. Based on clinical presentation at last follow-up visit, patients were categorized in three groups: Those with active disease (active), those with inactive disease for more than 6 months still on treatment (controlled), and those who have been free of active disease without treatment for at least 6 months (remission). We included 66 patient records with median age of 49.5 ( $\pm 16.0$ ). Forty nine (74.2%) were females. Median length of follow-up was 28 months (range 2 months to 12 years). The most common ophthalmologic diagnoses seen in our rheumatology clinic were anterior uveitis, panuveitis, orbital inflammatory disease, retinal vasculitis and peripheral ulcerative keratitis. The majority of patients with panuveitis had isolated ocular disease. The most prevalent rheumatologic disease associated with anterior uveitis was spondyloarthritis, while retinal vasculitis was most commonly associated with anti-phospholipid syndrome. About half of the patients' inflammation was controlled on treatment and one quarter of the patients was in remission.

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