

OIUF

THE OCULAR IMMUNOLOGY
AND UVEITIS FOUNDATION

Dedicated to Eye Disease Cure and Education

Ocular Immunology and Uveitis Foundation

Massachusetts Eye Research and Surgery Institution

C. Stephen Foster, M.D., F.A.C.S., F.A.C.R.

Clinical Professor of Ophthalmology Harvard Medical School



Winter 2012-2013

Family Breaks World Record for OIUF



The McCurdy Family L to R: Mira, Nikki, baby Sasha, Stella, and Ross

Frozen in my mind is the moment I was on the phone with a nurse from Seattle Children's Hospital who informed us that Mira's blood work showed an ANA marker which put her at high risk for a disease called uveitis. It was January 2007, nearly six years ago, but I still remember the sinking feeling in my stomach, the dizziness that followed and how the nurse's words that came out seemed to run together and blur in my ears. I had never heard of uveitis before, but the name was intimidating to say the least. I came to understand that without treatment to keep it under control, Mira could lose her vision, and that filled me with panic and dread.

Mira was diagnosed with Juvenile Rheumatoid Arthritis at age 2 ½, after her knees became inflamed. Luckily, part of the protocol from our family doctor was to have her eyes examined by an ophthalmologist, who found she had active uveitis at that time. She received injections in both of her knee joints, and the inflammation has been in remission ever since. However, her journey with uveitis has been much more difficult. Mira has all the markers for a child with one of the most resistant cases. She has quickly followed the stepladder approach from steroid eye drops to methotrexate to a combination of methotrexate and the intravenous TNF-blocker Remicade. This combination worked for a year, but when we tried to space out the Remicade infusions to every eight weeks, her cells jumped back up. She remained on Remicade for two more years and when we weaned her off after the second year, her cells bounced back again. We tried every alternative we could think of that was accepted by our rheumatologist: homeopathy, Chinese medicine, naturopathic supplements, elimination diets, and heavy duty probiotics- all with no improvement. The only thing that worked consistently for Mira was steroid drops or oral steroids. Steroids cannot be tolerated long term and have terrible side effects, so we would go on them for a short time to get the inflammation down and then wean off as quickly as possible.

After four years of treatments, Mira was experiencing the longest and worst flare yet. Between October 2010 and March 2011, Mira oscillated between being on a high dose of oral steroids or having a "blizzard" of cells in her eyes. Over the Christmas holiday Mira sustained her first bit of permanent eye damage. I was depressed and desperate when my mother emailed me a post from a blog on www.uveitis.org. It was a post from a parent who had found success with seeing Dr. Foster and was singing his praises. I immediately emailed Dr. Foster the next day and, to my surprise he e-mailed me back within 24 hours. His message was simple - he would love to see her, he would love to help. I bought tickets that night to Boston and cried tears of joy and hope.

Since that first email, we have flown from Washington State to Boston twice. Dr. Foster works closely with us in advising our next steps and being in contact with Mira's doctors at Seattle Children's Hospital. Quite simply, he is the leading specialist in the country and is at the cutting edge of research and development in uveitis. Since he has come on board guiding Mira's treatments, I feel a huge sense of relief and trust that she is in the right hands. He has given us hope that one day we too will be in remission. He is an extremely accessible and caring specialist, and that is rare....I have seen more than a few. After going to MERSI to see Dr. Foster, the relief we felt was huge. He assured us that there were many things available that could help Mira, and they continue to find new treatment options every year because of the research conducted through OIUF.

This hope for new treatments inspired us and that is why my husband and I organized two fundraisers this year for OIUF. We wanted to put our energy into something positive in the name of this disease that has caused us so much distress. We started with a fundraiser at my aunt's salon that included a rummage sale that my entire family got involved with. We raised \$1,800. It felt so good to raise money and awareness that we immediately started thinking of our second fundraiser. What we came up with was a little different. My husband, being both a fun-loving

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Calendar of Events

January 8, 2013

Support Group – The Slit Lamp
MERSI – 6:30pm

March 5, 2013

Support Group – Latest OID/Uveitis Treatments
MERSI – 6:30pm

April 16, 2013

Support Group – Let’s Talk About It
MERSI – 1pm – 2pm

June 11, 2013

Support Group – Anniversary Meeting
with Dr. Foster
MERSI – 6:30pm

Walk for Vision

Date TBA

September 28, 2013

2nd International Symposium on
Birdshot Retinochoroidopathy

Art Auction

Date TBA

Cut along the dotted line and retain for reference.



OIUF

THE OCULAR IMMUNOLOGY
AND UVEITIS FOUNDATION

Dedicated to Eye Disease Cure and Education

Our Mission

The Ocular Immunology and Uveitis Foundation is a 501c(3), national non-profit, tax-exempt organization.

Our mission is to find cures for ocular inflammatory diseases, to erase the worldwide deficit of properly trained ocular immunologists, and to provide education and emotional support for those patients afflicted with ocular inflammatory disease.

How You Can Make A Visible Difference

Your gifts and donations help the work of the Ocular Immunology and Uveitis Foundation in achieving our mission.

To help meet your philanthropic goals, OIUF accepts gifts of many types, including appreciated securities, bequests, real estate, qualified retirement and life income gifts.

For more information please contact Alison Justus at (617) 494-1431 x112 or email oiuf@uveitis.org

Please use the enclosed envelope for your donation

Looking for a way to honor a loved one this holiday season?

Contact Alison Justus at ajustus@mersi.com to create your own online fundraising page in his or her honor.

Letter from Our President



C. Stephen Foster, M.D.

As we enter into this season of thanksgiving, I am humbled by the graciousness of so many individuals who have made 2012 such a wonderful year for OIUF. This year, in particular, proved to be quite fruitful for the Foundation, as you will see in this newsletter.

The 2012 Walk for Vision in Boston and New Jersey raised a combined total of over \$120,000! This is the highest amount of money raised yet for our Walk and both events in Boston and New Jersey were beautiful days in which patients and family members gathered together to raise funds for a cure. Samantha French, daughter of Twisted Sister Founder Jay Jay French, continued her fundraising efforts with the Pinkburst Project across the pond in London, where she participated in the Thames Path Challenge, a one hundred km (roughly 63 mile) 24 hour walk along the River Thames.

In September, OIUF sponsored the 2012 Symposium on Childhood Uveitis. Over 100 families traveled from across the country, including New York, Kansas, California, Connecticut, Louisiana, Tennessee, Oklahoma, Colorado, and Massachusetts, to listen to experts and meet other families whose children are battling uveitis at such a young age. While parents listened to talks from leaders in departments of ophthalmology, rheumatology, and social work, the children had a fantastic time expressing their emotions with having a chronic disease through artwork and, with the help of OIUF Fellows, were able to examine each other's eyes through the slit lamp. I caught the end of the children's' program and, looking out across the room, seeing them bond with one another because of this potentially blinding disease, only increases my determination to fight every day, with the help of OIUF, for a cure.

Other notable events of the past months occurred when Alison Justus, the Foundation's Director of Development, traveled to Greece to participate in the Uveitis Patient Interest Group Meeting, which was part of the International Symposium on Uveitis. On November 2nd, we held our 7th annual Through Their Eyes: Art Auction Benefit at the Liberty Hotel in Boston which raised over \$78,000. I then traveled to Chicago for the Annual Meeting of the American Academy of Ophthalmology, where I co-directed the Uveitis Subspecialty Day with one of my former fellows, Quan Dong Nguyen, MD, MSC. In May, I will venture to Russia and Poland, where I will give lectures on the Diagnosis and Treatment of Uveitis, as well as individual talks on Ocular Manifestations of Potentially Lethal Rheumatic Disorders and Challenging Cases from MERSI. I was also asked to give individual talks on Ocular Manifestations of Potentially Lethal Rheumatic Disorders and Presentation of Challenging Cases from MERSI. In September, 2013, OIUF will host its second International Symposium on Birdshot Retinochoroidopathy for both patients and physicians.

None of the activities mentioned above would be possible without the generous support from our passionate patients, their families, friends, and our supporters. On behalf of OIUF, thank you for your dedication to finding a cure for ocular inflammatory disease and best wishes for a healthy and happy New Year.

Warmest regards,

A handwritten signature in black ink that reads "C. Stephen Foster, MD".

C. Stephen Foster, MD



Dr. Foster, along with past and current Fellows, unite for OIUF's Boston Walk for Vision

Former OIUF Fellow Opens MERSI in NYC

David Chu, MD completed his fellowship under Dr. Foster in 2000. Last year, Dr. Chu opened the Metropolitan Eye Research and Surgery Institute in Palisades Park, New Jersey. We are pleased to announce that Dr. Chu's Manhattan office is opening on January 8, 2013 in addition to the New Jersey location. Dr. Chu brings his uveitis care and corneal transplantation service to the Manhattan location office as an extension of the MERSI NJ office. Dr. Chu strives to offer the latest knowledge, cutting-edge medical technology and surgical options for patients with complex ocular conditions.



Dr. Chu is actively participating in several FDA sanctioned clinical trials as well as numerous IRB approved clinical studies. In patients with complex ocular problems, if indicated, clinical trials may offer our patients the chance to receive treatments that are not available elsewhere.

To schedule an appointment, please call 1-888-823-8808. Metropolitan Eye Research and Surgery Institute NYC office is located at 235 Park Avenue South, at the corner of 19th Street, on the 2nd Floor. We're within walking distance of the Union Square (4,5,6,N,Q,R,L) and 23rd Street (6) subway stations and the M1, M2, and M3 buses stop right outside our front door. The Union Square/Gramercy neighborhood that we are a part of is filled with many great restaurants, cafes and shops. If you need a recommendation for someplace to get something to eat when you come for your appointment, please feel free to ask. 235 Park Avenue South – 2nd Floor (19th Street) New York, NY 10003.

Spotlight on OIUF Fellowship Program



Asima Bajwa, MD - Research Fellow

I was born and raised in Pakistan, a developing country where I was lucky to go to one of the highly regarded medical schools and ophthalmology residency programs in the country. During my ophthalmology training, uveitis became my professional scare as I often felt threatened and defeated by this blinding ocular inflammatory disease. In Pakistan, there was no cure available except for topical, oral or injectable steroids with a 'false' hope that the inflammation would never come back. It was not until I began my OIUF Fellowship at MERSI that my fears of this disease started to vanish. Within months of studying under Dr. Foster, I now feel there is hope and we may cure many patients afflicted with ocular inflammation. This Fellowship offers a unique learning experience with exposure to a wide array of patients with otherwise rarely seen diseases referred from all over the world. Before coming here, I had only seen pictures of these disabling conditions in text books. One of my favorite aspects of this program is to meet and work with Fellows from a diverse background but with a similar interest. It feels like one big family of staff, technicians, fellows, attending physicians, and research coordinators all working together to improve patient care.

Every day as I walk into MERSI, not only do I encounter complex clinical cases but also touching stories of people who were saved from blindness. These stories give me the intellectual and emotional stimulation I enjoy the most. And every day I walk out with a feeling... there is so much more to learn as to how to manage an individual as a whole, as a complete human being, rather than just the eyes, and to 'never quit' looking for a cure.

Upon completion of my fellowship in June 2013, I plan to continue training in the United States with a promise to myself that I will return to Pakistan every year to help underprivileged patients in my home country receive proper medical care.

Walk for Vision 2012



Walk for Vision Boston

On a beautiful sunny day on Sunday, August 26, 2012 OIUF held its annual Walk for Vision at the Royal Sonesta Hotel in Cambridge, MA. Walkers gathered for brunch at the hotel and listened to Dr. Foster speak. After a group photo, everyone set out for a 5k walk around the Charles River. Thank you to our Walkers and volunteers from all across the country who raised over \$120,000 for OIUF, our biggest number for this event! We are so grateful to our sponsors for their support: STD Med, Lux Biosciences, Spirus Medical, Quirk Auto Dealers, Quest Diagnostics, and RBS Citizens. Special thanks to Mix 104.1 for greeting us at the Finish Line with music, games and prizes!



Walk for Vision New Jersey

On Sunday, September 23, 2012 the New Jersey Walk for Vision was held at the Verona Park Boathouse in Verona, NJ. Walkers raised over \$33,000 for OIUF. Special thanks to Lauren Jacobs-Lazer, David Chu, MD, Sara Kim, Sylvia Stern, and Eileen and Milton Fong for organizing the Walk. Additionally, we are so grateful to Lauren's parents who, for the second year in a row, generously matched the first \$10,000 raised for the New Jersey Walk.



2012 Symposium on Childhood Uveitis

On Saturday, September 29, 2012, OIUF hosted the 2012 Symposium on Childhood Uveitis in Cambridge, MA. Over 100 families and physicians from across the United States and Canada attended the event dedicated solely to uveitis. While parents and physicians attended talks by leaders in the fields of ophthalmology and rheumatology at the Marriott Hotel, the children and their siblings enjoyed their program next door at MERSI, where they participated in a number of activities, including making drawings of “What is Yucky about Uveitis”, “Finding the Good in the Yucky”, and “Playing Dr. Foster” while examining each other’s eyes with the slit lamp.



Faculty – Left to right: Stephen Anesi, MD; Andrea Patisteas, Patrick Whelan, MD, PhD; C. Stephen Foster, MD; H. Nida Sen, MD; Jennifer Rein, MSW, LICSW

Not able to attend the conference in person?

You can view the entire symposium online at

<http://www.uveitis.org/video/category/conference>



Dr. Foster speaks about special challenges and outcomes with uveitis



Art Therapist Jeff Brody helps children share their artwork



Making new friends



Andrea Patisteas shares her experience of raising a daughter with uveitis



OIUF Fellows help children with the slit lamp



Greg Campo and his daughter, Grace, from Louisiana

Thank you to our sponsors: Alcon, Lux Biosciences, Bausch & Lomb, Regeneron, Eyegate & IOP, Inc., and also to the volunteers who made this an unforgettable experience for many families struggling with pediatric uveitis.

7th Annual Through Their Eyes: Art Auction

Friday, November 2, 2012 – The Liberty Hotel, Boston, MA

Patients, families, and supporters of OIUF enjoyed a wonderful evening at the Liberty Hotel for the Foundation's Annual Art Auction Benefit. A special thank you to Tom Paulson and Andrea Patisteas, who co-chaired the event. Andrea's fourteen year-old daughter, Mia, has pars planitis and retinal vasculitis. She shared her brave battle and introduced her mother, who has become a great friend to the Foundation and a strong advocate for Mia and other families with ocular inflammatory disease. Marie Keep from Skinner Auctioneers & Appraisers joined us for the 7th year in a row as our Auctioneer and also did a great job as our Master of Ceremonies.



Kevin Roy of Green Banana SEO with Dr. and Mrs. C. Stephen Foster



Marie Keep of Skinner Auctioneers & Appraisers



Dan Antonelli and Rene Martin



Mia Resendes shares her story with uveitis



Photographer Tony Schwartz with Stephen and Jill Scolnick



Norman Bridwell (illustrator and cartoonist of Clifford the Big Red Dog) with wife Norma and artist Judith Moffatt and her husband William Hofflan



From L to R: Steven & Suzie Tallarida, Paul Donahue, Carol Covell and Charlie Beck



From L to R: Liz and Alan Klein, Maria Serrentino, Cathy & Rich Powers and Sandy & John Schelton



Friend of OIUF Chaney Davis displays artist MaryJane West's beautiful artwork for bidders



Deborah Barry of Bank of America with C. Stephen Foster, MD

Thank you to our sponsors:

Quirk Auto Dealers, Parrelli Optical, Rosa and Marc Catalano, STD Med, Roche Bros, and Ronney and Stephen Traynor.

Uveitis Support Group

The Uveitis/OID Support Group is a patient education and mutual support resource founded in 1996 by Dr. Foster, Frances Foster MS, NP, John Hurley LICSW, and patients of Dr. Foster. Our mission is to educate patients, their family members and friends, and the medical community about ocular inflammatory disease and to facilitate the exchange of information, emotional support, and mutual aid between members. We are also deeply committed to raising funds to support research related to the causes and effective treatment of uveitis/OID.

Please take advantage of all our free services in this upcoming year: support group meetings; online support groups for kids and adults; the website with a support group page for adults, parents, and children; parent/teacher guide; and A Guide to Ocular Inflammatory Disease. Our support group runs on generous contributions to the support group under the Foundation from our members, their family and friends.

We have six support group meetings a year. The meetings are committed to support, not criticism, and no medical advice is given unless the person has a medical degree to do so. All meetings are based at the Massachusetts Eye Research and Surgery Institution (MERSI) in Cambridge, Massachusetts. The time of each meeting varies to try to meet the needs of our members with some occurring in the day and others in the evening. Please see the event calendar for the next upcoming meeting.

Can't attend a meeting? Get support online!

In addition to the onsite meetings, the Uveitis/OID Support Group has an online support group and informational website for adults, parents, and kids. For more information, point your web browser to www.uveitis.org and click on the Support Group links for a list of these wonderful and informative resources.

Or if you just want to ask a question of an expert, go to our "Ask Dr. Foster" page.

facebook

The [Ocular Immunology and Uveitis Foundation](http://www.facebook.com/ocularimmunologyanduveitisfoundation) reaches over 950 fans on Facebook! Are you one of them? Visit the OIUF page at www.facebook.com/ocularimmunologyanduveitisfoundation and click the "Like" button at the top of the page to receive the latest updates about our activities and photos of our recent events, including the Walk for Vision and the annual Art Auction.

New Teen Support Group on Facebook! Kids 14 and older are welcome to join this private group for teens with ocular inflammatory disease. Email Ashley Floreen at afloreen@mersi.com to join!



OIUF is now on Twitter! Follow us at <http://twitter.com/#!/uveitis1>

The Kids Club is back! Check out our updated online support group for kids 13 and under. Email adult moderator Liz Irvin at eirvin@comcast.net for the protected password.

Resources:

Documentaries for sale:

Pricing: \$20.00 per DVD. Extra charge for international shipping applies.

- 1. Uveitis: The Adult Experience.** Features 3 adults who all were diagnosed with uveitis in adulthood. It talks about their treatment, coping, and outcomes to care.
- 2. Growing Up with Uveitis: The Child's Experience.** Features 3 females who have uveitis related to juvenile arthritis and their different experiences and treatments as well as outcomes related to their particular types of treatments.

Free guides:

A Guide to Ocular Inflammatory Disease (OID): Discusses different types of OID, causes, and treatment step ladder.

A Guide for Teachers and Parents: Gives an overview of uveitis, effects on vision, and tips to employ to help children adapt in school.

Bracelets: adult or child sizes: Colors for adults are red, blue, and combo blue mixed with red. Child sizes are combo color only. Bracelets are \$2.50. Discount offered if bought in bulk.

If interested in our products, order online or email: ffoster@mersi.us or call 617-494-1431 ext 112

Pediatric Uveitis

C. Stephen Foster, M.D.

Uveitis is the third leading cause of blindness in America and 5% to 10% of the cases occur in children under the age of 16. But uveitis in children blinds a larger percentage of those affected than in adults, since 40% of the cases occurring in children are posterior uveitis, compared to the 20% of posterior uveitic cases in the adult uveitis population.

There are, at any one time, approximately 11,000 cases of pediatric uveitis in the United States, with 4,300 new cases occurring each year. Spread across the entire U.S. population, therefore, and across all offices of Ophthalmic practitioners, the likelihood that any one individual practitioner will care for a patient with pediatric uveitis is relatively small, and the likelihood that any single individual will have significant experience in caring for large numbers of cases over a long period of time is vanishingly small. This accounts, we believe, at least in part for the sub-optimal care that many of our children with uveitis appear to be receiving, even in these "modern" times. The stakes are incredibly high, for the child, for the parents who will be faced with (usually) many years of dealing with this health problem in their child, and for society at large because of the lifetime of dependence which occurs in those who eventually reap substantial visual handicap as the result of sub-optimal treatment.



Dr. Foster with Raquel from Michigan, who is currently in remission due to the stepladder approach

We believe that current epidemiologic data emphasize two critically important goals in an effort to change the current prevalence of blindness caused by pediatric uveitis:

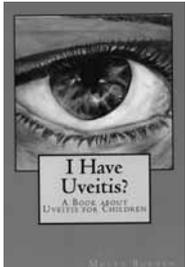
1. Repeatedly emphasizing to parents, Ophthalmic practitioners, especially Pediatricians, and school personnel the critical importance of routine (annual) vision screening for all children.
2. The critical importance of beating back the frontiers of general ignorance and mind sets, eliminating the all-too-common pronouncement by physicians to parents of a child with Pediatric Uveitis that:
 - a. "He'll (She'll) out grow it."
 - b. "The drops will get him (her) through it."
 - c. "It's just the eye; systemic therapy is not warranted."

Statements (a) and (b) are true, but too often pull the doctor, patient, and family into the seduction of nearly endless amounts of topical steroid therapy. It is generally true that the child will in fact "out grow" the Uveitis, i.e., that the uveitis will no longer be a problem eventually. The pity is, however, that so often by the time the child "out grows it", permanent structural damage to retina, optic nerve, or aqueous outflow pathways have already occurred and the blinding consequences are now permanent. It is also true that for any individual episode of uveitis, the steroid drops usually will get the patient through it. But the fact is that so many children with pediatric uveitis have recurrent episodes of uveitis such that the cumulative damage caused by each episode of uveitis and the steroid therapy for each episode eventually produces vision-robbing damage. And item (c) is simply the result of the common myopic viewpoint of Ophthalmologists: that it is just an eye problem, and therefore should simply be treated with eye medications. Nothing could be further from the truth! And, until large numbers of Ophthalmologists reframe this socially and epidemiologically important matter, the prevalence of blindness secondary to pediatric uveitis is not going to change.

Uveitis Patient Becomes Author

Molly Borden took her diagnosis of pediatric uveitis and was determined to share her story so other children would not have to suffer in silence. She recently wrote and illustrated "I Have Uveitis? A Book for Children." Her book was published in 2012 and she shared her reasons for writing below.

My voice lives forever—forever in a book I authored and illustrated. I Have Uveitis? describes to children what they will feel after receiving a diagnosis of uveitis, a rare ocular inflammatory disease. The idea grew out of my own initial experiences as a frightened seven-year old.



Writing the book brought me back to a time when my feet dangled off the cold examination chair, when I feared nothing more than a blue light eye pressure test, when doctors glowered at my wailing. Back then, no support materials for children existed. I felt alone and scared. To prevent others from feeling the same, I wrote a guide; I created an eternally present, relatable voice.

My book puts the disease—and the child—in context. I explain what to expect: more tests, medications, and visits to various doctors. Through the dialogue, I also stress that the child is not alone and that having this disease does not change who she is inside. My voice makes some sense of the seeming chaos.

I have already witnessed the impact of my legacy on such a child. While interning at OIUF this past summer, I met a recently diagnosed patient who had just purchased my book. At seven years old, she sat staring at her feet timidly in the waiting room. The scene proved all too familiar. I turned to the wide-eyed parents and offered some words of encouragement. They appeared relieved just to meet a healthy person living with uveitis. As I walked away, the family opened my book. A soft smile spread on the girl's face, and I came to a realization: my voice had caused that grin. I Have Uveitis? was—is—my signature.

Upon graduating high school in the spring of 2013, Molly plans to study pre-med and possibly economics or psychology. OIUF is extremely grateful to Molly for sharing her story with children and reassuring them that they are never alone with uveitis. Her book can be purchased at www.uveitis.org and all proceeds benefit OIUF.

Family Breaks World Record for OIUF from page 1

and competitive guy, decided to try and break a world record in the name of uveitis this past spring. He broke the world record for "greatest distance grape caught in mouth (self thrown)" with a distance of 68ft. 1in. For this event, we asked for a \$5.00 donation to guess the distance he would catch the grape. Much of our small town of Kingston, Washington came out to support us, donate, and watch. Seattle news stations caught wind of it, and they came out to film and feature it on the local news, which was great publicity for OIUF. We started receiving checks from all over, and when it was all said and done we raised over \$2,700 for OIUF. It was a wonderful experience capped off by Mira getting to present a check to Dr. Foster at her visit this year. She had the biggest smile on her face when she handed it to the man responsible for fighting to save her sight.



At only eight years old, Mira is brave, strong and has an amazing outlook on life. She lives every moment to its fullest and does not dwell on her condition, nor think of it in a negative way. Mira had her first infusion at age three. In our attempt to make both her and us feel better about spending the day in the hospital, we invited nearby family members to attend and called it an "Infusion Party." Well, they say don't do anything to a three-year-old that you don't want to do a hundred times in a row, and it's true in this case, as we have been having infusion parties ever since. My beautiful Mira has grown fond of them, even complaining when we switched temporarily to Humira injections at home, much favoring an "infusion party" at the hospital. Raising a child with a chronic disease has taught us all about how best to approach life and what words you say and how you choose to frame the challenges placed before you. Mira's abundant, joyful energy inspires me. I work to preserve her childhood as much as I can in the face of this disease. Whenever I feel sorry for myself I focus on the happy child I am raising.

For our family, uveitis is an ever-changing process of trial and error, ups and downs. It is a lesson in acceptance and it has reframed my life completely. In order to make it through this difficult disease, I have learned the best thing I can do is to be grateful for at least one thing every day. If I focus on the positive, it leaves little room for the negative and fearful thoughts in my mind. At the top of my list are my inspirational daughters, Mira, Stella and Sasha, my amazing husband Ross, my supportive family, Dr. Foster and OIUF for all they do to help Mira and others with uveitis. With everyone's help, I know OIUF will find a cure for this disease and I cannot wait to celebrate that accomplishment.

Research Highlights

Novartis LFG:

This study will assess the safety, tolerability and effect of intravitreal LFG316 in patients with active Multifocal Choroiditis and Panuveitis. Eligible patients will be 18 to 65 years old, have active multifocal choroiditis, as evidenced by vitritis in the study eye of 2+ or more, and a visual acuity score of 60 letters or less. The study evaluations include blood tests, visual assessments, vital signs, and a standard ophthalmology examination.

XOMA:

XOMA has began testing of Gevokizumab, a monoclonal antibody that binds strongly to interleukin-1 β (IL-1 β), a pro-inflammatory cytokine shown to be involved in non-infectious uveitis including Behcet's uveitis, cardiovascular disease, and other auto-inflammatory diseases. By binding to IL-1 β , gevokizumab inhibits the activation of the IL-1 receptor, thereby modulating the cellular signaling events that produce inflammation. Gevokizumab has potential for the treatment of non-anterior, non-infectious forms of uveitis, inflammation of the heavily vascularized layer of the eye. People with these types of uveitis may experience decreased vision, pain, light sensitivity and floaters. Uveitis can lead to permanent vision loss. The inflammation that leads to non-infectious uveitis has been shown to be IL-1 mediated. Patients with active and inactive uveitis may be eligible for this trial.

MUST:

The Multicenter Uveitis Steroid Treatment (MUST) study across the USA is funded by the National Institutes of Health. The goal is to compare standard medical therapy (immunosuppressive agents) for uveitis with a steroid implant placed inside the eye

(surgery), to see which therapy results in better control of uveitis, which therapy patients prefer, and which has fewer side effects. The steroid implant is the Retisert®, which was approved by the FDA in 2005. Dr. Foster was part of the original study that led to its approval, and some of our patients have had this treatment with excellent results. The first phase of this study has been completed and the results have been accepted to be published in Ophthalmology. Currently, the study is in the second phase which is the long-term follow up of the patients enrolled in the first study.

Abbott:

Three multi-center international placebo controlled trials, sponsored by Abbott have recently started enrollment of patients. All three trials are designed to investigate the efficacy and safety of the human anti-TNF monoclonal antibody adalimumab in adult subjects in the treatment of noninfectious intermediate-, posterior-, or pan-uveitis. One trial is enrolling patients with controlled uveitis; the other trial is enrolling patients with active uveitis, while the third is an open-label trial in which patients can rollover into from the other two trials.

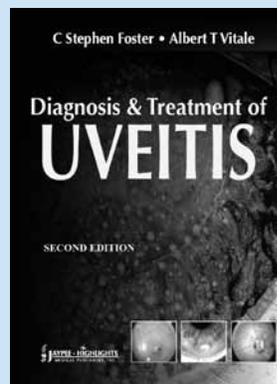
Eyegate:

This study aims to evaluate the safety and efficacy of Iontophoretic Dexamethasone Phosphate Ophthalmic Solution, compared to Prednisolone Acetate Ophthalmic Suspension (1%) in patients with non-infectious anterior segment uveitis. Please note: If you are experiencing symptoms that you believe to be an active flare-up of anterior uveitis, please contact us before you start treating any symptoms, including using steroid drops.

Hot off the Press – New Publication!

The second edition of *Diagnosis and Treatment of Uveitis* is now published! 10 years after a remarkable sell out from the first edition, published in 2010, C. Stephen Foster, MD and Albert Vitale, MD along with authors from the original version and new contributors, have published a truly one of a kind encyclopedic treatise on the subject of Diagnosis and Treatment of Uveitis.

Please visit our online store for the link to purchase the book from its publisher at <http://www.uveitis.org/store/category/books>





THE OCULAR IMMUNOLOGY
AND UVEITIS FOUNDATION

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FIRST CLASS MAIL
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Publications of Interest to Physicians and Patients for Sale:

Foster, C.S., Bhatt, P., Yilmaz, T., Cervantes, R., Mauro, J. Atlas of Ocular Inflammatory Disease. 2009. Cost \$198.00

The photographs were taken from the MERSI archives and will provide a unique resource for ophthalmologists world-wide to view various types of lesions caused by ocular inflammation as a result of roughly 100 different disorders, enabling them to more readily recognize and diagnose these diverse disorders.

Foster, C.S., Amorese, L., Dacey, M., Rosenbaum, R. Birdshot Retinochoroidopathy. 2010. Cost \$50.00

Monograph from the Ocular Immunology and Uveitis Foundation's International Symposium on Birdshot Retinochoroidopathy held on October 4, 2008 at the Broad Institute in Cambridge, MA.

This monograph is based on the lectures delivered by the following experts in the field, Janet Davis, MD, David Hinkle, MD, Phuc Lehoang, MD, PhD, Robert Nussenblatt, MD, Aniki Rothova, MD, and Dr. Foster. It includes comprehensive information about this condition, including etiology, tests and treatment done for patients.

Foster, C.S., Anesi, S., Gonzalez, L., Palafox, S. Childhood Uveitis. 2011. Cost \$50.00

Monograph from the Ocular Immunology and Uveitis Foundation's Symposium on Childhood Uveitis held on August 7, 2010 in Cambridge, MA.

This monograph is based on the lectures delivered by the following experts in the field, Janis Arnold, David Chu, MD, David Hinkle, MD, C. Eglia Rabinovich, MD, MPH, C. Michael Samson, MD, MBA, H. Nida Sen, MD, MCHc, Howard H. Tessler, MD, Patrick Whelan, MD, PhD, and Dr. Foster.

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