



THE OCULAR IMMUNOLOGY  
AND UVEITIS FOUNDATION

*Dedicated to Eye Disease Cure and Education*

## **Association of Ocular Inflammatory Disease with Inflammatory Bowel Disease**

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Even more surprising than the association between arthritis and eye inflammation, at least to some people, is the association between bowel inflammation and eye inflammation. But history tells us that such an association exists. This may be true not only in infectious inflammatory bowel disease, as in the case of Whipple's disease, but also in inflammatory bowel disease (IBD) generally considered to be autoimmune. For example, approximately 5% of patients who develop ulcerative colitis will experience episodes of recurrent uveitis; some patients with ulcerative colitis will develop other ocular inflammation such as scleritis or episcleritis. And an even greater association exists between Crohn's disease (regional ileitis) and ocular inflammation. Interestingly, the "activity" of the inflammation in the eye and the inflammation in the gut rarely are concurrent, i.e., the inflammatory bowel disease may be under excellent control, but uveitis may be extremely troublesome, and vice versa, the eye may not have any difficulty at all, while the patient is having major flare-ups of inflammatory bowel disease. Additionally, one of the more effective medications for control of the inflammatory bowel disease activity, Sulfasalazine, has proven to be, in our hands and in those of others, particularly disappointing in controlling the recurrent episodes of uveitis in patients with inflammatory bowel disease-associated uveitis. Patients with IBD associated uveitis generally required one of the immunomodulatory medications, such as Methotrexate, Azathioprine, or Cyclosporin and in some cases may need to have biologic therapy, such as Remicade or Humira.

In contrast, patients with "irritable bowel syndrome" associated uveitis can often be managed with topical therapy or with sulfasalazine or an oral non-steroidal anti-inflammatory agent without the need of an immunosuppressant/immunomodulatory agent. The exact connection between "irritable bowel syndrome" (as opposed to inflammatory bowel disease), and uveitis is not well proven, but it has been the strong clinical impression of many experts of uveitis that such an association exists.