

## Contact Details

If you have any questions please telephone the RUH Emergency Department on

**01225 824000 (day)**  
**01225 825015 (night)**

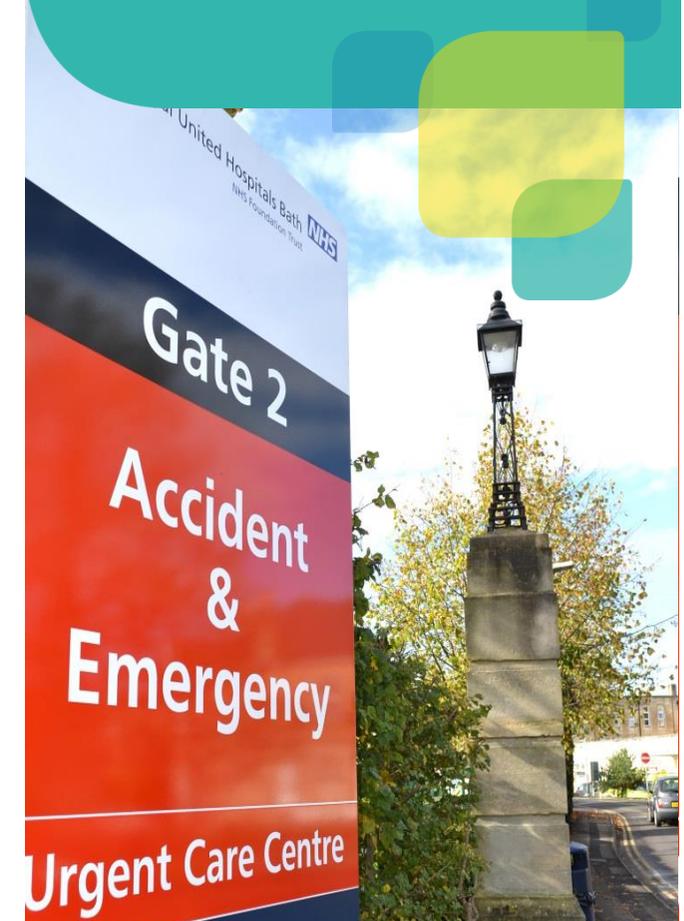
Royal United Hospitals Bath  
NHS Foundation Trust  
Combe Park, Bath BA1 3NG  
01225 428331 [www.ruh.nhs.uk](http://www.ruh.nhs.uk)

Please contact the Patient Advice and Liaison Service (PALS) if you require this leaflet in a different format, or would like to feedback your experience of the hospital.

Email [ruh-tr.PatientAdviceandLiaisonService@nhs.net](mailto:ruh-tr.PatientAdviceandLiaisonService@nhs.net)  
or telephone 01225 825656.

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## Iritis



## What is Iritis?

The iris is the coloured part of the eye. Iritis means inflammation of the iris. Iritis usually causes redness of the eye, an aching pain, sensitivity to light and slightly blurred and misty vision. Both eyes may be affected or only one.

## What causes Iritis?

Sometimes Iritis is associated with conditions in other parts of the body, e.g. Ankylosing Spondylitis, psoriasis, disorders of the bowel, Sarcoidosis and Reiter's syndrome. You should tell the eye doctor if you, or a relative, have been tested or treated for any of these. Rarely, medicines can cause Iritis. Very often, there is no obvious cause for Iritis and it is usually not worth doing blood tests.

## How is Iritis treated?

Most people with Iritis start to respond to eye drops within a few days, but the treatment will need to be continued for 5-6 weeks, otherwise the symptoms will come back.

**Steroid Drops** – e.g. Maxidex or Predsol – usually need to be given every hour during the daytime for the first few days. They can then be tailed off over a few weeks. You will probably need to get a repeat prescription for these drops from your GP, as the bottle dispensed by the hospital will not last long enough. Steroid drops quieten the inflammation and make the eye less red and sore. If necessary, you can have steroid ointment, e.g. Betnesol, at bedtime to provide extra treatment overnight

**Dilating Drops** – e.g. Cyclopentolate or Homatropine – these are only needed for the first few days. They relieve pain and prevent complications from the inflammation. Unfortunately, they make your vision and light sensitivity temporarily worse. You may be unable to work or to drive while using these drops, but you will not be asked to use them for longer than necessary.

## When do I need to be seen again?

If the attack is mild you may only need one follow-up visit to the clinic in about 6-weeks. Sometimes several visits are necessary over the first few days. The doctor will advise you about this and you can ring nurse in the Eye Outpatients Clinic (01225 824403) between visits if an unexpected problem arises.

## Will the Iritis come back again?

You may get another attack, but it may not be for many years. If the same symptoms return, phone the Eye Outpatients Clinic to arrange to be seen. Getting treatment promptly should mean that your next attack is much less troublesome and fewer drops are needed. Do not try to treat the attack yourself by just getting drops from your GP; steroid drops can cause problems if used for too long or for the wrong reasons, so you must be seen by an eye doctor early in the attack.