



PSORIASIS

ACUTE ANTERIOR UVEITIS IN A PATIENT WITH PSORIASIS

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Background: Psoriasis is associated with ophthalmic comorbidity, including blepharitis, conjunctivitis, dry eyes, cataracts and uveitis. Anterior uveitis occurs in 7-20% of patients with psoriasis. In the psoriasis patient, this can acutely present with painful red eye, photophobia, reduced visual acuity and posterior synechiae.

Observation: We describe a 54 year old Chinese female with stable chronic plaque psoriasis on methotrexate 5mg weekly and Grave's disease on remission with carbimazole, who presented with acute five day history of painful right eye with blurring of vision and tearing. Slit lamp examination revealed right circumcilliary injection, fine keratic precipitates on the cornea endothelium, anterior chamber cells and flare. She was diagnosed with acute anterior uveitis of the right eye. Her condition resolved with intensive topical prednisolone acetate 1% which was tapered, as well as homatropine 2%.

We review the ocular comorbidities of psoriasis, pathogenesis, molecular targets and up to date treatment of psoriatic uveitis.

Key message: For refractory cases, anti-TNF-alpha blockers biologics (adalimumab and infliximab), anti-IL-12/23 p40 blockade with ustekinumab have been used. Secukinumab but in high dose intravenous administration has shown promise in controlling psoriatic uveitis. There should be a high index of suspicion for psoriatic uveitis in a psoriasis patient with acute red eye. An urgent ophthalmological referral is warranted to prevent ocular complications.

