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Short Communication

Role of Dexamethasone Intravitreal Implant in Treatment of Uveitis

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Introduction

Uveitis is the inflammation of the inner coats of the eye. It is a visually significant disorder which can lead to transient or permanent visual impairment. Uveitis is a multifactorial disorder and can either have an autoimmune etiology or can occur as an adverse reaction to medications and toxins. In few cases, it can occur de novo as an idiopathic ocular inflammation [1-3].

The treatment of uveitis includes a stepwise approach including topical corticosteroids followed by periocular steroid injection. At 2 to 3 week intervals, 2 - 3 injections can be given. If patients did not respond, Systemic corticosteroids are the next line. Oral steroids are initially given in a dose of 1 mg/kg/day for 2-3 weeks and then slowly tapered by 10 mg/day/week. In the case of failure of previous measures, immunosuppressive drugs such as cyclosporine, azathioprine, methotrexate, and mycophenolate mofetil can be considered with careful monitoring and explaining the patients about potential adverse reactions. The goal of treatment in uveitis is to control of the inflammatory process and treat the complications. But the systemic treatment is associated with significant ocular and systemic side effects. The periocular route of steroids is not long lasting and requires frequent administration. In order to overcome these difficulties and to prevent recurrent episodes of ocular inflammation, sustained-release intraocular corticosteroid implants have been developed which lasts 3 - 6 months.

The dexamethasone drug delivery system (Ozurdex(®); Allergan Inc, Irvine, CA), is a biodegradable intravitreal implant. It is a novel and promising adjunctive treatment for patients with severe posterior noninfectious uveitis recalcitrant to different immunosuppressive agents [4].

This implant has been shown to be effective in the treatment of macular edema and noninfectious posterior uveitis and has been approved by the FDA for these entities [5].

Uveitis is a sight-threatening ocular disorder with significant morbidity and one of its clinical features include cystoid macular edema (CME) which is the major cause of visual loss. There has been a recent interest in the use of dexamethasone intravitreal implant in the treatment of uveitis. A single dexamethasone implant has been shown to provide clinical benefits for up to 6 months [6].

A long term randomized controlled trial is necessitated to further evaluate the role of this agent in the treatment of uveitis.

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