Scleritis

In a nutshell, what is scleritis?



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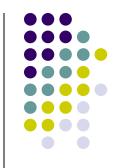
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Yes, men are likely to be affected than women



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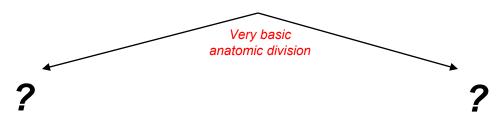
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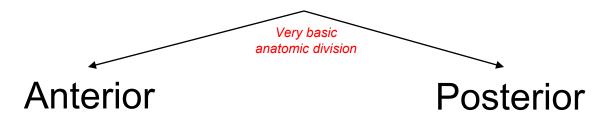
Yes, adults are much more likely to affected than children

Is there a gender predilection?
Yes, men are less likely to be affected than women

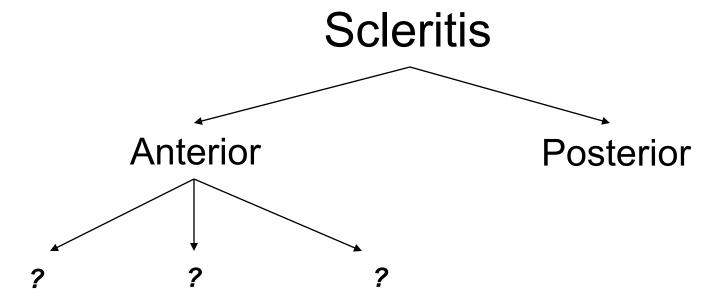




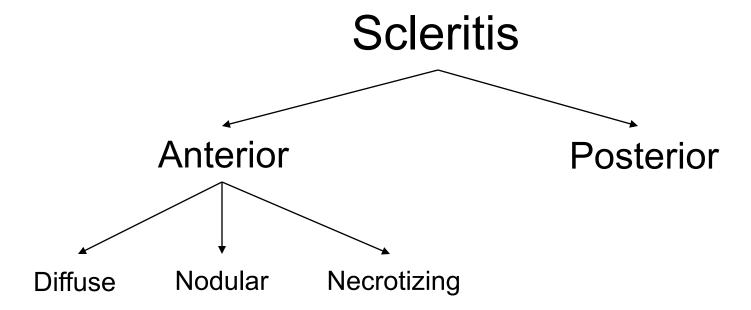




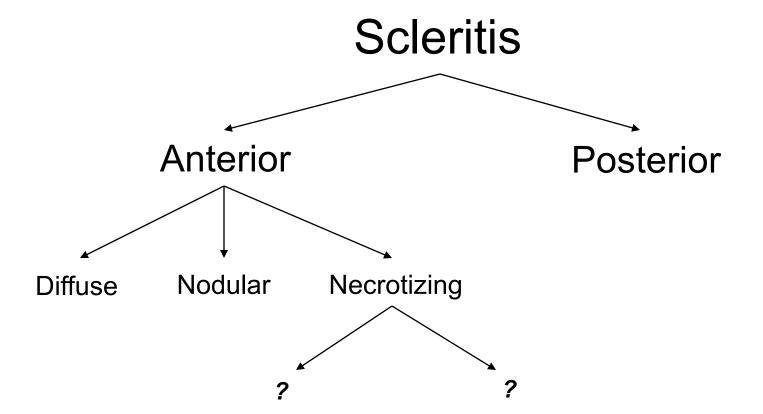




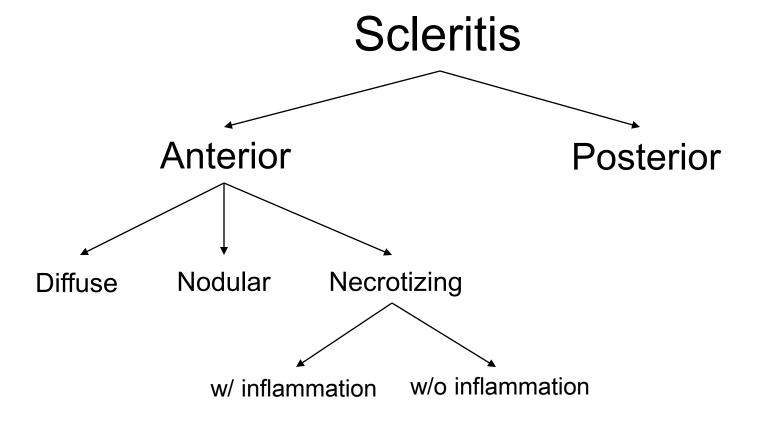






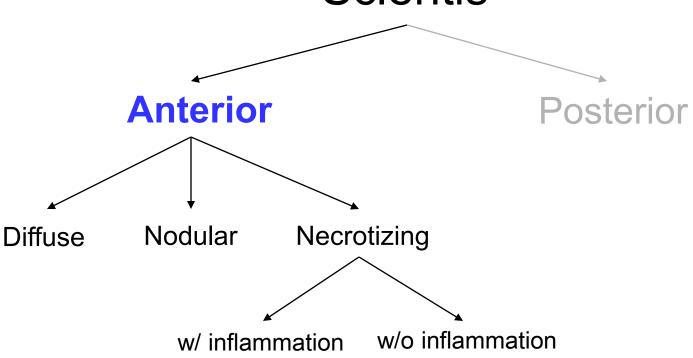








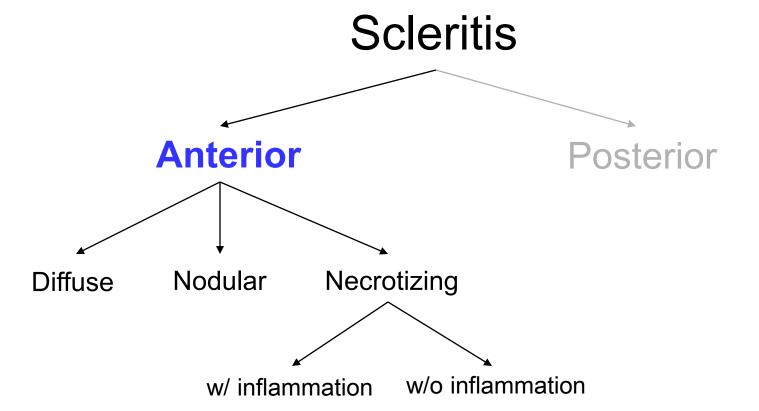
Scleritis



What are three classic signs of anterior scleritis?

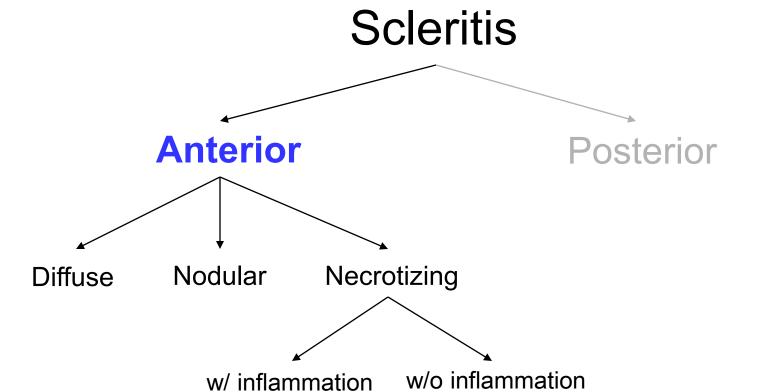
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- **--?**
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What are three classic signs of anterior scleritis?
--Scleral
--?
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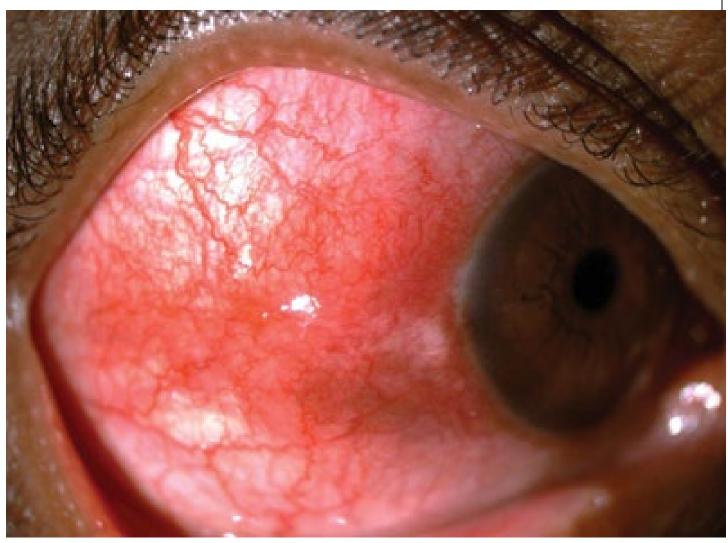


What are three classic signs of anterior scleritis? -- Scleral edema

--?

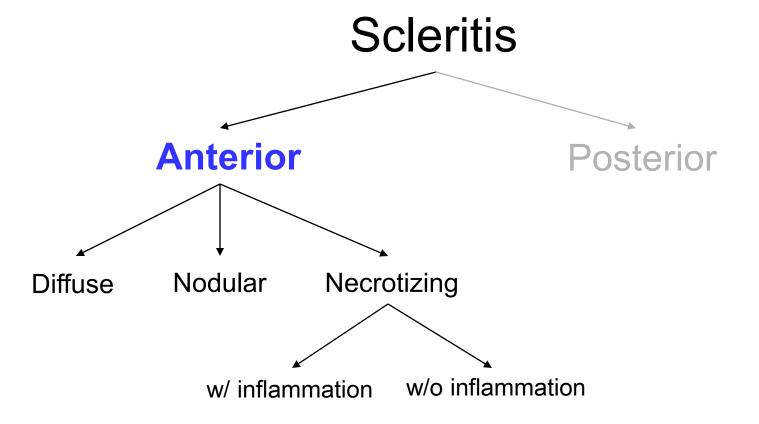
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Scleral edema in nodular scleritis

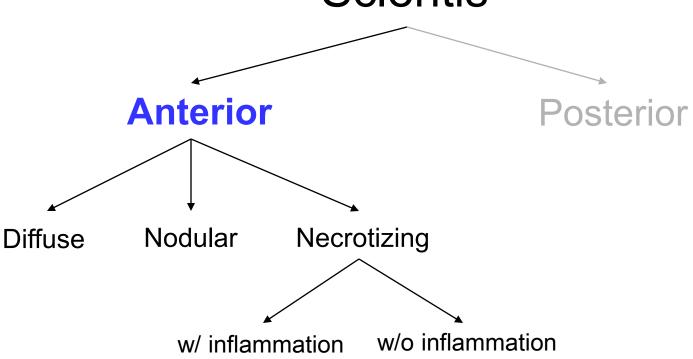








Scleritis



What are three classic signs of anterior scleritis?

- --Scleral edema
- --Sclera has a violaceous hue

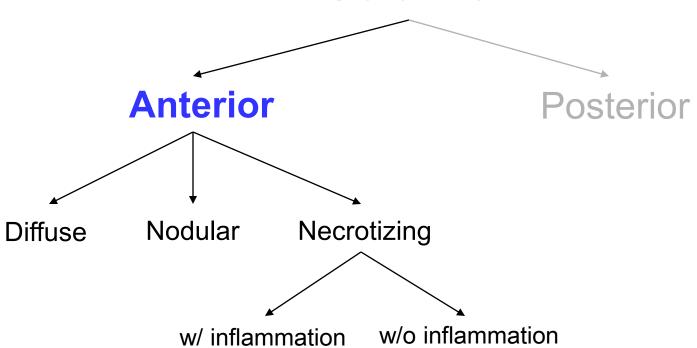
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Violaceous hue in diffuse scleritis





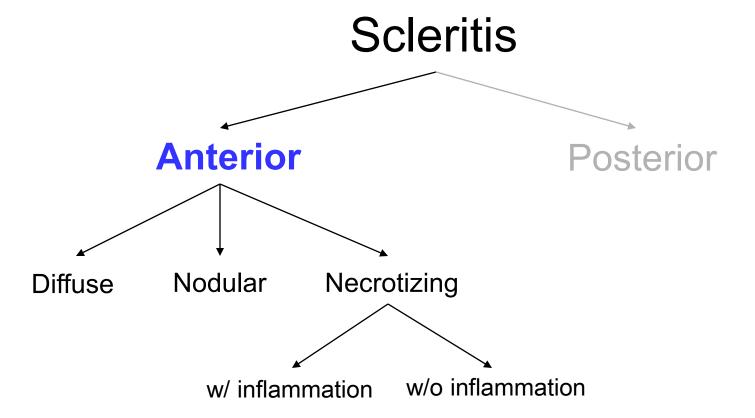


What are three classic signs of anterior scleritis? -Scleral edema

- -Sclera has a **violaceous** h

classic pattern





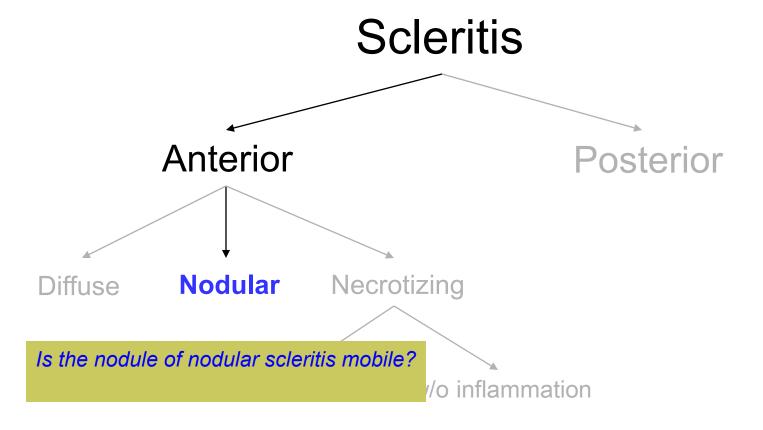
What are three classic signs of anterior scleritis?

- --Scleral edema
- --Sclera has a violaceous hue
- --Inflamed vasculature has a criss-cross pattern

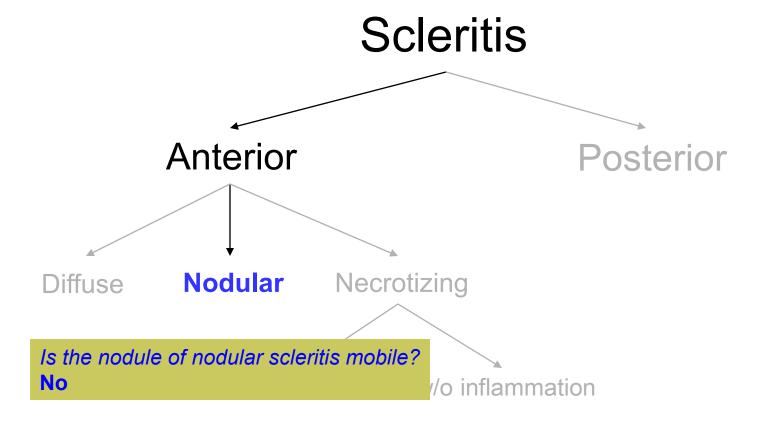


Criss-cross deep vasculature in scleritis (look for it until you see it)

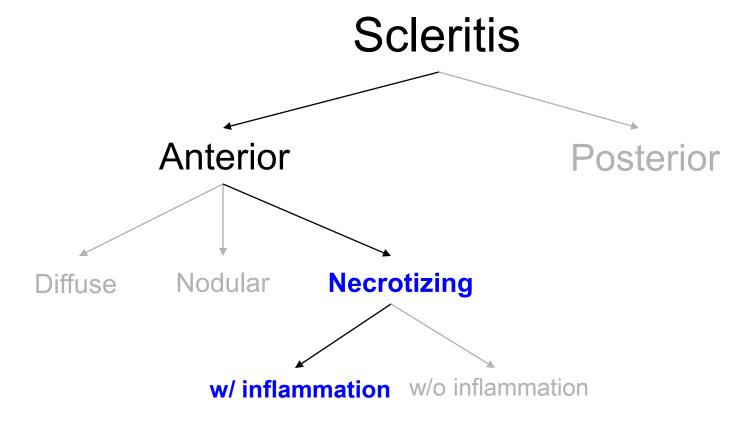






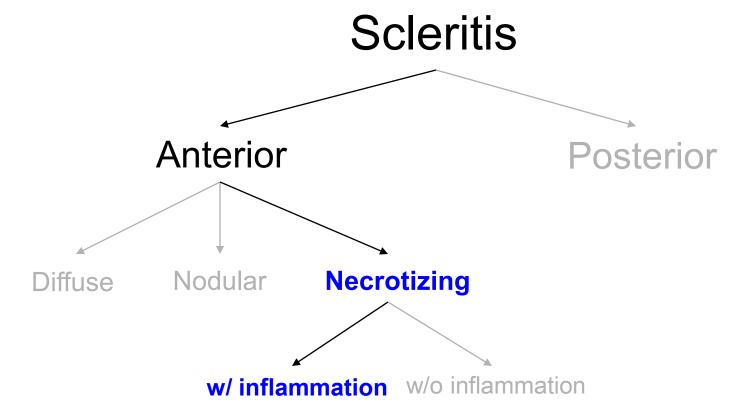






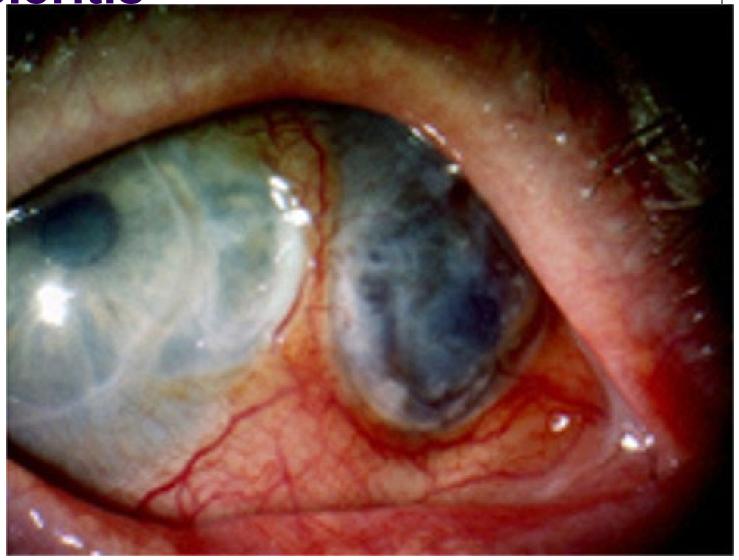
If a patient has a necrotizing scleritis w/ inflammation, it's a virtual lock that what sort of disease is the culprit?





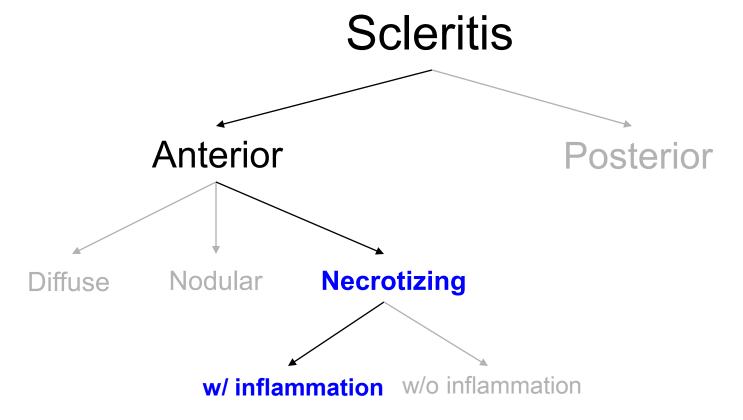
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A vasculitis



Necrotizing scleritis with inflammation



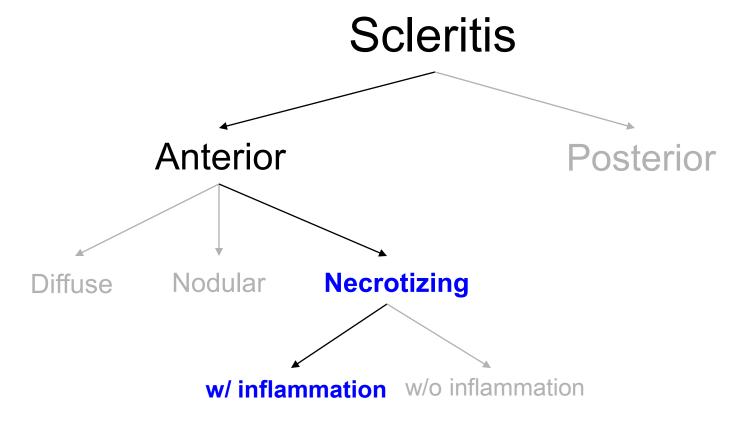


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Is the vasculitis always systemic?





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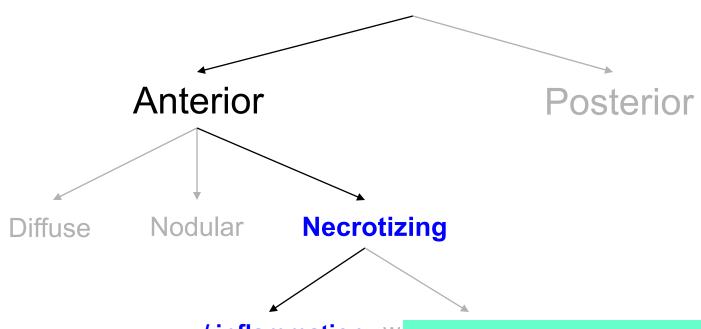
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Is the vasculitis always systemic?

No, but it certainly can be



Scleritis



w/ inflammation

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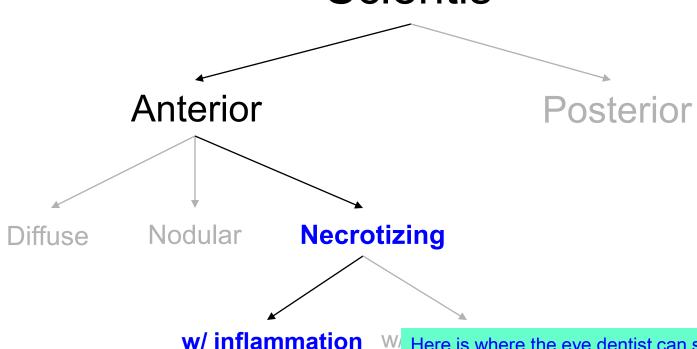
No, but it certainly can be

Here is where the eye dentist* can save someone's life. The discovery of an ocular vasculitic process should prompt a thorough investigation Into whether the ocular disease is a manifestation of a systemic process.

> *Eye dentist (slang) Derisive nickname for an ophthalmologist



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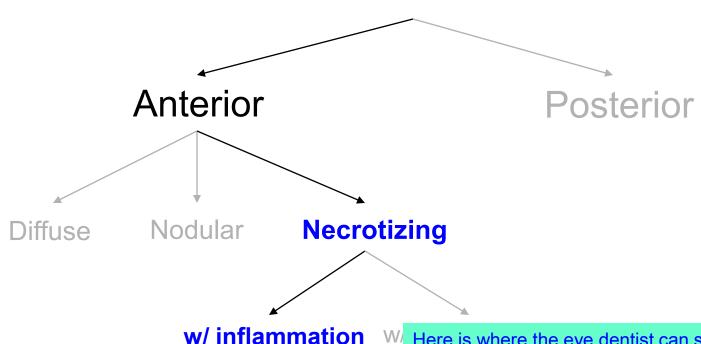
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Why is this so important?



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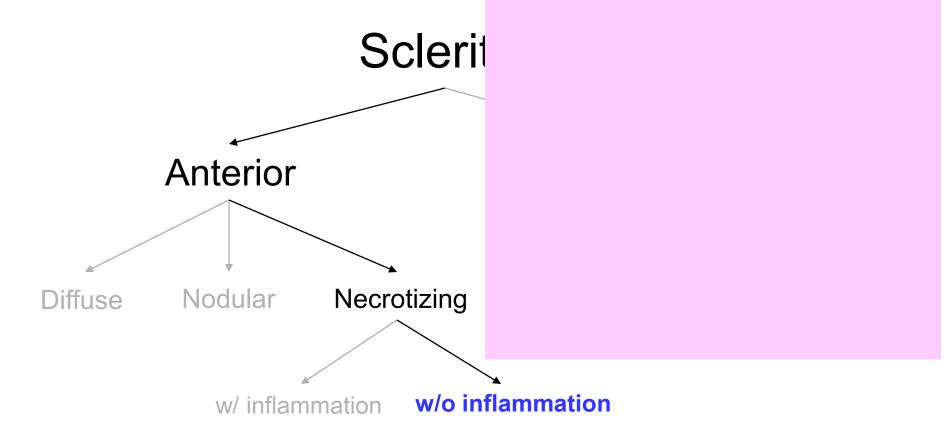
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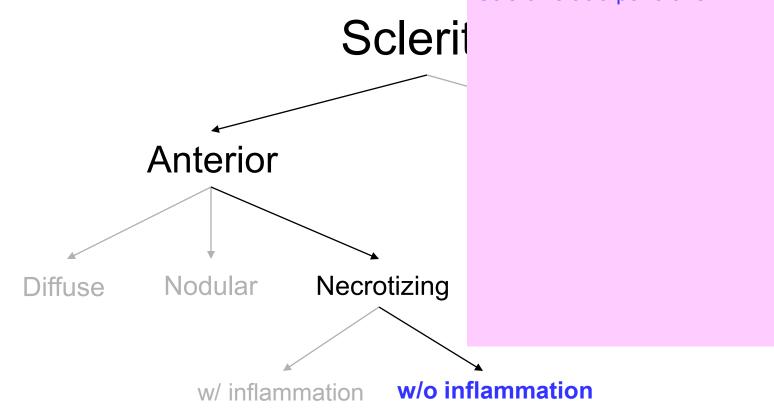
Why is this so important?

The presence of ocular vasculitis in systemic dz portends a dismal prognosis for the pt. Five-year mortality for such pts approaches **50%!**

By what other name is necrotizing scleritis w/o inflammation known?

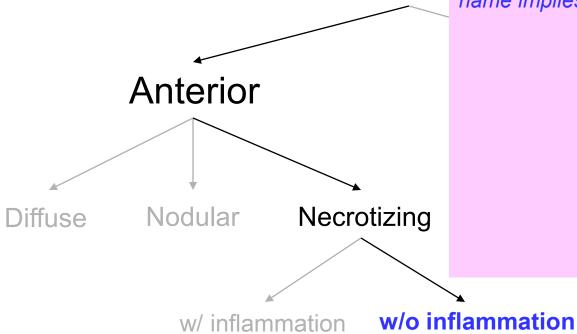


By what other name is necrotizing scleritis w/o inflammation known?
Scleromalacia perforans



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Scient Is it in fact a noninflammatory disease, as the name implies?

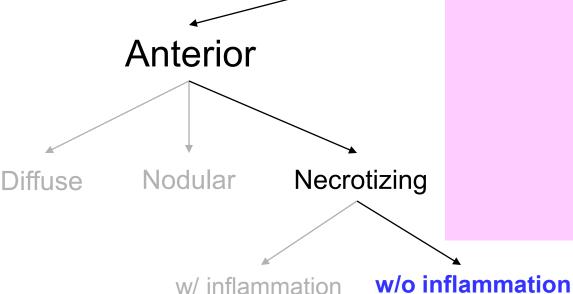


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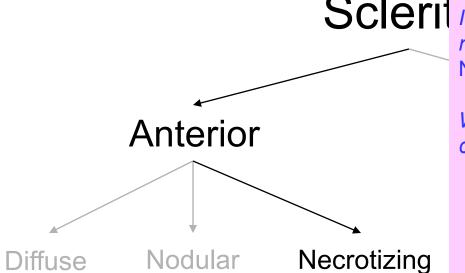


Sceri Is it in fact a noninflammatory disease, as the name implies?

No; inflammation is present on biopsy



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w/ inflammation

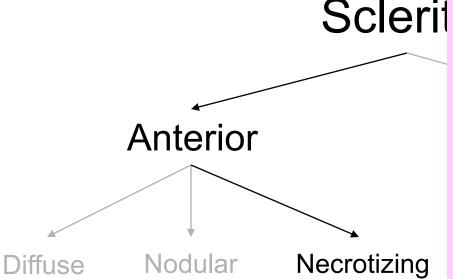
Scieri Is it in fact a noninflammatory disease, as the name implies?

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With what systemic disease is it most commonly associated?

w/o inflammation

By what other name is necrotizing scleritis w/o inflammation known?
Scleromalacia perforans



w/ inflammation

Scieri Is it in fact a noninflammatory disease, as the name implies?

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With what systemic disease is it most commonly associated?
Rheumatoid arthritis

w/o inflammation

By what other name is necrotizing scleritis w/o

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No; inflammation is present on biopsy

With what systemic disease is it most

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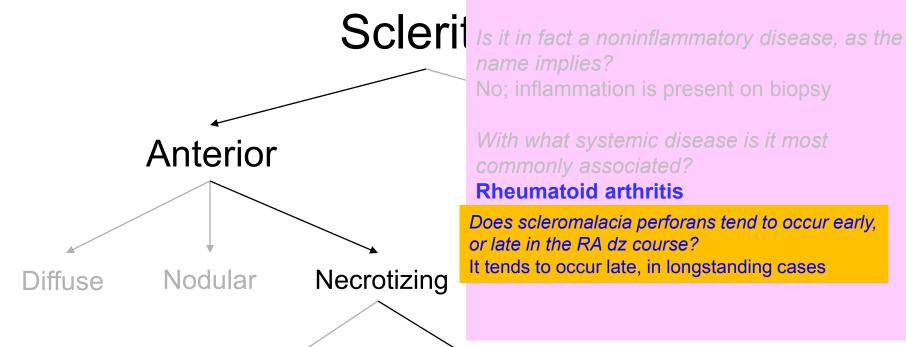
w/o inflammation

Does scleromalacia perforans tend to occur early, or late in the RA dz course?

Anterior Nodular Necrotizing Diffuse

w/ inflammation

By what other name is necrotizing scleritis w/o inflammation known?
Scleromalacia perforans



w/ inflammation

w/o inflammation

By what other name is necrotizing scleritis w/o inflammation known? Scleromalacia perforans

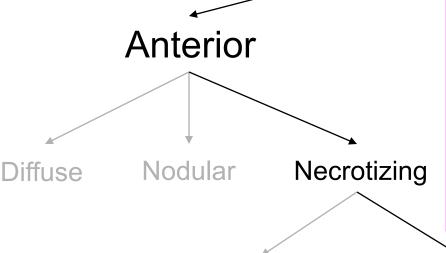
w/o inflammation

Sceri Is it in fact a noninflammatory disease, as the name implies?

No; inflammation is present on biopsy

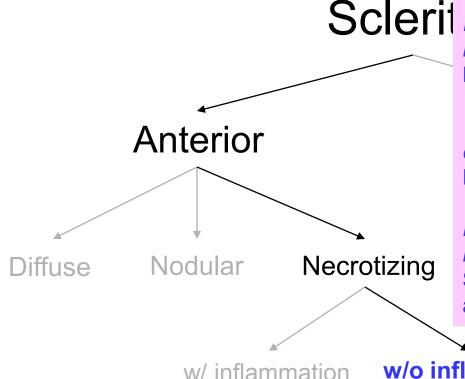
With what systemic disease is it most commonly associated? Rheumatoid arthritis

How does its presentation differ from that of its 'w/ inflammation' cousin?



w/ inflammation

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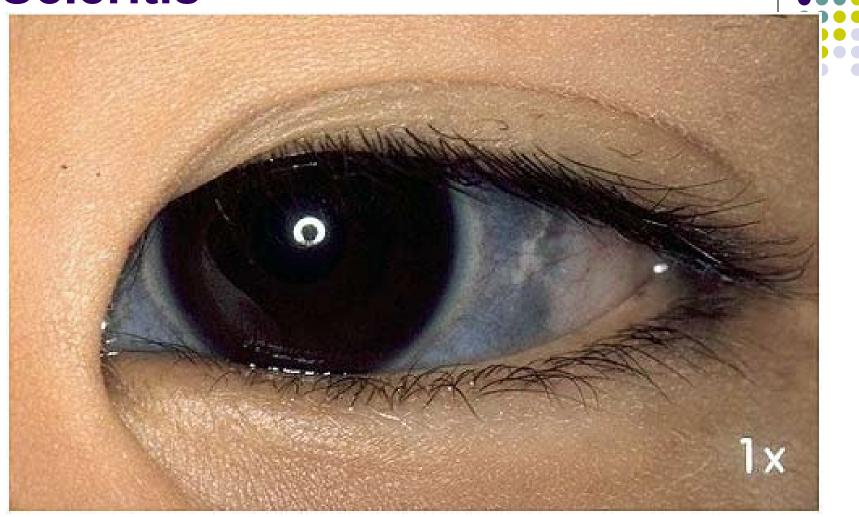
With what systemic disease is it most commonly associated?
Rheumatoid arthritis

How does its presentation differ from that of its 'w/ inflammation' cousin?
Scleromalacia perforans is typically painless, and the eye is not inflamed

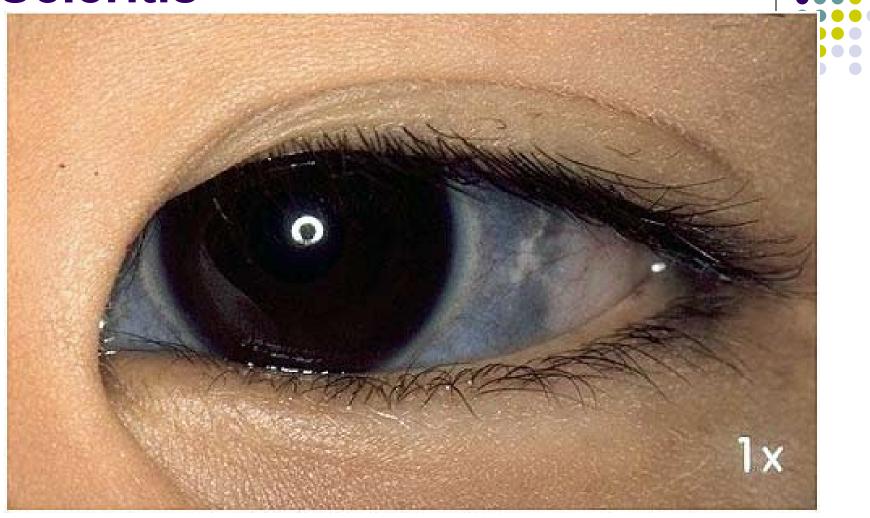
w/o inflammation



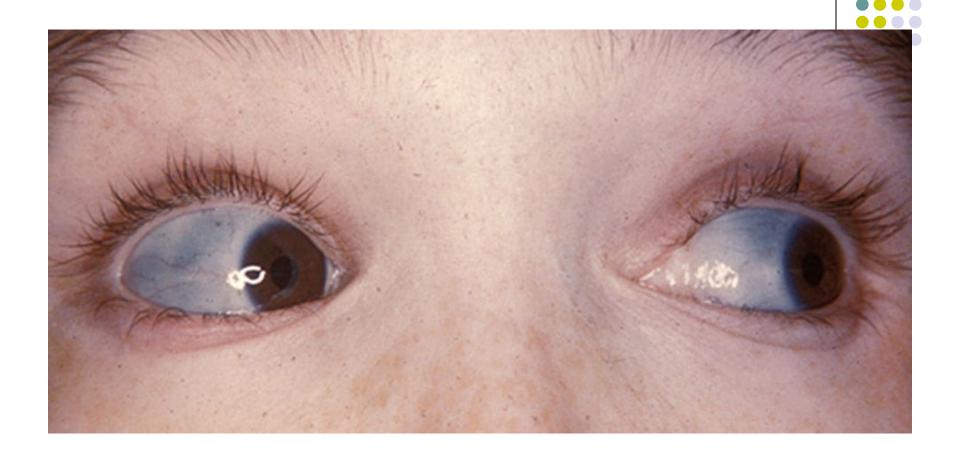




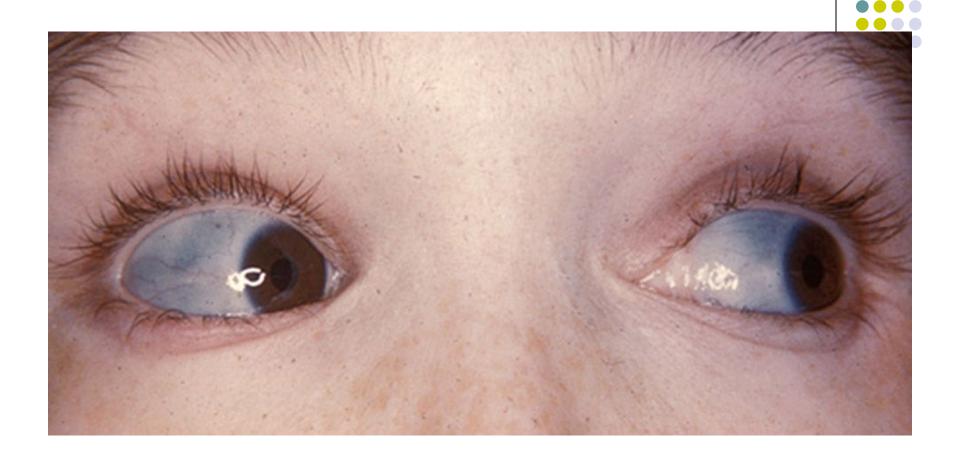
Is this scleromalacia perforans?



No--this is blue sclera in Ehlers-Danlos



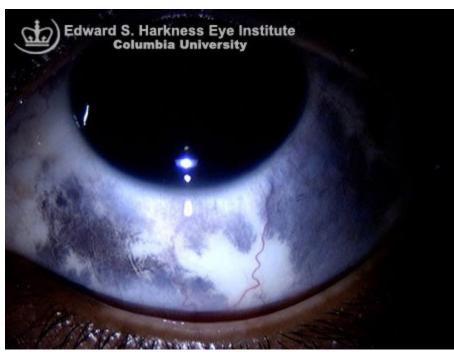
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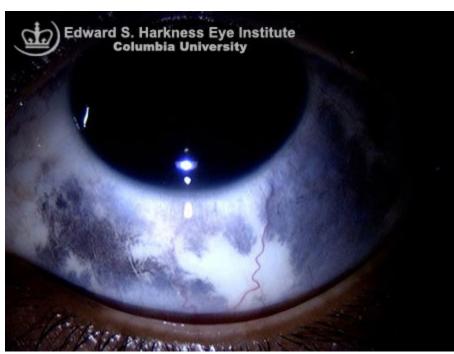




Is this scleromalacia perforans?







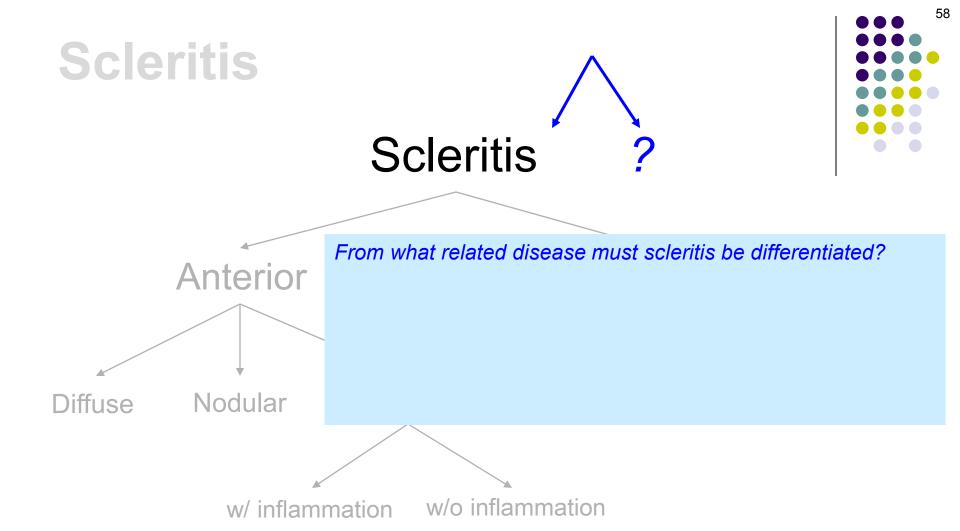
No--this is ocular melanocytosis

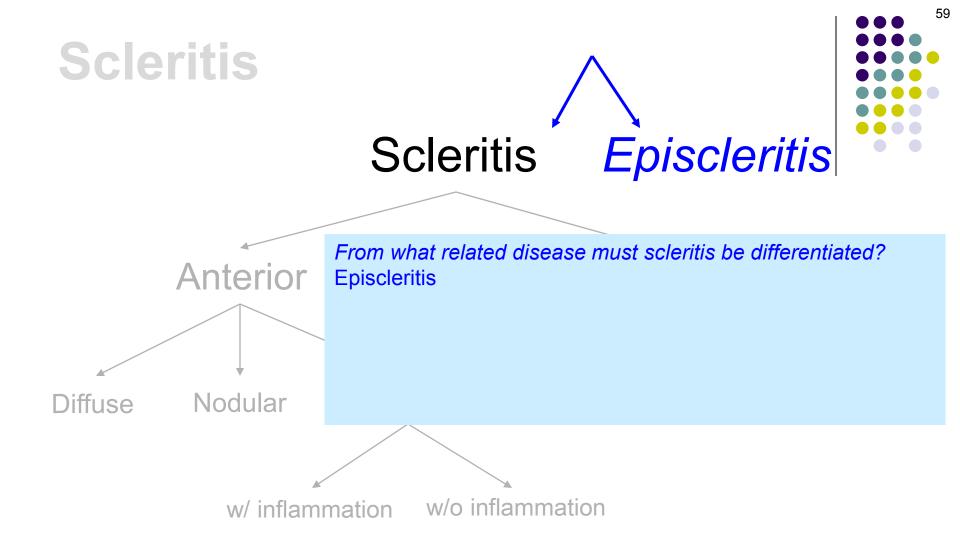


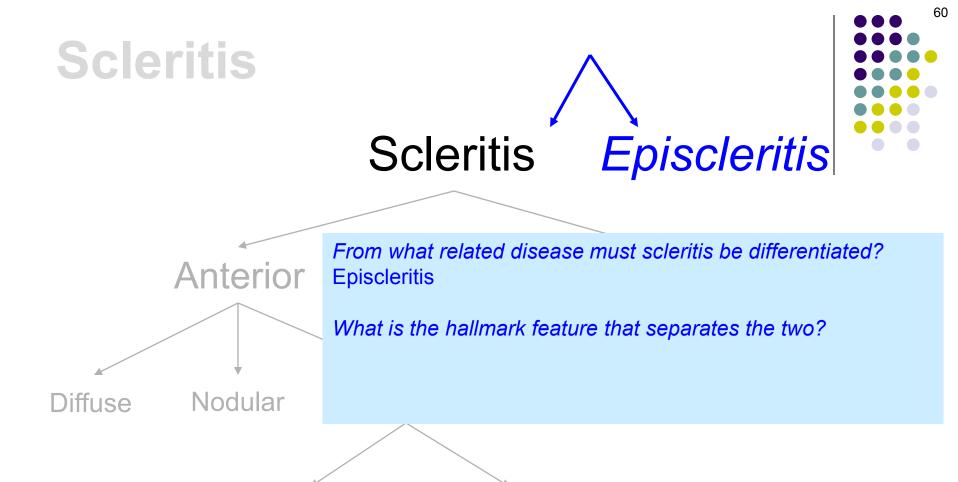
Is this scleromalacia perforans?



No--this is **oculodermal melanocytosis** (aka *Nevus of Ota*)

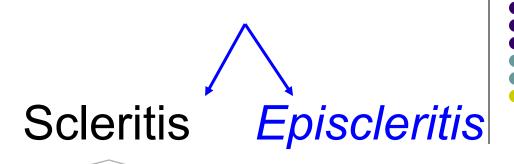




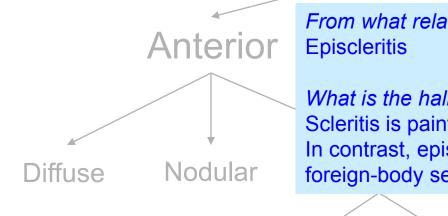


w/o inflammation

w/ inflammation



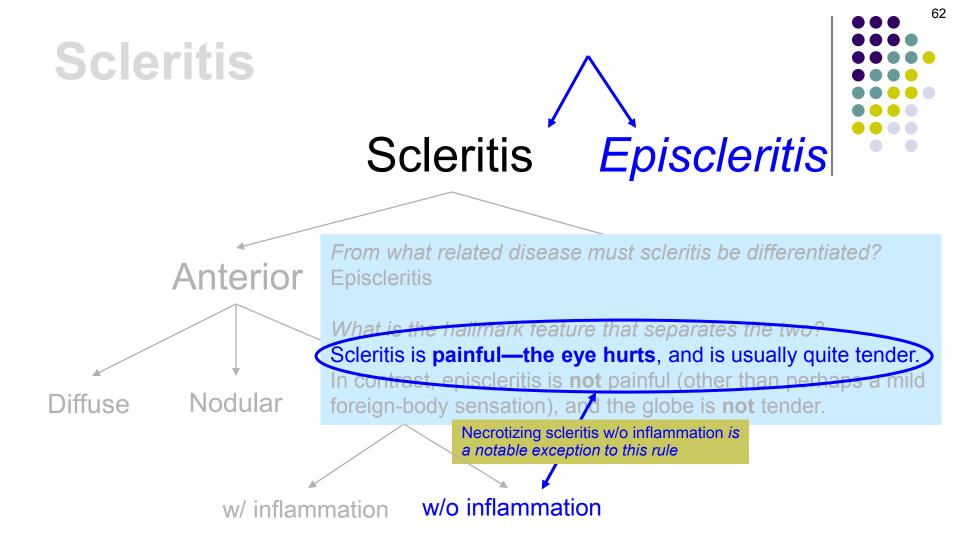
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From what related disease must scleritis be differentiated? Episcleritis

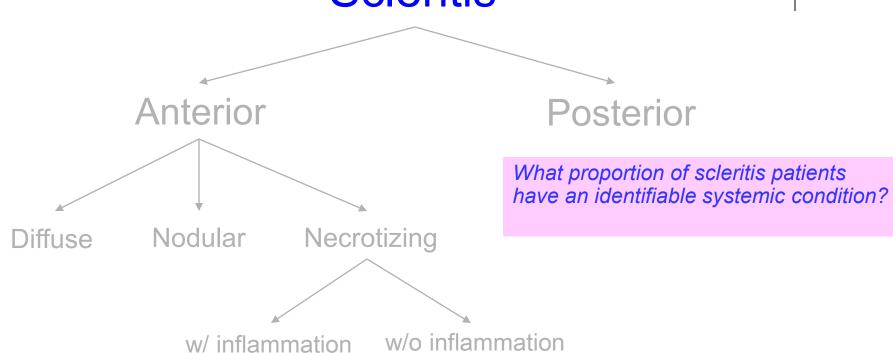
What is the hallmark feature that separates the two? Scleritis is painful—the eye hurts, and is usually quite tender. In contrast, episcleritis is **not** painful (other than perhaps a mild foreign-body sensation), and the globe is **not** tender.

w/ inflammation w/o inflammation



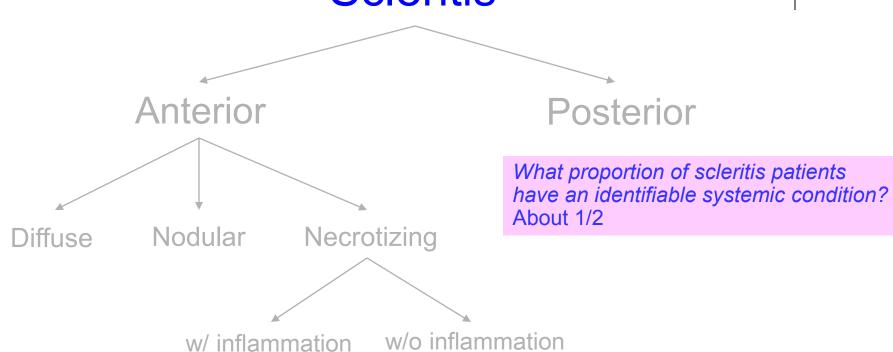


Scleritis





Scleritis

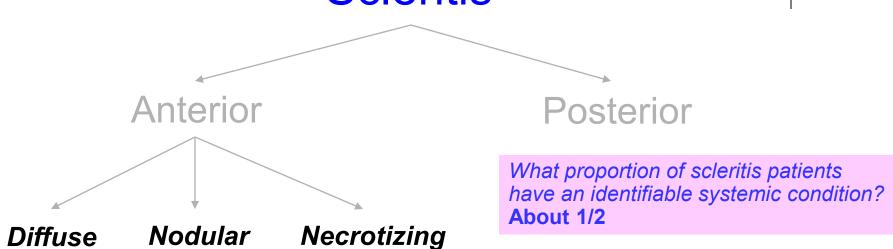


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Scleritis



More specifically, what proportion of Diffuse vs Nodular vs Necrotizing pts have an identifiable systemic condition?

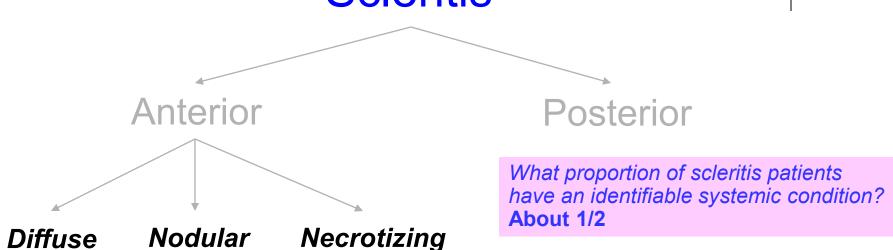
≈ ?

≈ 1/3

≈ 1/3





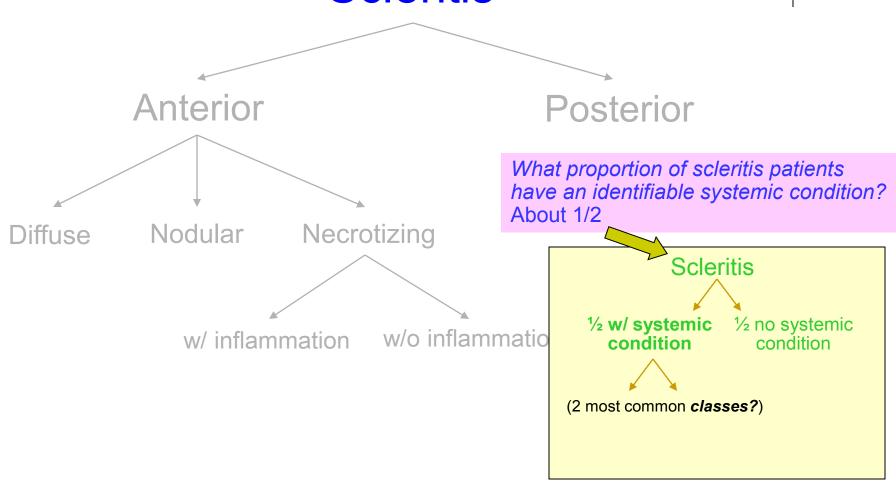


More specifically, what proportion of Diffuse vs Nodular vs Necrotizing pts have an identifiable systemic condition?
1/3, 1/3 and 2/3, respectively

≈ 2*!*3′

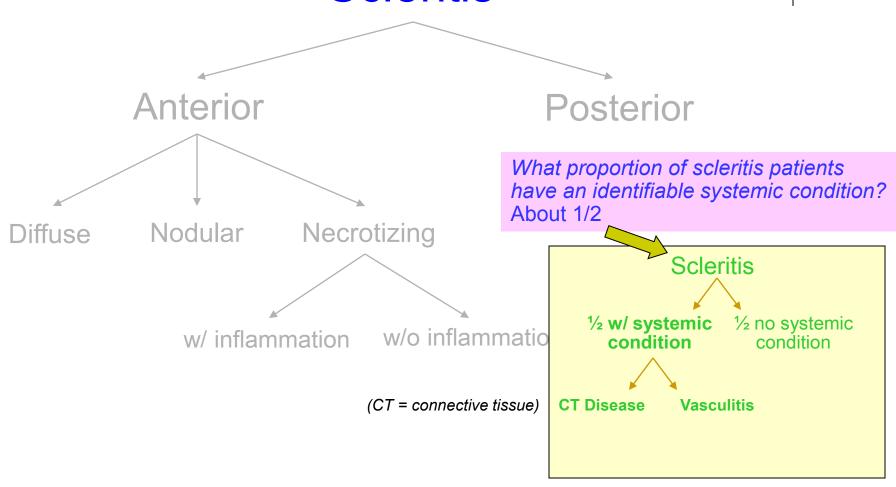


Scleritis

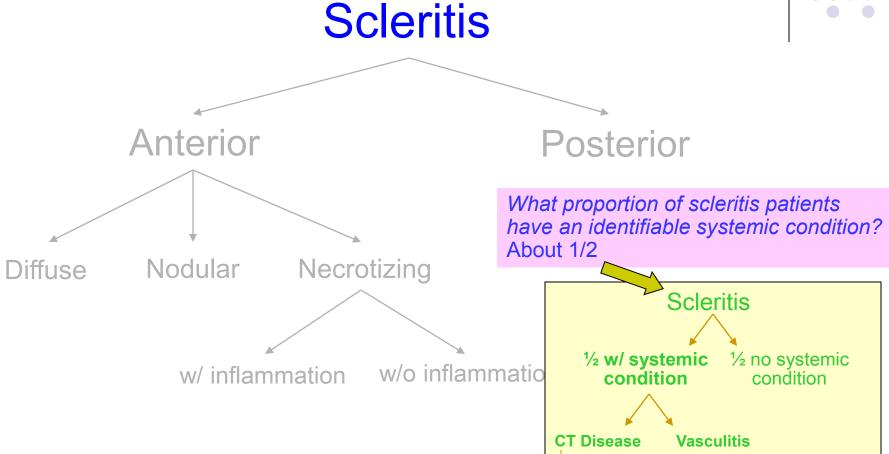




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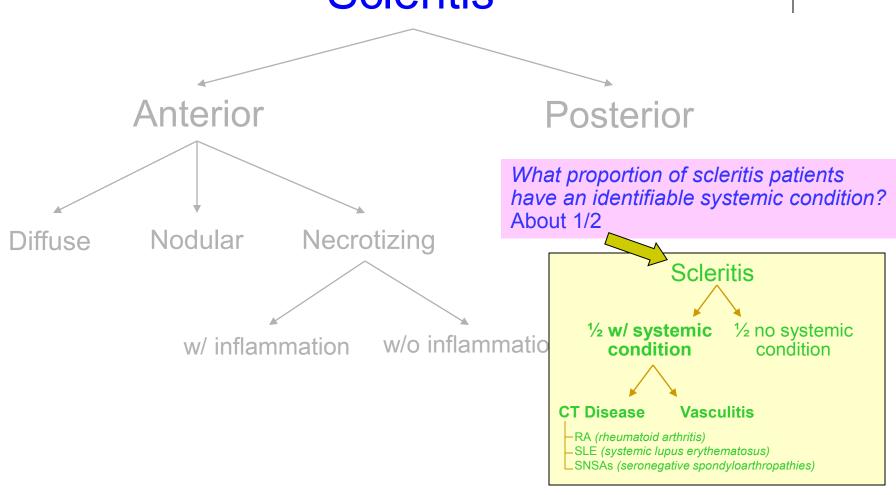




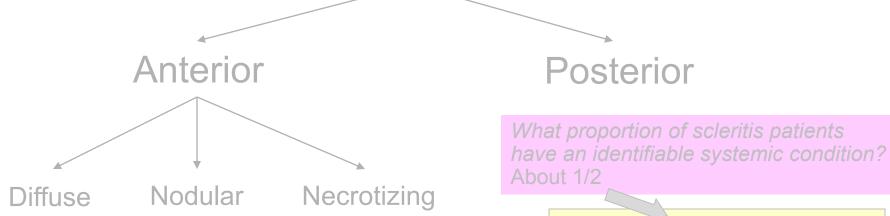
(3 most common CT diseases?)



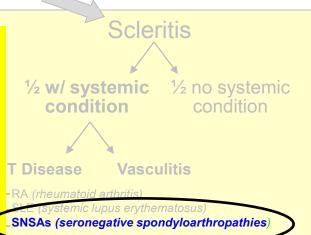
Scleritis



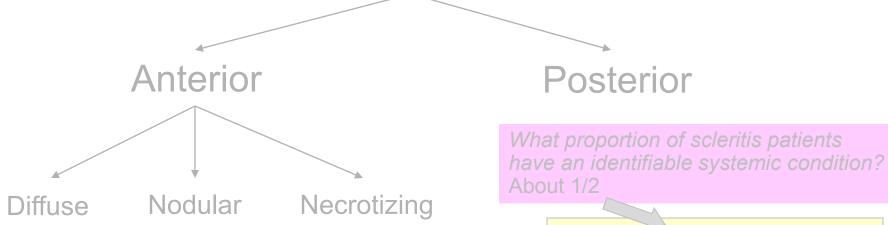




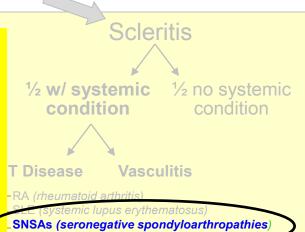
To what does the term seronegative spondyloarthropathies refer?





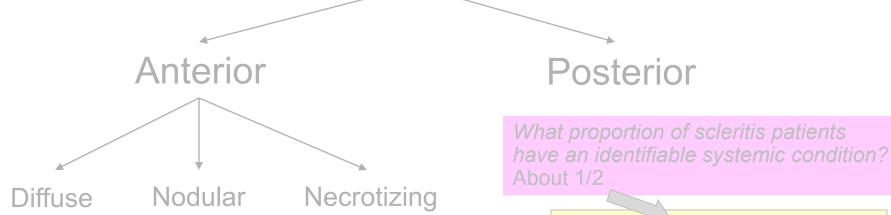


To what does the term seronegative spondyloarthropathies refer? It is an umbrella term for a group of related rheumatologic conditions



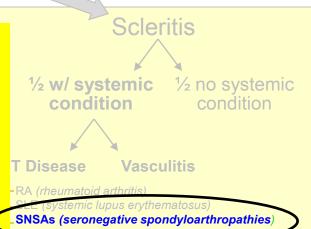


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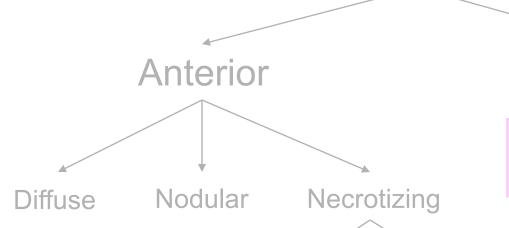
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To what does the word seronegative refer?





Scleritis



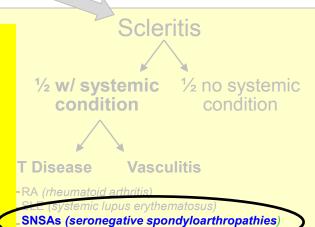
Posterior

What proportion of scleritis patients have an identifiable systemic condition? About 1/2

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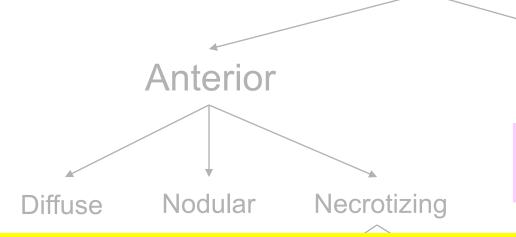
To what does the word seronegative refer?

To the fact that the rheumatoid factor test is negative in these conditions





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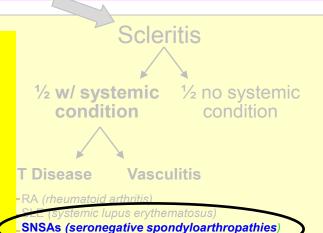
To the fact that the rheumatoid factor test is negative in these conditions

Name three common seronegative spondyloarthropathies.

--?

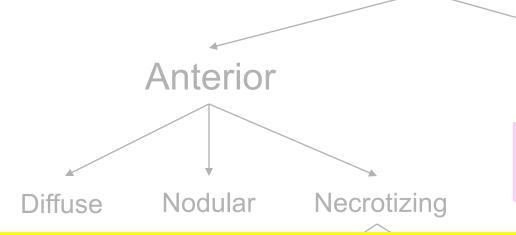
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Scleritis



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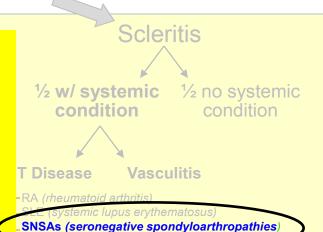
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To what does the word seronegative refer?

To the fact that the rheumatoid factor test is negative in these conditions

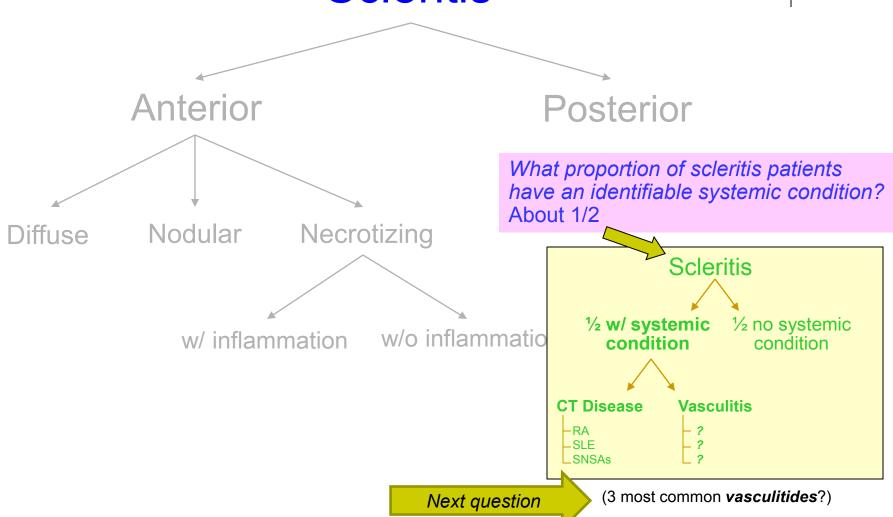
Name three common seronegative spondyloarthropathies.

- --Ankylosing spondylitis
- --Reactive arthritis
- --Psoriatic arthritis

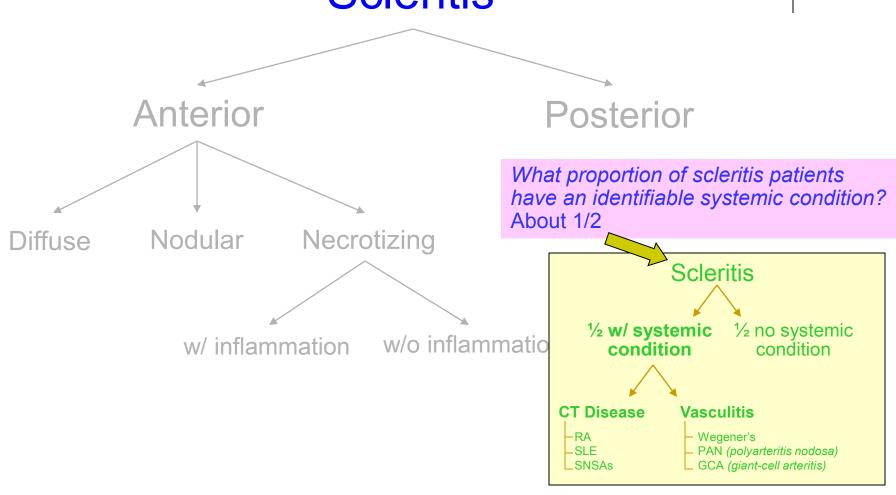






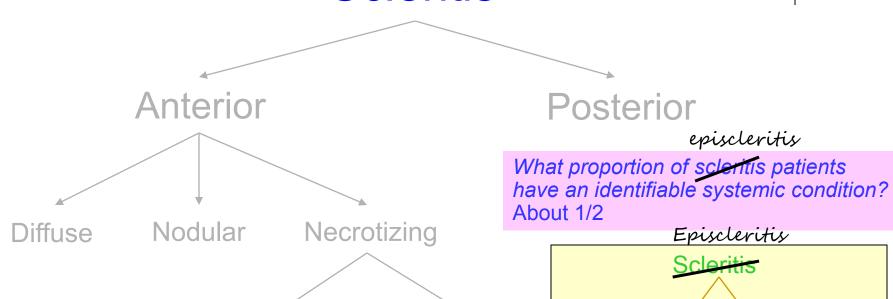




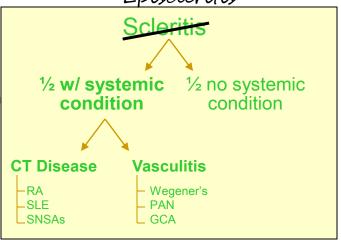




Scleritis

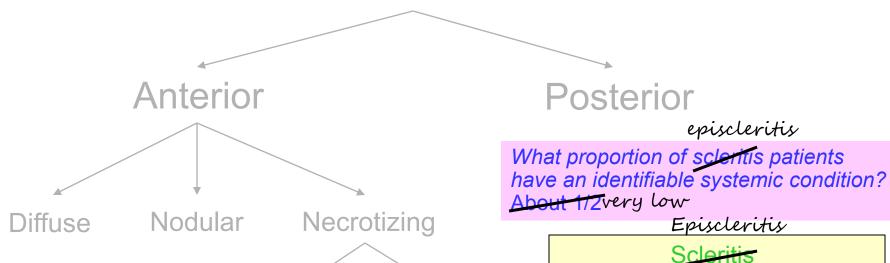


Which of these disease are associated with episcleritis?

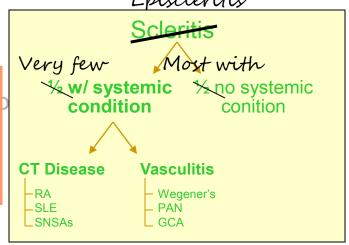




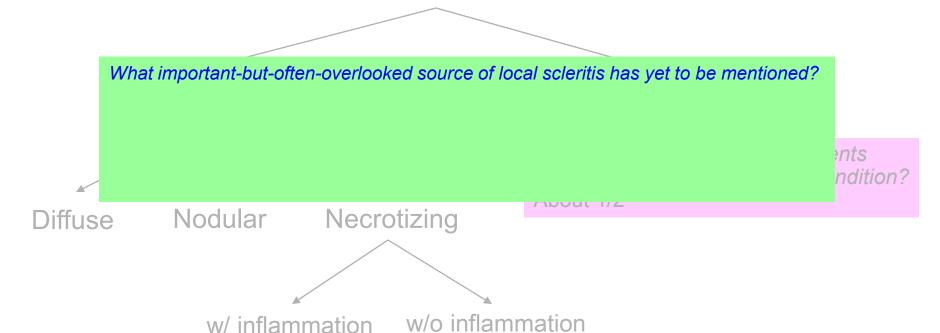
Scleritis



Which of these disease are associated with **epi**scleritis? All of them! The DDx for episcleritis is the same as that for scleritis. The difference between these conditions concerns disease probability--the likelihood of an underlying condition is far lower in episcleritis.









Scleritis

What important-but-often-overlooked source of local scleritis has yet to be mentioned?
Infectious scleritis

2nts
ndition?

Diffuse

Nodular Necrotizing



Scleritis

What important-but-often-overlooked source of local scleritis has yet to be mentioned? **Infectious** scleritis

A review by Foster and colleagues revealed what infection rate among scleritis pts?

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Scleritis

What important-but-often-overlooked source of local scleritis has yet to be mentioned? **Infectious** scleritis

A review by Foster and colleagues revealed what infection rate among scleritis pts? About 7%. Make sure you keep infectious processes in the back of your mind when working up scleritis patients!

ADOUL 1/2

ents ndition?

Diffuse

Nodular

Necrotizing



Scleritis

What is the most common event leading to the development of infectious scleritis?

A review by Foster and conduct About 7%. Make sure you working up scleritis patier

Diffuse Nodular

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Scleritis

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A review by Foster and co

w/ inflammation



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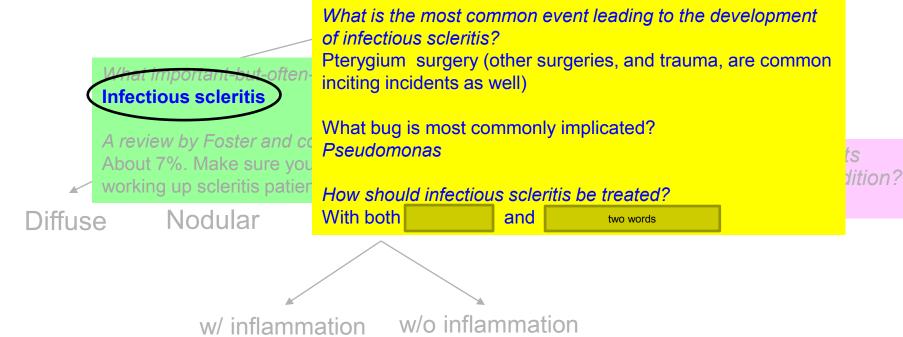
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With both antibiotics and surgical debridement

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Infectious scleritis

Why surgical debridement? That is, why aren't abx enough?



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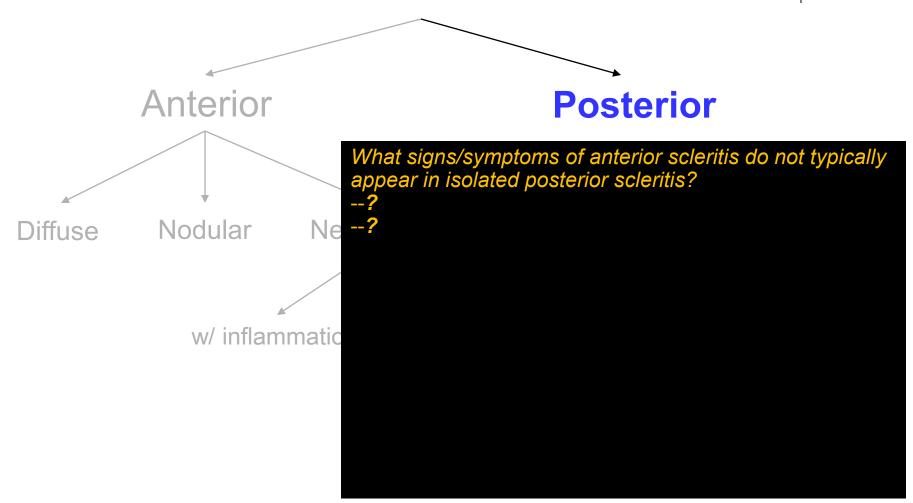
Infectious scleritis

How should infectious scleritis With both antibiotics an surgical debridement

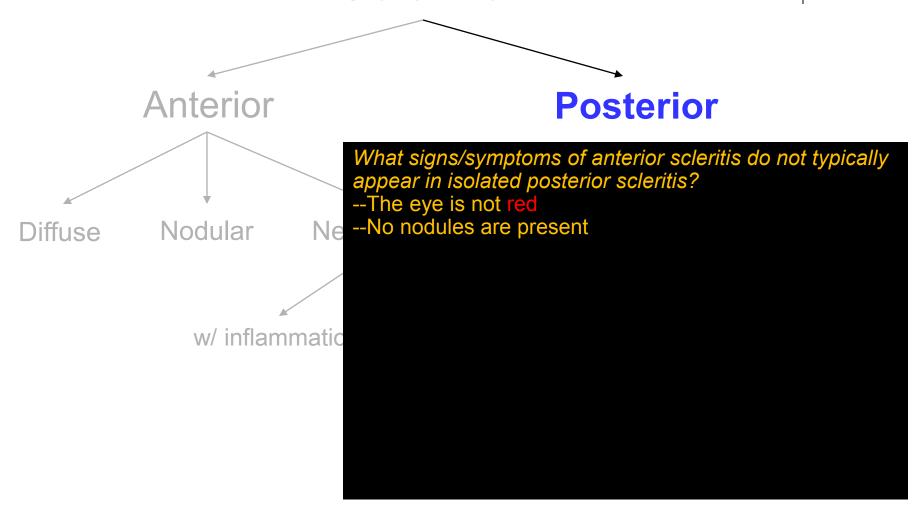
w/ inflammation

Why surgical debridement? That is, why aren't abx enough? The sclera is essentially avascular, so it is difficult to achieve adequate abx concentrations within it

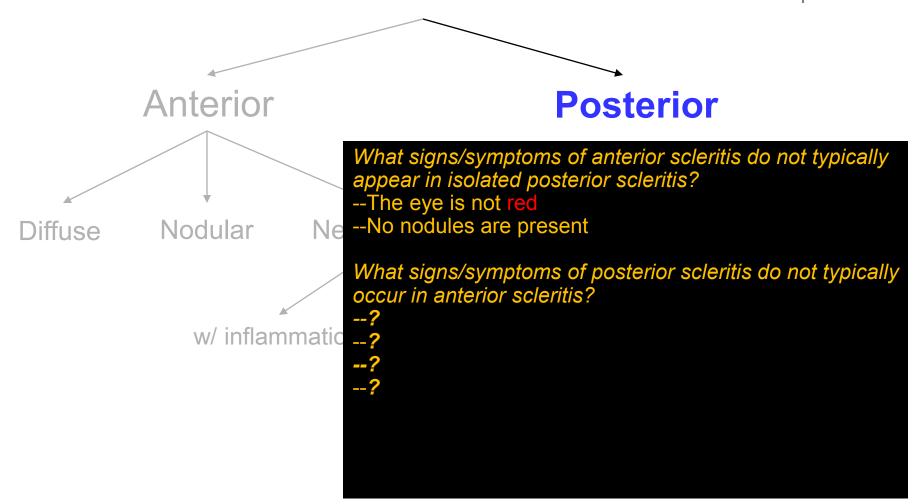




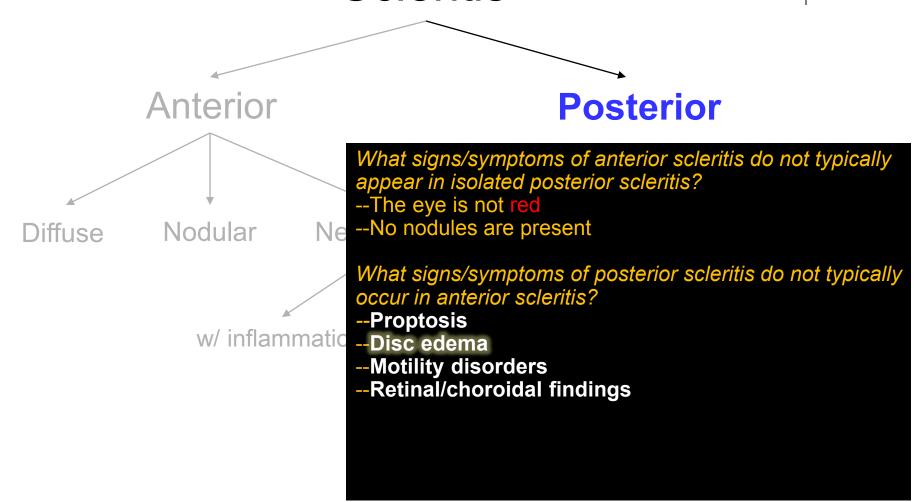




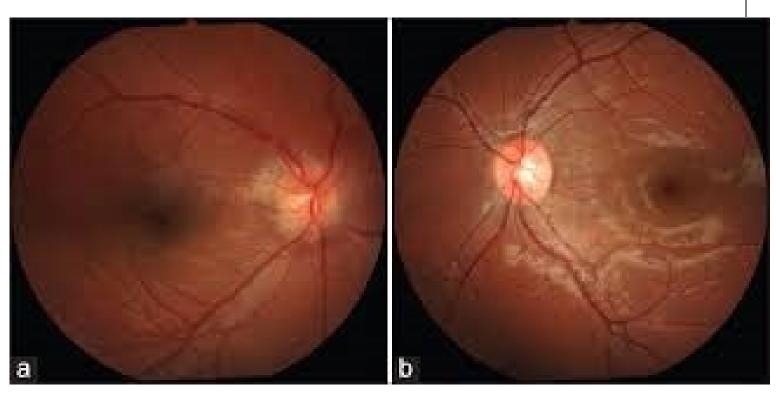




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Posterior scleritis OD: Optic nerve edema

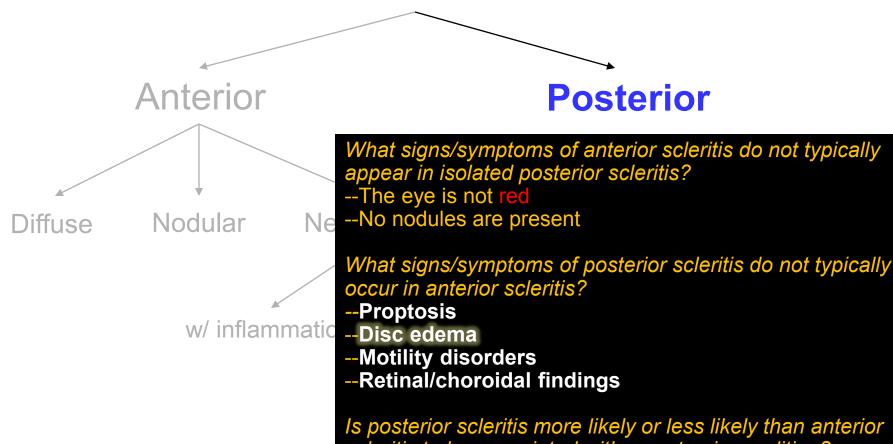




Posterior scleritis: Scleral thickening

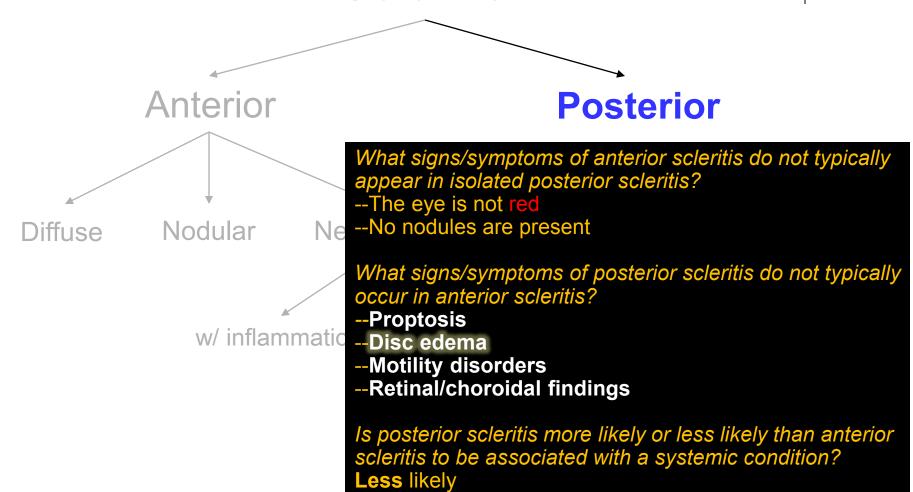


Scleritis



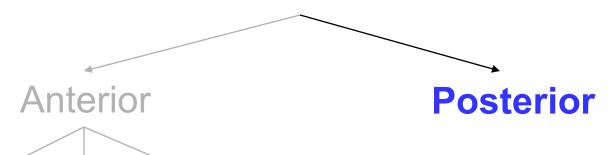
scleritis to be associated with a systemic condition?











What three characteristics of the pain are a tipoff that you're dealing with posterior scleritis?

--?

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--?

w/ inflammation

--? --?



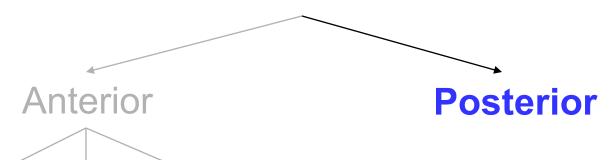




w/ inflammation







What three characteristics of the pain are a tipoff that you're dealing with posterior scleritis?
--The pain radiates to the **brow**

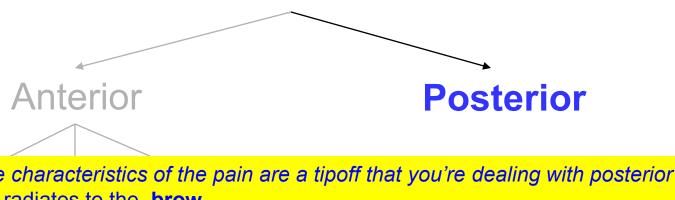
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w/ inflammation w/o



Scleritis



What three characteristics of the pain are a tipoff that you're dealing with posterior scleritis?

two words

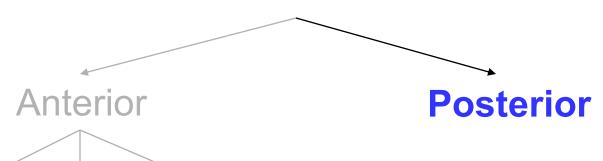
- --The pain radiates to the **brow**
- -- The pain is aggravated by

--?

w/ inflammation







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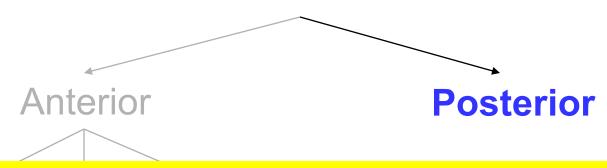
- --The pain radiates to the **brow**
- --The pain is aggravated by **eye movements**

--?

w/ inflammation w/o i







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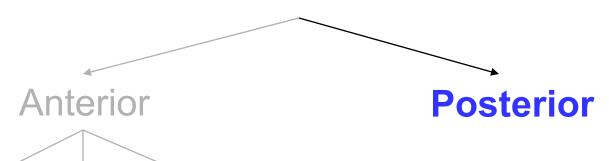
- --The pain radiates to the **brow**
- -- The pain is aggravated by **eye movements**
- --The pain

five words

w/ inflammation



Scleritis

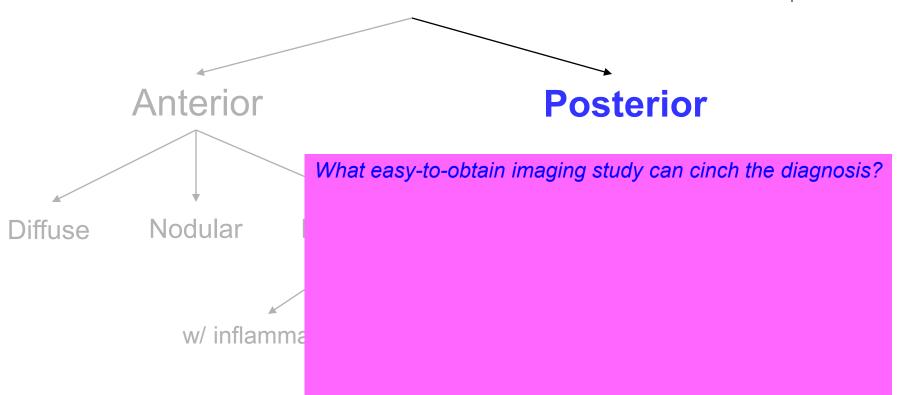


What three characteristics of the pain are a tipoff that you're dealing with posterior scleritis?

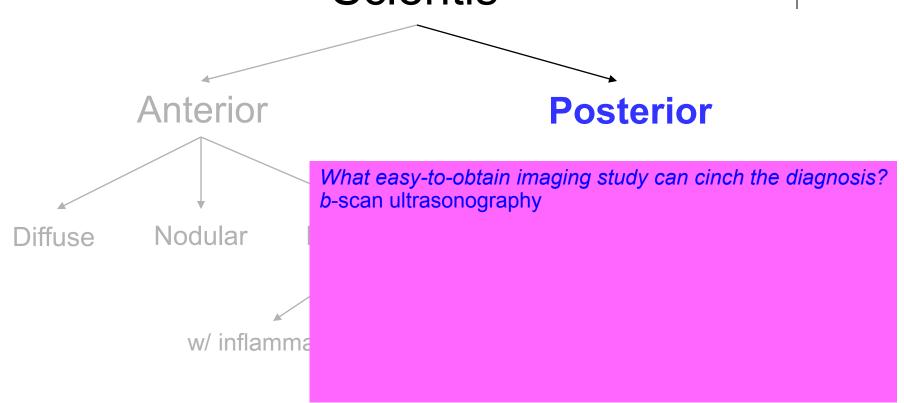
- --The pain radiates to the **brow**
- -- The pain is aggravated by **eye movements**
- --The pain awakens the pt at night



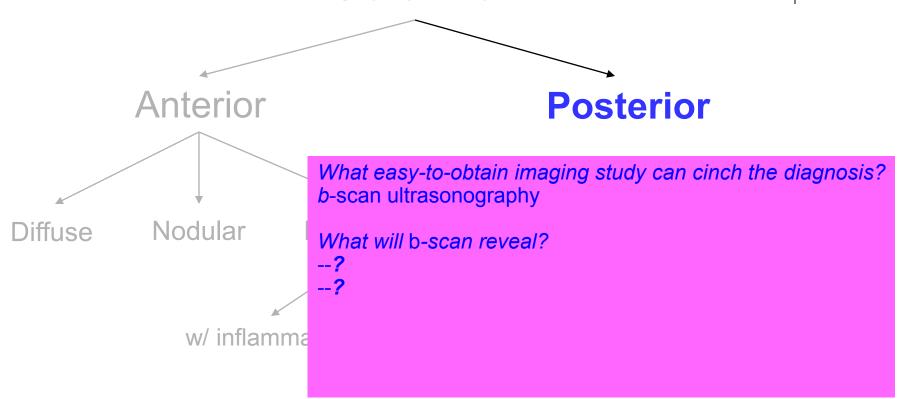






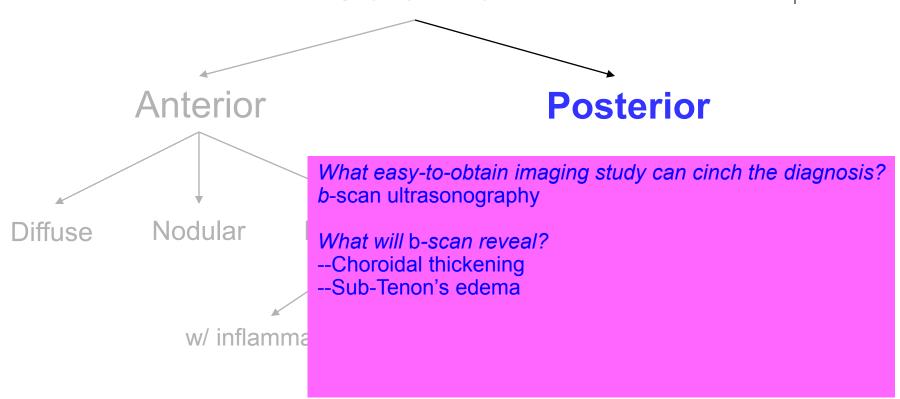










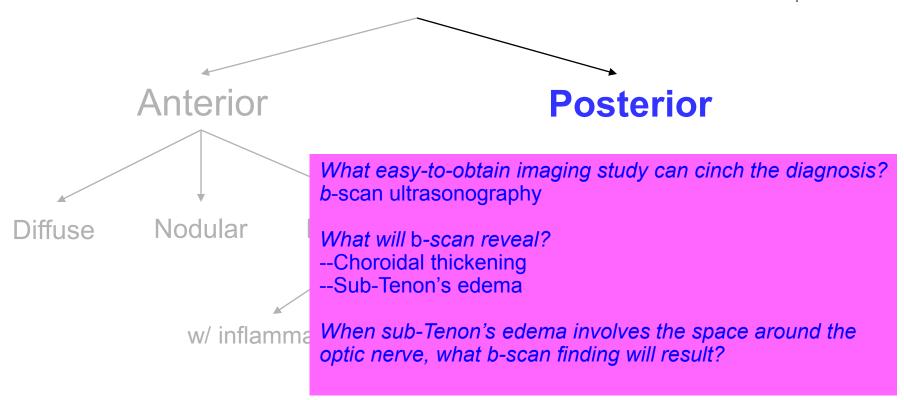




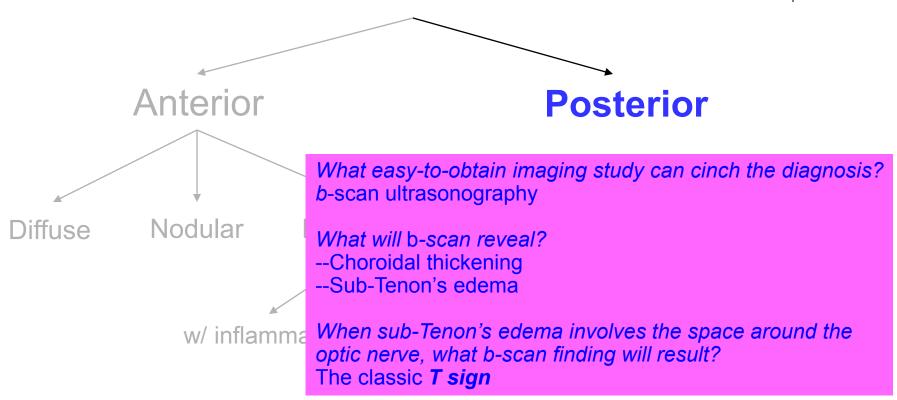


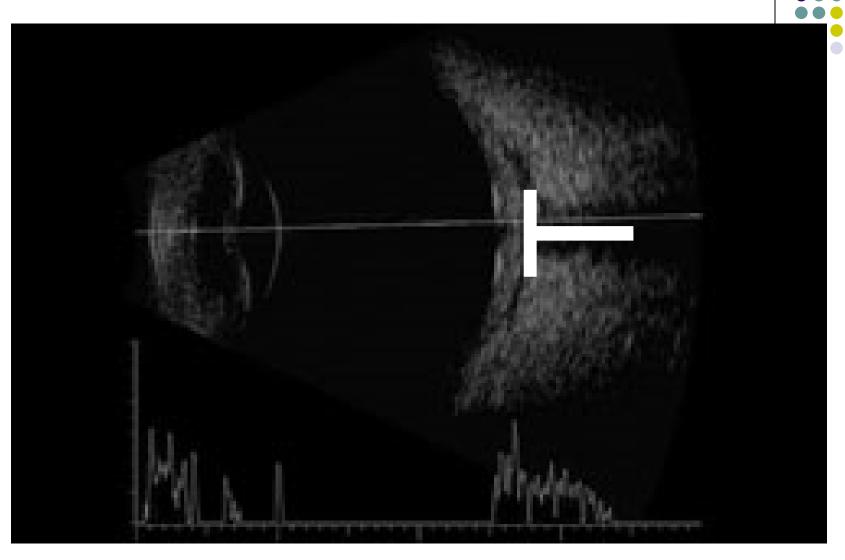
Posterior scleritis: Sub-Tenon's edema









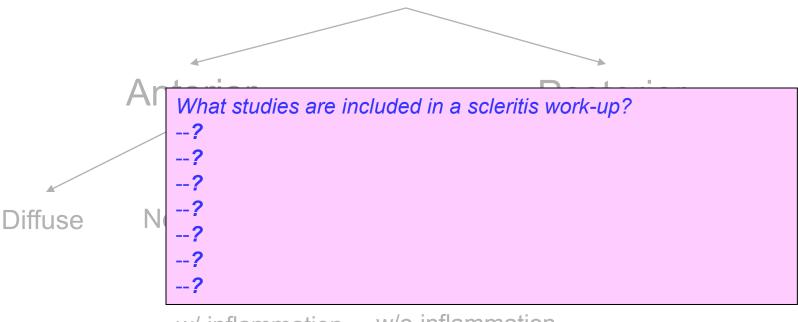


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Posterior scleritis: T-sign

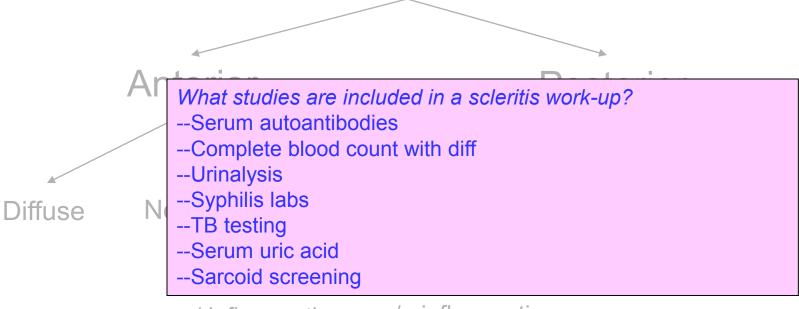


Scleritis



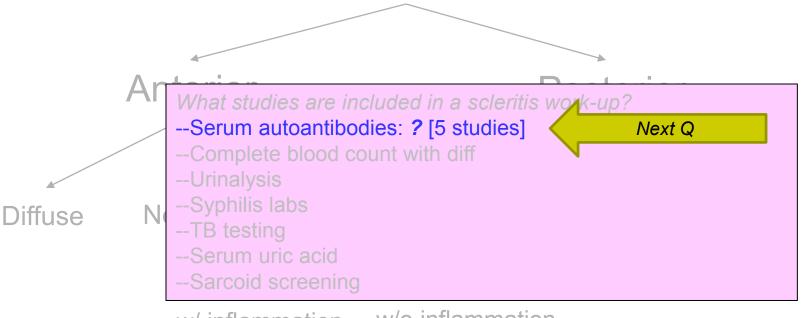


Scleritis



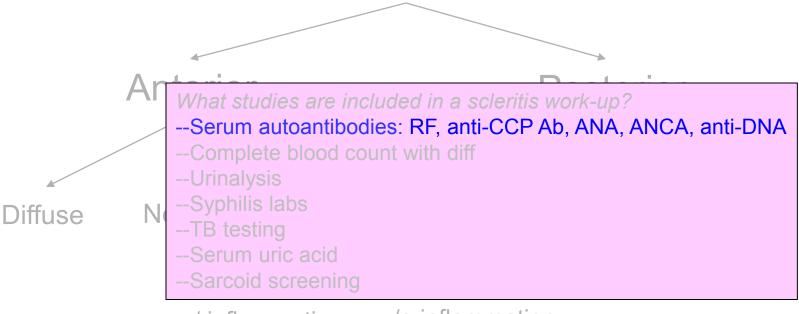


Scleritis

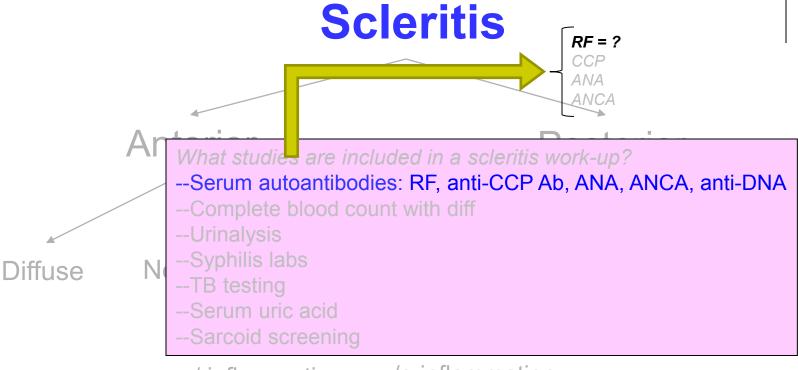




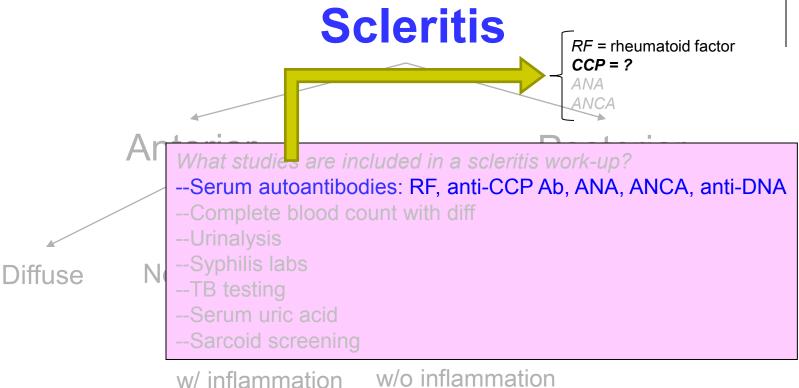
Scleritis

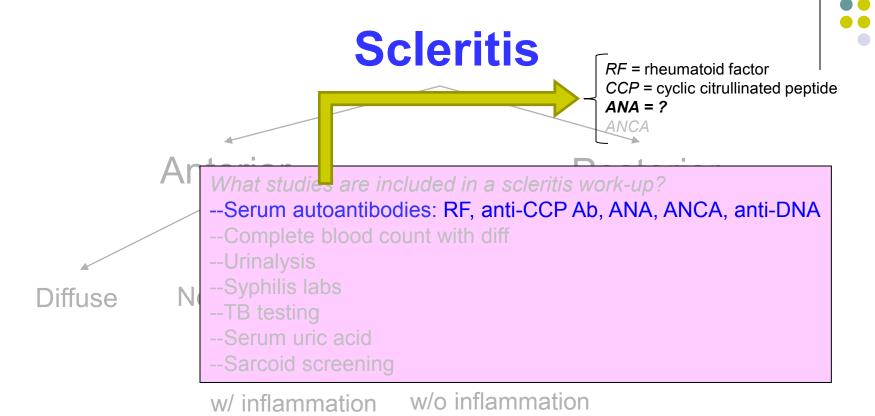




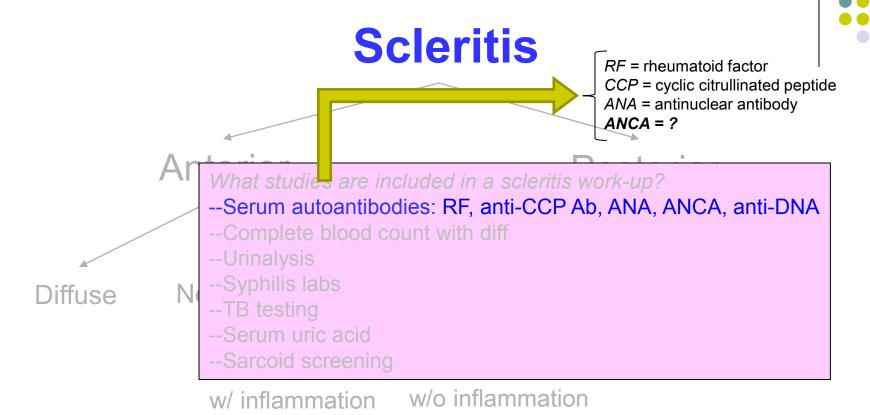




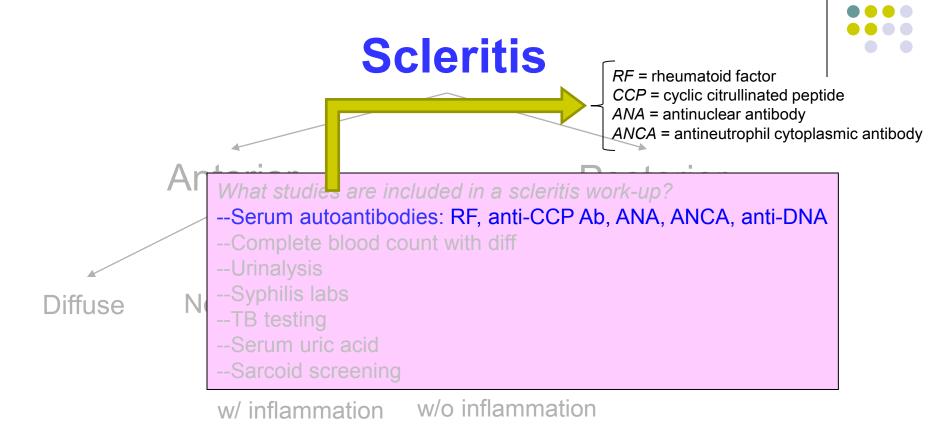




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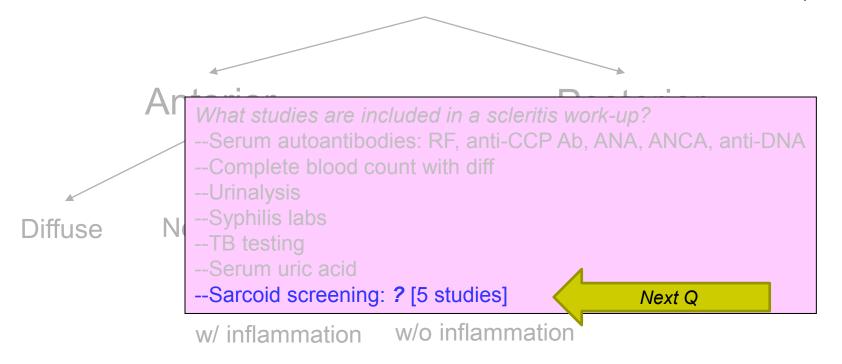


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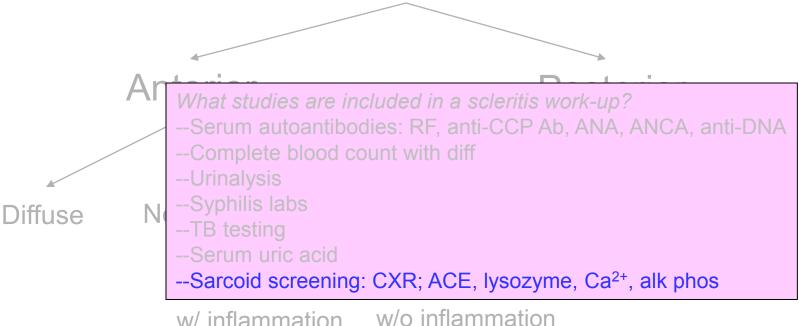
126







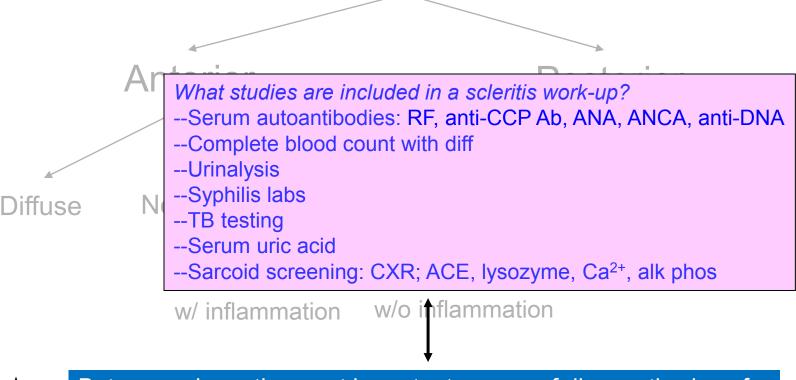
Scleritis



w/ inflammation



Scleritis



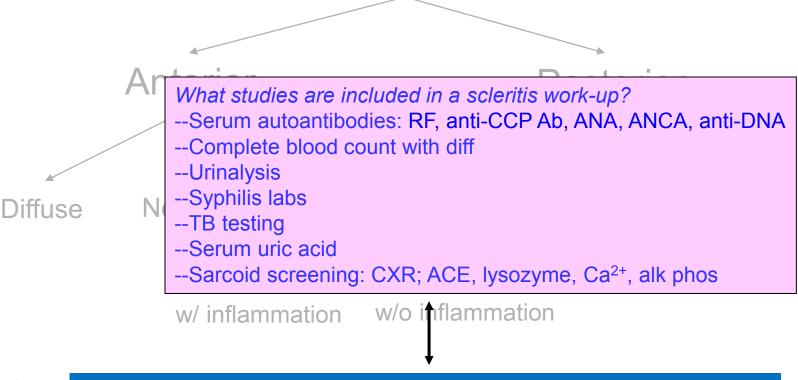


But remember—the most important source of diagnostic clues for any sort of ocular inflammation (scleritis, uveitis, PUK, etc) is a very careful and thorough





Scleritis

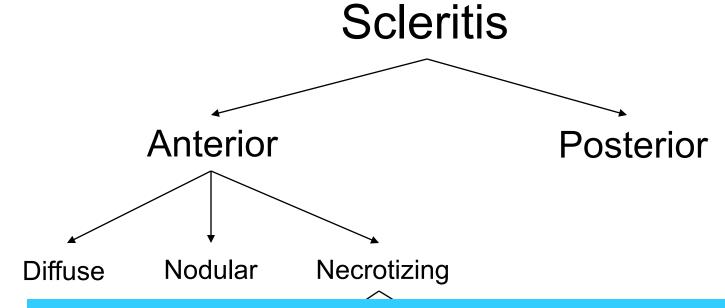




But remember—the most important source of diagnostic clues for any sort of ocular inflammation (scleritis, uveitis, PUK, etc) is a very careful and thorough **review of systems**.

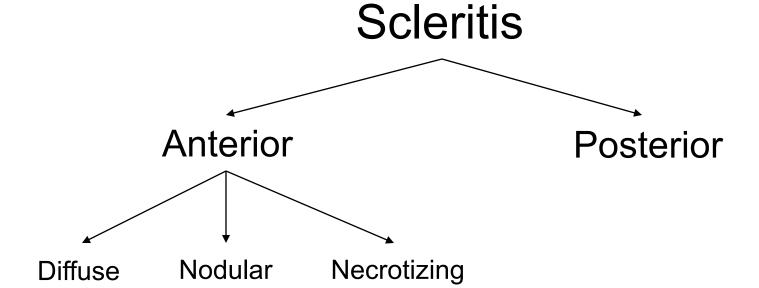






How is scleritis treated?

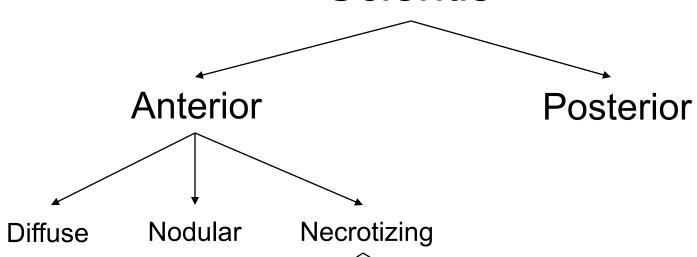




How is scleritis treated? Systemically



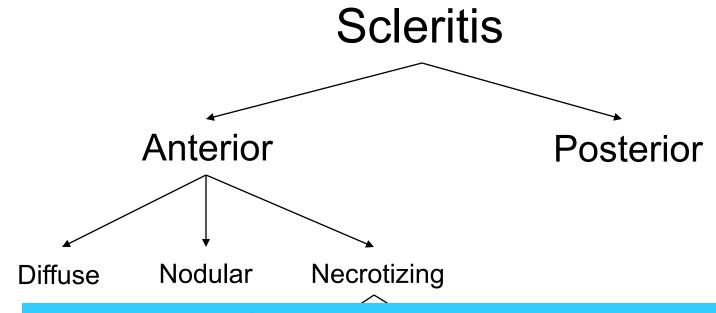




How is scleritis treated? Systemically

With what?



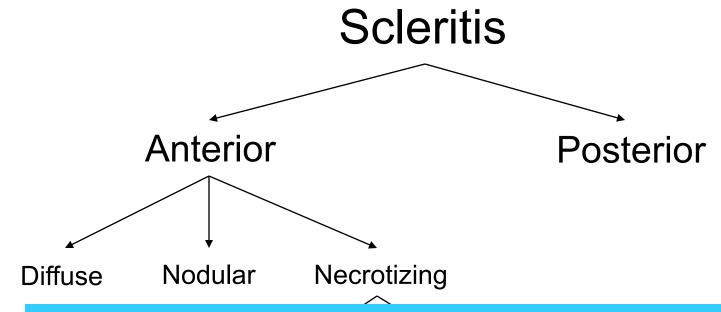


How is scleritis treated? Systemically

With what?

Diffuse scleritis might respond to PO NSAIDs—try these first. For the others, PO steroids are usually the first-line med. More powerful immunosuppression is frequently required.





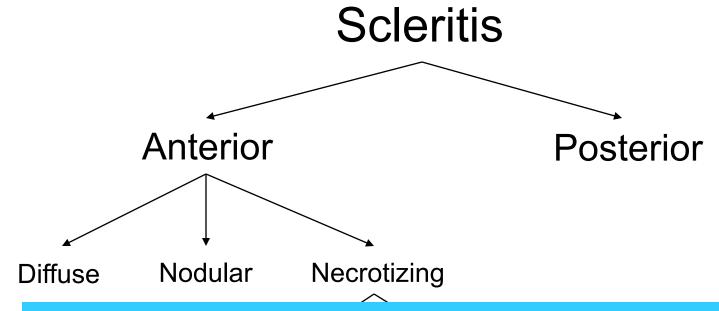
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What about depot steroids?





How is scleritis treated? Systemically

With what?

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What about depot steroids?

Long considered contraindicated, subconjunctival depot steroids have gained wide acceptance as a treatment for scleritis