

This article follows on from *Beyond the skin* on page 3, which explored how psoriasis can affect joints, the heart, and other organs through widespread inflammation. Here, we look at another part of the body that can be affected, the eyes. Psoriatic eye involvement may be less recognised, but awareness can make a vital difference in protecting long-term vision and overall health.

When inflammation reaches the eyes

Psoriatic disease begins with inflammation, and that same process can sometimes affect the eyes. The most common eye condition linked to psoriasis and psoriatic arthritis is uveitis, an inflammation inside the eye that can cause pain, light sensitivity, and blurred vision.

The uvea is the middle layer of the eye, made up of the iris (the coloured part), the ciliary body, and the choroid. Inflammation here is called uveitis, and it may involve:

- the front of the eye (anterior uveitis)
- the middle section (intermediate uveitis)
- the back part (posterior uveitis), or, more rarely,
- the whole of the uvea (panuveitis).

Anterior uveitis is the type most often seen with psoriatic disease. Symptoms usually



appear suddenly and may include red or painful eyes, blurred or hazy vision, tiny moving spots or threads called floaters, and sensitivity to light. If left untreated, inflammation can damage eye structures and cause long-term vision problems.

Why can psoriatic inflammation affect the eyes?

Psoriasis and psoriatic arthritis are systemic inflammatory conditions, meaning the inflammation can reach well beyond skin or joints. The immune system becomes overactive, sending signals that mistakenly inflame healthy tissues.

Research shows that people with psoriasis are more likely to develop uveitis than the general population. Around 2 in every 100 people with psoriasis may experience it at some point, and the risk is higher in those who also have psoriatic arthritis.

Uveitis linked to psoriatic disease can affect one or both eyes. It may last for weeks or months and sometimes becomes chronic, recurring from time to time. It can even occur years after the first signs of psoriasis.

Recognising symptoms early

The tricky part about uveitis is how its warning signs can mimic more common eye issues, such as dryness or infection. Because damage can develop quickly, it's vital not to ignore new or unusual symptoms.

See a doctor, optician, or ophthalmologist promptly if you notice any of the symptoms described above. Early examination and treatment can stop inflammation before complications arise.

Diagnosis and treatment

An ophthalmologist will check for uveitis using a special microscope called a slit lamp and may suggest eye scans or blood tests to look for possible underlying causes.

Treatment depends on the type and severity, but aims to calm inflammation quickly and protect the eye from damage. Options may include:

- corticosteroid eye drops, tablets, or injections
- pupil-dilating drops to prevent scarring inside the eye, or
- immunosuppressant or biologic medicines to manage persistent inflammation.

Some of the same biologic medicines that treat psoriasis and psoriatic arthritis, such as those targeting TNF-alpha, also help reduce the risk and recurrence of uveitis by addressing the underlying immune activity.

Because psoriatic disease can affect several systems, clear communication between your dermatologist, rheumatologist, and ophthalmologist is essential for long-term success.

Caring for your eyes every day

Taking small steps can help keep your eyes healthier and more comfortable.

- Schedule regular eye checks, even if you have no symptoms
- Protect your eyes from strong sunlight with ultraviolet (UV) blocking sunglasses
- Avoid rubbing your eyes if they feel irritated
- Keep your general health in check; managing blood pressure, avoiding smoking, and maintaining a healthy weight all help reduce inflammatory stress on the body.



Simple awareness and routine care give you the best chance of preventing flare-ups and protecting your sight over time.

A complete picture of psoriatic health

Psoriatic disease affects the body as a whole. Joints, blood vessels, metabolism, and vision all connect through inflammation. The better we understand these links, the better we can manage health as a complete system rather than as separate parts.

For those already living with psoriasis or psoriatic arthritis, that means staying proactive: looking after skin, joints, heart health, mental wellbeing, and eyes, together. With modern treatments and joined-up care between specialists, it is now possible not only to control flares but to protect long-term health and quality of life.

Selected source references:

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