Background: Anterior uveitis is the most frequent form of presentation of uveitis. An important part of patients do not associate extraocular manifestations, so more information about the clinical profile is needed to optimize therapeutic decisions.

Objectives: To describe the clinical profile of patients with anterior uveitis related and not related to the antigen HLA-B27. Compare both groups to establish differences.

Methods: Retrospective cohort study. consecutively diagnosed patients with non-infectious anterior uveitis, assessed in the multidisciplinary uveitis unit of the Infanta Leonor University Hospital (Madrid) from its establishment in October 2017 to December 2019, were included. To compare categorical variables Chi square was used and the test of Fisher; and Student’s T or Mann-Whitney U test for continuous variables. Finally, a multivariate analysis was performed to established differences between the two groups. A value of p <0.05 was considered statistically significant.

Results: 62 patients with anterior uveitis, 26 (42%) with HLA B27 positive and 36 (58%) with HLA B27 negative were included. There were no differences between the two groups regarding sex. Differences were found in the mean age at diagnosis, 35 ± 9.6 in the HLA B27 positive group vs 47 ± 14.9 in the HLA B27 negative group (p=0.01). The time since uveitis diagnosis was longer in the HLA B27 positive group: 708 years (3.45-11.79) versus 2.41 years (1.66-3) in the HLA B27 negative group (p=0.000). Regarding the etiology, the majority of patients in the HLA B27 negative group had a diagnosis of idiopathic anterior uveitis (72.2%), and 53.8% of the patients in the HLA B27 positive group were diagnosed with spondyloarthritis (p=0.000). There were no significant differences in the number of patients that require systemic treatment. There were no differences regarding oral corticosteroids intake, with very few patients needing it (2 patients in the HLA B27 positive group and 5 patients in the HLA B27 negative group (p=0.699). The percentage of patients who eventually develop immunosuppressive treatment was similar between the two groups, 6 patients (23.1%) in the HLA B27 positive group and 11 patients (30.6%) in the HLA B27 negative group (p=0.717) No significant differences could be detected between groups in the multivariate analysis in terms of laterality, clinical course, treatment with immunosuppressants or development of complications.

Conclusion: In our cohort patients with HLA B27 positive debut at an earlier age. There were no differences between both groups in laterality, course of uveitis, systemic treatment or ocular complications.

Disclosure of Interests: None declared