

Supplementary Information S1: Inclusion and Exclusion Criteria

Inclusion Criteria

- Diagnosed with intermediate/posterior/panuveitis due to NIU according to Standardization of Uveitis Nomenclature criteria (Jabs DA et al., Standardization of uveitis nomenclature for reporting clinical data. Results of the First International Workshop. Am J Ophthalmol, 2005. 140(3): p. 509-16.)
- In patients with spondyloarthropathy (SpA)-associated uveitis, the indication for ADA was provided by our team due to the unavoidable, recurrent, and vision-threatening nature of the eye involvement. However, ADA treatment was initiated by the rheumatology department, where the patient was subsequently followed (BCVA analysis was performed on a cohort of patients excluding those with SpA-associated uveitis to minimize the potential for bias in the results of the study, given the favorable visual outcomes observed in SpA-associated uveitis. In addition, as rheumatological involvement plays a significant role in the therapeutic regimens employed by SpA patient cohort, they were excluded from the analyses of IST and immunosuppressive drug load)
- Receiving ADA indication due to active NIU,
- Regular use of ADA at standard dose (40 mg every other week) for at least 6 months,
- No missing data in medical records for the data analyzed,
- No systemic health problem that would prevent the use of ADA, according to the results of the medical history, physical examination, laboratory profile, and internal medicine/infectious diseases consultation performed during screening,
- Turkish citizenship.

Exclusion Criteria

- Inconclusive diagnosis of NIU, suspected infectious uveitis during follow-up (except inflammation due to tuberculosis),
- Initiation of ADA treatment by another center (except spondyloarthropathy-associated uveitis),
- Received ADA due to a systemic disease other than uveitis,
- Known hypersensitivity to ADA,
- Findings suggestive of a demyelinating disease such as intermediate uveitis or multiple sclerosis. All patients with intermediate uveitis were seen by a neurologist and asked to undergo brain magnetic resonance imaging within 90 days prior to ADA,
- History of ocular surgery within 90 days prior to study onset or planned ocular surgery during follow-up.