

The Future of Eye Care Lies in Treating Inflammation at Its Source

June 23, 2026 | Influencers | By Ankit Kankar | ankit.kankar@mmactiv.com

Elizabeth Jeffords, CEO & President of Iolyx Therapeutics, discusses how targeted, locally delivered immunotherapies could transform the treatment of inflammatory and autoimmune eye diseases by addressing the root causes of vision loss.



Autoimmune and inflammatory diseases frequently affect the eye, yet ophthalmology has largely remained on the sidelines of the immunology revolution that has transformed fields such as rheumatology, dermatology, and neurology. As evidence mounts linking inflammation to retinal degeneration, vascular dysfunction, and progressive vision loss, a new category of therapies is emerging at the intersection of immunology and eye care. **In this exclusive conversation with BioSpectrum Asia, Elizabeth Jeffords, CEO & President of Iolyx Therapeutics,** explains why immuno-ophthalmology is gaining momentum, the advantages of targeted local delivery, and why addressing inflammation earlier could become the next major advance in preserving vision across a range of ocular diseases.

Why has immuno-ophthalmology emerged as an important therapeutic area?

Immuno-ophthalmology is emerging because autoimmune and inflammatory diseases frequently involve the eye, yet advances in immunological therapies have largely bypassed ophthalmology, instead focused on neurology, dermatology, rheumatology. For many patients, immune-driven ocular inflammation can cause persistent pain, irritation, blurred vision, and, in retinal disease, serious and sometimes irreversible vision loss. Historically, many ocular inflammatory diseases have relied on corticosteroids, immunosuppressants, or broadly acting anti-inflammatories that can be limited by efficacy, tolerability, or long-term safety. Iolyx is focused on bringing targeted, locally delivered immunology to the eye, with the goal of addressing inflammation at its biological roots.

What advantages does local delivery offer compared with systemic treatments?

Local delivery allows therapy to be directed to the ocular tissues where inflammation is occurring, whether at the ocular surface, in the retina, or in the peri-orbital space. That is important because the eye has unique protective barriers that can

restrict the passage of systemically delivered therapies, meaning systemic treatment may not always provide sufficient benefit to the eye. Iolyx's approach is to match mechanism, modality, and delivery to each compartment of the eye. By delivering targeted therapies locally, we aim to restore ocular immune homeostasis while minimizing broad systemic immune suppression.

How significant is inflammation in driving retinal disease progression?

Inflammation is increasingly recognized as a meaningful driver of retinal disease progression, particularly in the early stages of functional loss. In immune-driven retinal disease, inflammatory activity can contribute to neurodegeneration, vascular dysfunction, blood-retinal barrier disruption, and ultimately vision loss. We see this in AMD, diabetic eye disease, thyroid eye disease, and posterior uveitis. Current approaches such as corticosteroids or anti-VEGF agents can be powerful tools, but they may manage symptoms or vascular leakage without fully addressing the underlying inflammatory pathology. Iolyx's lead retinal program, ILYX-008, is designed to intervene at the immune cell level, with the goal of slowing or halting disease progression and preserving vision.

What partnership models are proving most effective in ophthalmology?

The most effective ophthalmology partnerships tend to combine focused innovation with late-stage development and commercial scale. A specialized biotech can generate differentiated science, move quickly, and build deep expertise in a specific area of ocular disease, and even launch commercially in Ophthalmology. Additionally, established ophthalmology partners can support global clinical development, regulatory execution, market access, and physician adoption at scale. Iolyx's partnership with Laboratoires Théa for ILYX-002 reflects that model: Iolyx developed the program through Phase 2, and Théa is now positioned to lead planned Phase 3 development and commercialization outside Asia. That structure allows Iolyx to continue advancing its broader pipeline of targeted, locally delivered therapies across the eye, while partnering on the late-stage development of ILYX-002.

What unmet need in eye disease deserves greater attention?

Right now, company building in ophthalmology is dominated by anti-VEGF and TKI's, mainly as second and even third generation agents for major retinal markets. These agents are mainly focused on the unmet needs of treatment durability. However, autoimmune-associated and immune-driven eye disease deserves greater scrutiny and development investment. We know from a number of diseases (oncology, neurology, etc) that it is most powerful to treat diseases when they are less severe. The same is true for Ophthalmology- we believe controlling the systemic and ocular impacts of inflammation, sometimes directly and sometimes as an early manifestation of broader disease, is the next frontier in ophthalmology. Iolyx is focused on this gap by developing targeted, locally delivered therapies designed to modulate specific immune drivers across the whole eye, from the ocular surface to the retina, from the early stages of disease to the more serious complications.