



**"A RARE CASE OF CHOROIDAL MELANOMA PRESENTED AS SECONDARY ANGLE CLOSURE GLAUCOMA"**

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**KEYWORDS :** Epibulbar dermoid, disc hypoplasia, facial abnormality.

**Introduction**

Choroidal melanoma is the most common primary intraocular tumor of adults. Uveal melanoma is of 3 types, 1) Choroidal melanoma account for 80%, 2) Ciliary body melanoma account for 10 to 15 % and 3) Iris melanoma account for 5 to 8% of total uveal melanoma. Incidence is approximately 5 to 7 per million per year in the United States and Western Europe. Patients with uveal melanoma present in various clinical form's eg.

- 1) Asymptomatic and diagnosed as routine check up.
- 2) Present as flashing lights or scotoma.
- 3) Present as Metamorphosia.
- 4) Atypical presentation-
  - a) Severe eye pain, inflamed eye with secondary glaucoma
  - b) Unilateral cataract
  - c) Exudative retinal detachment

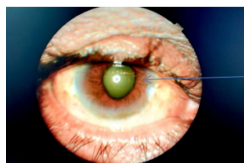
**Case report**

A 60 years old male, presented with loss of vision, eyeache and redness in his right eye. On history evaluation patient was asymptomatic 6 months back, then he developed gradual progressive diminution of vision which is followed by eyeache. Patients also giving history of distortion of images (Metamorphosis). Vision was completely lost 3 months back. He has no such similar history in family. He has no recent complaint of systemic illness.

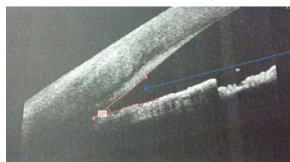
**Clinical Examination of right eye**

**Anterior Segment Examination:-**

Shows corneal odema with KP's on endothelium, shallow anterior chamber (Trabecular Iris angle {TIA} is 22°), pupil are fixed mid-dilated and non reacting to light. Cell's in shallow AC.



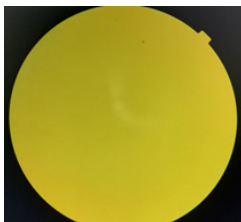
Shallow AC



TIA = 22°

**Posterior Segment Examination:-**

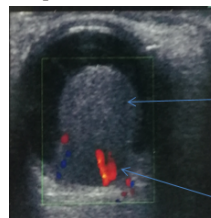
Yellowish reflex is seen and other structure are not obvious.



**DIAGNOSIS**

Routine investigation's including Alkaline phosphatase (ALP), Lactate dehydrogenase (LDH) and gamma glutamyl transferase (GGT) are normal. Patient is HBsAg positive.

B-Scan showing Mushroom shaped mass with internal vascularity.

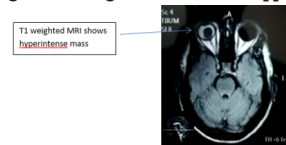


Mushroom shaped mass

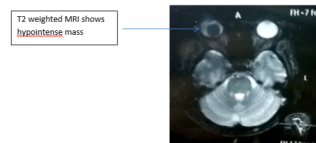
Internal vascularity

MRI Scan showing :-

- 1) T1 weighted image shows hyperintense mass.
- 2) T2 weighted image shows hypointense mass.
- 3) Diffusion weighted image (Dwi) shows hypointense mass.



T1 weighted MRI shows hyperintense mass



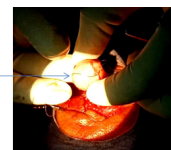
T2 weighted MRI shows hypointense mass



Diffusion weighted image (Dwi) shows hypointense mass

**Management**

After radiological and metastatic evaluation patient is suitable candidate for enucleation. So, after taking written consent enucleation of right eye with allogenic sclera wrap over a sphere silicone (18 mm size) prosthesis implant is done. To maintain conjunctival space, a conformer (18 mm sized) is placed.



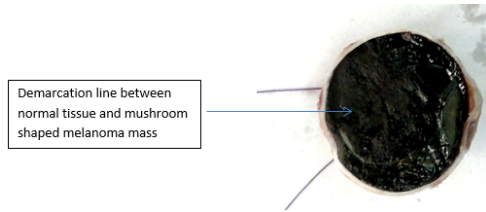
Scleral tissue wrap over silicone implant



Conformer in place

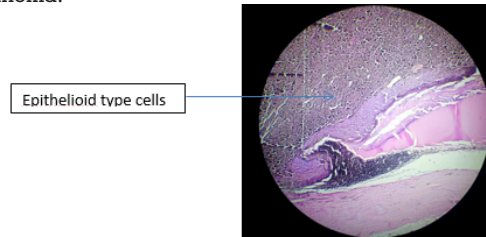
### POST-OP EVALUATION

Gross histological examination of eyeball showing a mushroom shaped mass upto just behind lens.



### Microscopic examination

of mass showing epithelioid type of choroidal malignant melanoma.



### DISCUSSION & CONCLUSION

Choroidal melanoma is multi-mode of presentation, it is presented as angle closure glaucoma in our patient. So, before going any definitive management for a glaucoma with hazy media go for B-Scan first. Choroidal melanoma having multimodal way of therapy depend upon nature, extension and size of tumour.

### REFERENCES

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