

Rare and interesting case of choroidal melanoma presenting as a case of Acute congestive glaucoma Left eye in a 55 years old male patient

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ABSTRACT

Choroidal melanomas are one of the commonest intraocular tumours which are either benign or malignant Pigmented or non pigmented More common in whites than blacks have got an early tendency for liver metastasis however if diagnosed and treated in time one can prevent liver metastasis They are 6.5 per million in U S A And 7 PER million in DENMARK AND OTHER SCANDINAVIAN COUNTRIES They are 80 PERCENT CHOROIDAL 12 AND 8 PERCENT INVOLVE C BODY AND IRIS RESPECTIVELY Very difficult to diagnose due to their atypical manifestations however in most of cases present as solid or exudative retinal detachment on bscan ultrasound or indirect OPHTHALMOSCOPY Malignant melanomas of c body yields poor results as far as treatment is concerned.

Key words

Progress and painless VISUAL field loss, Paracentral scotoma, Blurred vision, Acute glaucoma, angle glaucoma, secondary glaucoma, ocular hypertension, chorioiditis, Vitreous floaters, severe ocular pain, Diagnostic modalities, DIRECT OPHTHALMOSCOPY, Indirect OPHTHALMOSCOPY.

A scan ultrasound bscan ultrasound

C t scan brain MRI scan brain

F f angiography

INTRODUCTION

If the tumour is any to lens patient will present with Blurred vision paracentral scotoma painless and progressive visual field loss If the tumour involved angle of filtration PRESENTING features will be Acute glaucoma Angle glaucoma secondary glaucoma ocular hypertension If tumour involves VITREOUS features can be kind of vitreous floaters Sometimes severe ocular pain may

be only presentation Very rarely they may be loss of appetite loss of weight and bladder disturbances CASE REPORT AND RESULTS A 55 years old male patient in year 2011 presented with a TYPICAL presentation of acute glaucoma with severe redness and pain and sudden loss of vision was put on antiglaucoma medication from an ophthalmic DEPARTMENT OF MEDICAL COLLEGE IN the form of Prostaglandin analogue with timolol drops 1 eye drops one and 2 drops respectively with topical installation of steroid drops 4 times a day with systemic administration of 1 v 500 ccs of 20% inj mannitol and 1 v 500 mg of acetazolamide even after 6 to 8 hours patient did not

show any relief in his signs and symptoms no bscan ultrasound was done otbwas advised admission which he refused HE REFUSED He went Lama and sought 2nd option of an ophthalmologist whomupon b caan ultrasound picked solid retinal detachment was sent for MRI scan braine for radiological confirmation of MELANIMA Unfortunately radiological report even after repeating 2nd time was so confusing that it created all the confusion sonot was left untreated for 2vyears as a painful blind eye I saw patient in 2013 with an eye with complete hazy media performed b scan picked solid r detachment refered him to radiologist whose report of MRI scan braine was excellent it conferment melanoma plus other details like putbfoss gland basal ganglion normal pons midbrain medulla ventricles cerebral hemisphere all normal optic nerve tract ciasma radiation all normal On this report I did block resection by removing all intraocular contents leaving behind intact sclera optic never orbital adenexacand extra occlar muscles Removed intraocular contents sent for histopathology did not show any evidence of malignancy I stiched ant and post lios of sclera an intraorbital confermerbwas putbforb2weeks to increase the intraorbital volume for better fitting prosthesis after removal of confermerbi putba well matching prosthesis Discussion More than

8 years have passed otbis happy pain free has a good looking prostheses ct and MRI scan brain normal ultrasound liver normal.

Conclusion

If we deal with a case of a c glaucoma not responding bto usual a glaucoma medecation please do b scan a tonouck up solid retinal detachment and subsequent mnrb i braine.

REFERENCES

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2. Sometimes ch melanoma can present as sec glaucoma in institute of ophthalmology and pathology University of cario Egypt a otbif c melaoma presented with sec GLAUCOMA did not respond to treatment m rbi scan showed c melanomaso enucleation bwass done Malignant melanoma of c body can present as ocular hypertension or ch uveitis Vetrex vaices can present as uveal melanoma a benign condition.