

Case Study 3

Small Ciliary Body Melanoma

NG is a 29-year-old woman who was noted on a routine eye examination to have a pigmented lesion of her left temporal iris root. The same optometrist

had checked her in the prior year, and this finding had not been noted at that time. Gonioscopy revealed focal involvement of the ciliary body, but the adjacent angle was normal. The lesion seemed solid on transillumination.

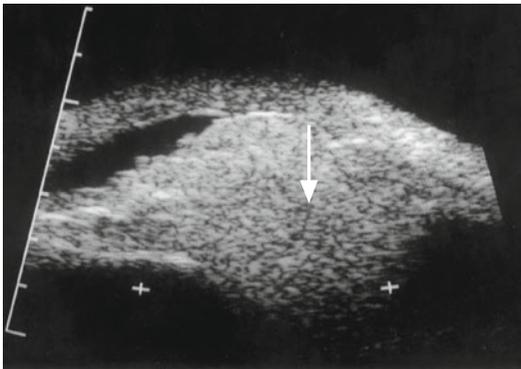


FIG. 1 Immersion B-scan (20 MHz) of ciliary body melanoma (*arrow*)

Immersion scanning using a 20-MHz probe revealed a solid lesion of the anterior ciliary body (Fig. 1). It measured 1.6 mm by 1.5 mm. The finding of a probable ciliary body melanoma was discussed with the patient, and she elected to observe it for growth with repeat echography every 4–6 months.

Iris and ciliary body cysts are more common than solid lesions and are easily diagnosed on immersion scanning (Fig. 2). Multicystic lesions are not uncommon. It is important to differentiate them from tumors such as melanoma.

The correct diagnosis of anterior segment problems with timely therapy can be facilitated by echographic techniques.

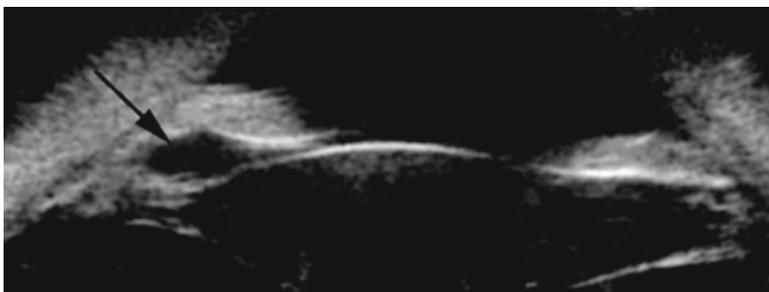


FIG. 2 Immersion scan (20-MHz probe) of iris/ciliary body cyst (*arrow*)