

Case Study 5

Choroidal Melanoma

MO is a 54-year-old woman who noted a shadow increasing over several months in the lower part of her field of vision in the left eye. She presented to her optometrist, who noted vision OD of 20/20 and OS of 20/30 with some distortion. Fundus examination of the left eye found a lightly pigmented lesion posterior to the superior equator. A visual field examination showed an inferior defect that extended into the lower part of central fixation.

B-scan revealed a solid lesion just above the left macula with basal dimension measurements of 6.2 mm circumferentially and 7.1 mm radially with 2+ spontaneous internal vascularity. A-scan measured thickness of the lesion to be 6.24 mm with medium and regular internal reflectivity (Fig. 1).

These findings were highly consistent with a choroidal melanoma, and the patient was referred for radioactive plaque therapy after a systemic evaluation for metastatic melanoma was negative.

The quantitative capability of the A-scan has become essential in the management of intraocular tumors. The last 30 years has witnessed the

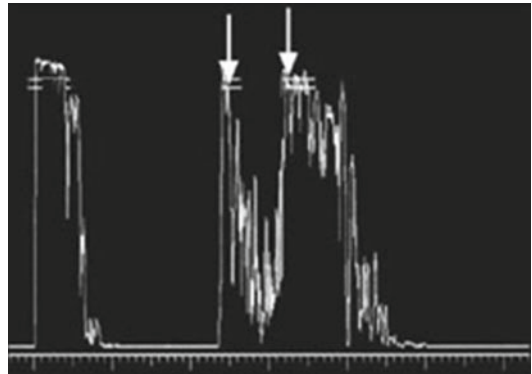


FIG. 1 A-scan of choroidal melanoma. Tumor surface indicated by *first* arrow and sclera by *second* arrow

transition from enucleation as the procedure of choice in the management of intraocular malignant melanoma to observation and radiation in cases of documented growth. A-scan measurements of the thickness of intraocular lesions are integral to this current management paradigm.

This chapter contains video segments that can be found by accessing the following link:

<http://www.springerimages.com/videos/978-1-4614-7081-6>.