## Lumpy bumpy eye surgery!

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### ABSTRACT

**Objective:** To report a rare case of conjunctival subepithelial inclusion cyst post strabismus surgery. **Method:** Case report. **Results:** A four-year old patient with decompensated alternating exotropia underwent uneventful bilateral medial rectus recession of 4.5mm (limbal incision). At one month post-surgery patient was orthophoric and doing well. Four months later, patient was developed right eye nasal conjunctival swelling which progressively increased in size. Patient was given steroid-antibiotic eyedrops (Maxitrol) for one month. The swelling however showed no resolution. Complete surgical excision of the swelling was done and the sample measuring 5.0mm x 5.0mm x 3.0mm was sent for analysis. Histopathological examination reported dense fibrotic tissue surrounding a cystic structure which was lined by conjunctival epithelium. Findings were consistent with conjunctival subepithelial inclusion cyst. Post-operative review showed complete resolution of the lesion and patient remained orthophoric. **Conclusion:** Careful and complete excision of conjunctival subepithelial inclusion cyst post strabismus surgery is essential to prevent recurrence and accidental injury to extraocular muscles.

#### **KEY WORDS:**

Conjunctival cyst, strabismus surgery

# Managing choroidal melanoma with vitreous seeding

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### ABSTRACT

**Objective:** To report a rare case of malignant choroidal melanoma with vitreous seeding. **Method:** Case report. **Results:** A 71 year old gentleman with underlying hypertension, dyslipidaemia and atrial fibrillation on warfarin therapy presented with gradual blurring of vision in the right eye for 6 months, associated with loss of weight and loss of appetite. There was no family history of malignancy. On examination, his best corrected visual acuity on the right eye was 6/60 and 6/12 on his left eye. Anterior examination of the right eye had no significant abnormalities. On fundus examination, an elevated hyperpigmented choroidal mass measuring 4 disc diameters was seen temporal to the fovea, with underlying subretinal fluid and overlying orange pigments. There was also presence of vitreous seeding over the tumour. Examination of the left eye was unremarkable. B-scan ultrasonography of the right eye revealed a collar stud shaped choroidal mass with low internal reflectivity and presence of vitreous opacities. A computed tomography of the brain and orbit reported a right choroidal tumour measuring 7.0mm X 5.0mm, with thickening of the adjacent choroid. Systemic examination in this patient was normal and our investigations exclude any metastasis from other organs. Right eye enucleation was performed. **Conclusion**: Patients with choroidal melanoma should be examined closely for vitreous seeding. B-scan ultrasonography and cytological studies of vitreous aspiration may be helpful in confirming the presence of vitreous extension. Enucleation of the eyeball in a case of choroidal melanoma with vitreous seeding, irrespective of the tumour size, is recommended to improve survival prognosis.

### **KEY WORDS:**

Choroidal melanoma, vitreous seeding, enucleation