



Eye Tumors

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Objectives:

1. Identify the most common tumors in anatomical sequel

starting from the eye lid, conj....

2. Define the pathology of each tumor (benign, malignant)

3. DDX, of ocular tumor.

4. Outline the Mx of each ocular tumor.

Eyelid Tumors There are several different types of eyelid tumors. Nevus and papilloma are the most common.

Malignant eyelid tumors include basal cell carcinoma, sebaceous carcinoma, squamous cell carcinoma, and melanoma

Nevus

Benign pigmented or nonpigmented lesion on the eyelid or eyelid margin with rare tendency for malignant transformation



Papilloma •

Benign, slowly evolving tumor of the eyelid mostly found in the elderly.

Chalazion

Benign, inflammatory tumor due to the blockage of the meibomian gland orifice at the eyelid margin.

Basal Cell Carcinoma •
Malignant tumor arising from the epidermis that can appear as a nodular, nodulo-ulcerative, or sclerosing lesion. It is a locally invasive rarely metastasize tumor
Complete resection is important.



Sebaceous Carcinoma •

Malignant tumor arising from the meibomian glands or rarely glands of zies that can invade the surface of the eye and grow into the orbit. Usually presented as a recurrent chalazion at the same site. This tumor tends to arise in elderly women most often and has a greasy yellow color and loss of eyelashes. Complete resection is important.

Squamous Cell Carcinoma •

Malignant tumor of the epidermis in patients with heavy sun exposure. This can be treated surgically or topical medications

Sebaceous Carcinoma



Conjunctival tumors

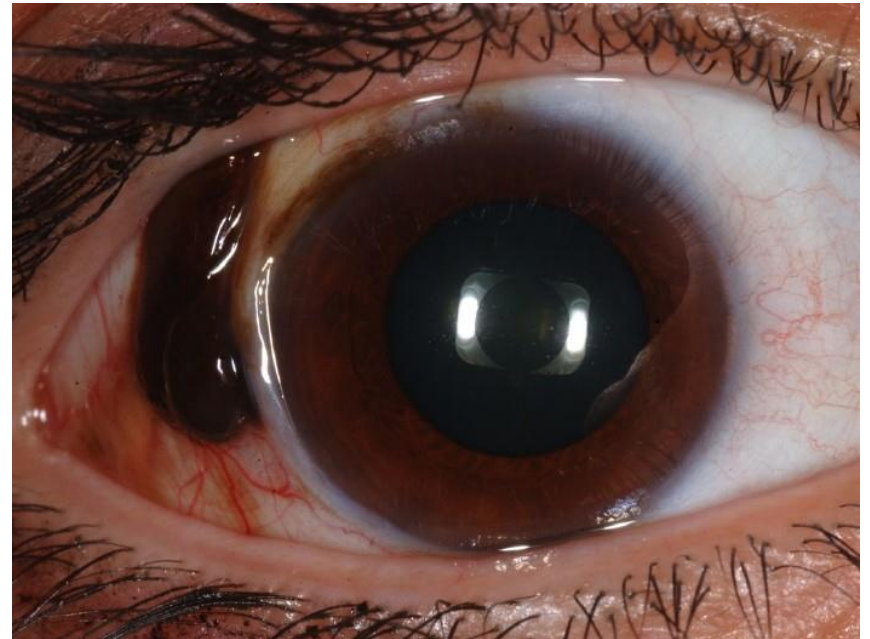
Nevus •

Benign pigmented or nonpigmented mass on the eye surface. This is the most common tumor of the conjunctiva. Detection occurs in children and young adults.



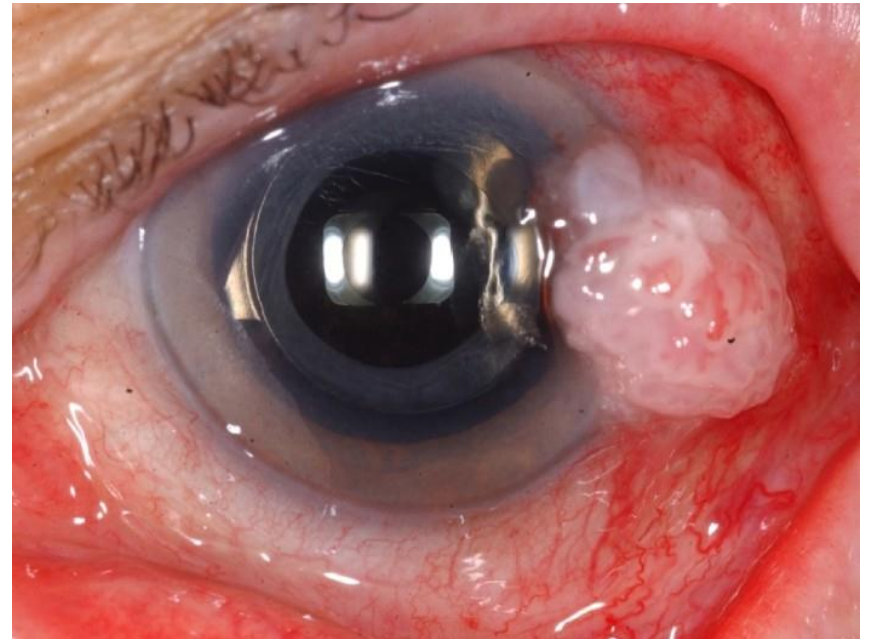
Primary acquired • melanosis

Prelmalignant pigmented condition causing brown discoloration of the ocular surface. This condition carries relatively high rate for transformation into melanoma.



Squamous Cell • Carcinoma

Malignant tumor appearing as a foamy, yellow-white vascular mass on the ocular surface. Treatment can be surgical or with eyedrops like mitomycin C..



Intraocular Tumors

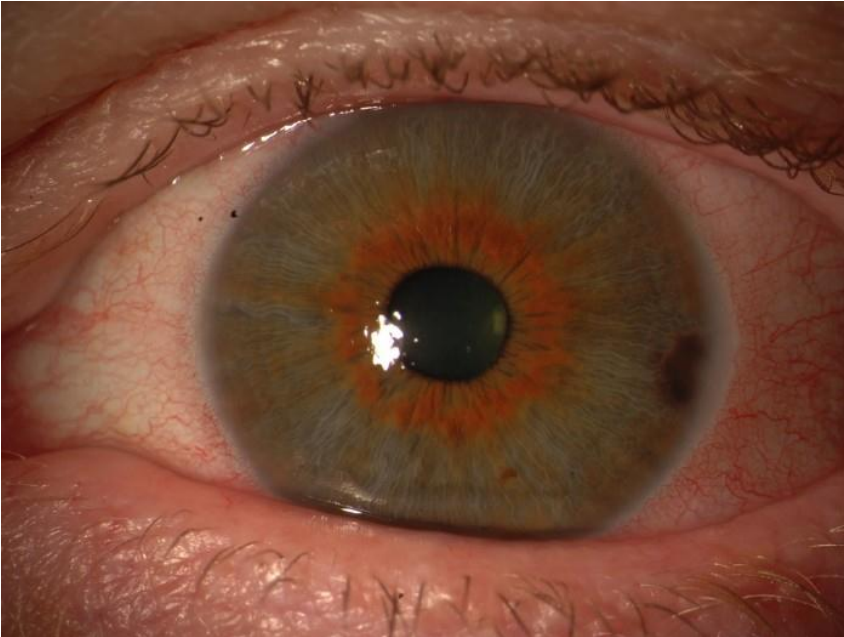
Iris

Cyst

Benign condition mostly induced by surgery or trauma. Some can be observed while others need surgical treatment. According to the evidence of associated complications.

Nevus

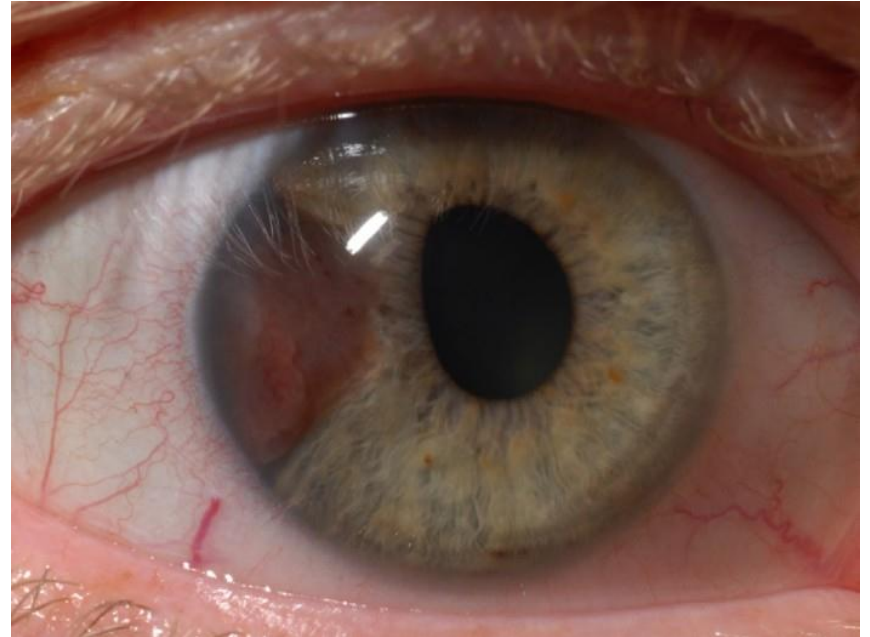
Benign tumor appearing as a brown or yellow spot on the iris stroma.



Melanoma

Malignant tumor often detected when small size so prognosis is usually favorable. It is 8% of uveal tissue melanoma mostly in blue eyes.

- Rx: 1. Broad iridectomy.
2. plaque radiotherapy.
3. Enucleation.**





Ciliary body

Ciliary body melanoma:

Accounts 12% of uveal tissue melanomas.

Presentation with dilated episcleral vessels.

Cataract, glaucoma, or even retinal detachment.

Rx;

Enucleation or plaque radiotherapy.

Chroidal tumors

1. Naevus •

Benign tumor that classically remains stable. Can lead to reduced visual acuity. Can transform into melanoma.

2. Melanoma •

Malignant tumor with relatively high risk for metastasis. Often treated with radiation or eye enucleation., 80% of uveal tissue melanoma.

3. Hemangioma •

Benign tumor that can leak and result in poor vision.. •

4. Metastasis Malignant tumor that spread to the inner eye from remote site such as breast in female and lung cancer in male. •

5. Lymphoma •

Malignant tumor often associated with similar tumor in the abdomen.

Retina

Retinoblastoma is a rapidly developing growth from the immature cells of a [retina](#), t. It is the most common intraocular primary malignancy in children •

Most common presentation is with leukocoria (white pupil) in 60% or deviation, 2ndary glaucoma, Pseudohypopeaon, orbital cellulitis, proptosis metastasis to the brain •

Treatment •

According to the size and metastasis •

1. chemotherapy Intravenous Subtenon Intra-arterial and Intravitreal chemotherapy (melphalan)
2. Plaque radiotherapy
3. Cryotherapy/Thermotherapy
4. Enucleation



Thank You