

Choroidal Melanomas and its Various Diagnostic Modalities

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Choroidal melanomas are one of the commonest intraocular tumours which can be benign malignant pigmented non pigmented more common in whites than blacks has got an early tendency of liver metastasis however if diagnosed and treated in time one can prevent liver metastasis 7 per million in u s a and 6.5 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 b scan ultrasound and indirect ophthalmoscopy malignant melanoma of c body yields poor results as far as treatment is concerned.

If the tumour is ant to kind presentation is painless and progressive visual field loss.

If angle if filtration is involved presentation is:

- A C glaucoma
- A A C glaucoma
- SEC glaucoma
- Ocular hypertension

If vitreous is involved presentation is vitreous floaters.

Sometimes ocular pain may be the only presentation.

In most severe cases may be loss of weight appetite and loss of bladder control.

Diagnostic modalities:

- Direct ophthalmoscopy
- Indirect ophthalmoscopy
- A Scan ultrasound
- B Scan ultrasound
- CBT scan brain
- M R I scan brain
- F F angiography.

Treatment options

- If tumour is less than 22 mm treatment is observation
- If more than 22 mm enucleation
- Plaque brachytherapy
- Block resection
- Radiotherapy
- Chemotherapy
- Paras plana vitrectomy
- Pan retinal photocoagulation
- In very severe cases exenteration.

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