Progression of an iris melanoma over 41 years

David G Charteris

Abstract

An iris melanoma first recorded in 1945 progressed over a period of 41 years to produce secondary glaucoma resulting in enucleation. The case illustrates the advancing nature of such lesions.

In 1945 a 37-year-old woman was noted to have a vascularised iris tumour inferonasal in her right eye (Fig 1). The lesion extended to the drainage angle, and a second small nodule was noted in the angle superonasally. Visual acuity was 6/6 in both eyes.

The lesion was observed, and a sectorial lens opacity developed after eight years. The tumour enlarged slowly. Between 1976 and 1986 there was recurrent haemorrhage into the anterior chamber, and secondary glaucoma developed (Figs 2, 3). Gonioscopy showed extension of the tumour round the drainage angle for 180°. Her visual acuity deteriorated to 6/60.

The eye was enucleated in 1986, and pathological examination revealed a lightly pigmented malignant melanoma of predominantly spindle B cell type. The tumour had extended to involve the drainage angle for almost 360° and showed some extension to the ciliary body (Figs 4–6). The patient has remained well since enucleation.

Discussion

The case emphasises the slowly progressive course of iris melanomas. The lesion appeared fairly static for 30 years. It then spread round the angle to form a ring melanoma and was complicated by recurrent haemorrhage. Apparent lack of growth of iris melanocytic tumours may be due to very slow enlargement which can remain clinically undetectable over some years. The slow progression of the tumour supports the current trend towards more conservative management of iris tumours, the decision to enucleate being made because of intractable glaucoma. The change in behaviour may well reflect a change towards a more malignant cell type. The case also provides an interesting early example of the use of colour photography to record clinical appearances.

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Figure 5: Photomicrograph showing lightly pigmented iris melanoma invading drainage angle structures. (H-E, ×100.)

Figure 6: Higher power photomicrograph of spindle B iris malignant melanoma. (H-E, ×400.)

4 Jakobiec FA, Silbert G. Are most iris 'melanomas' really nevi?