which need to be adhered to strictly prior to administration of anaesthesia as well.

Hospital trusts may be able to reduce risks by appropriate site marking and providing interpreters who are obliged to be present, if required, during all stages of the patient journey.

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Awareness of eye tumours in Down syndrome

A metastasising adenocarcinoma of the retinal pigment epithelium in a 37-year-old man with Down syndrome (DS) has recently been reported in the British Journal of Ophthalmology. The authors underlined unusual atypical aggressive behaviour of the tumour, which is the first well-documented adenocarcinoma of the retinal pigment epithelium with metastases. Although solid tumours are globally less common in people with DS than in the general population, this does not seem to apply to ocular neoplasms. Including the report of Heindl et al, 30 cases of primary or secondary malignant tumours of the eye and orbit have been reported so far, two-thirds being retinoblastoma. Unfortunately, but interestingly, some neoplasms in patients with DS may show rapid progression, as observed in a low-grade glioma. The reason for this unfavourable course in some patients remains unknown. Nonetheless, as ocular malignant neoplasm may be more common in children and adults with DS, and as some of these tumours may have unexpected aggressive behaviour, we want to attract attention to them to allow early diagnosis and treatment.

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