

CILIARY BODY LEIOMYOMA MIMICKING UVEAL MELANOMA

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Ciliary body leiomyoma mimicking uveal melanoma

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INTRODUÇÃO

Ciliary body leiomyoma is a rare, benign tumor, to be of neural crest origin. Strictly unilateral, it has a predilection for women in the second to fourth decade of life and it shows slow growth. The golden standard to confirm the diagnosis is a pathological evaluation with immunohistochemical or electron microscopic studies.¹

RELATO DO CASO

A 34-year-old man was referred for evaluation of a ciliary body tumor in his left eye. The main complaint was low visual acuities in the left eye noted one month before. Visual acuity was counting fingers at 2ft. Slit-lamp biomicroscopy showed a significant mass touching the lens nasally (FIGURE 1). Indirect ophthalmoscopy revealed a vitreous hemorrhage and a large nasal brown ciliary body mass location superior and temporal to the optical disc. There was not a retinal detachment. The tumor's largest ultrasonographic basal dimension was measured to be 10x9 mm. The findings of ultrasonography and magnetic resonance imaging (MRI) were thought to be compatible with malignant melanoma of the left eye. Therefore, the left globe was enucleated and sent for pathologic examination. Histopathological examination provide a definitive diagnosis. Histopathology revealed intersecting fascicles of spindle-shaped cells (figure 2). Immunohistochemical stains for smooth muscle actin - SMA (figure 3), desmin (figure 4) and Ki 67 (figure 5), were positive. It was established the diagnosis of mesectodermal leiomyoma of the ciliary body.

FIGURAS, TABELAS E GRÁFICOS



Figure 1: Slit-lamp examination showed an amelanotic tumor with temporal iridodialysis which partially transmitted light.

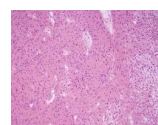


Figure 2: The spindle-shaped cells

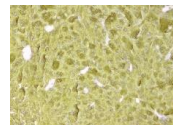


Figure 3: SMA

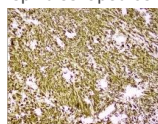


Figure 4: Desmin

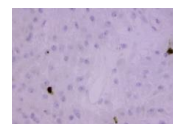


Figure 5: Ki 67

DISCUSSÃO:

Ciliary body leiomyomas occur predominantly in young females, although our patient was a young male (34 years old).¹ Blur vision is the most common symptom.¹ Leiomyomas can to present without clinical symptoms also like to uveal melanoma. Among several cases described, the correct diagnosis was only made after enucleation. It is consensus that pigmented ciliochoroidal mass clinically the same as large uveal melanoma will be treated by enucleation with the intent of saving life.^{1,2}

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