

# 11-year follow up of a case of iris leiomyosarcoma

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Leiomyosarcoma of the iris is rare. Blodi (1964) doubted the occurrence of malignant myomata in the iris. Ashton (1964) described four cases of leiomyosarcoma as almost certainly malignant. The invasive properties of one of the neoplasms described were so obvious, that it was considered the most definitely malignant (Fig. 1).

The patient from whom this neoplasm was removed recently attended the Out-patients Department for renewal of an artificial eye. As this is an unequalled follow-up period for this type of neoplasm, and there is also an associated 16-year history of a benign reticulosis, the following case report may be of interest.

## Case report

**A boy aged 13** was referred to the Out-patients Department on December 1, 1959, with a history of deterioration of vision in the left eye of 2 hours duration. There was no history of trauma.

### Examination

The visual acuity was 6/5 in the right eye and 3/60 in the left. A one-half hyphaema was present in the left eye.

### Treatment

The patient was admitted to hospital for rest in bed. No local treatment was prescribed.

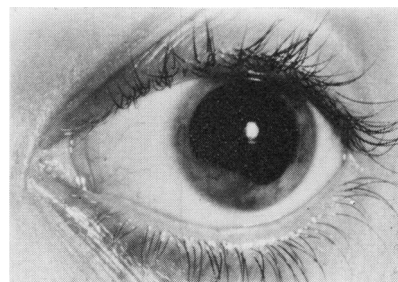
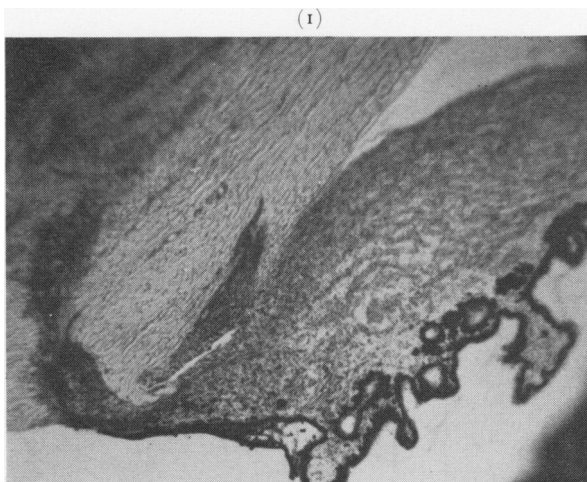


FIG. 2 *Appearance of swelling on iris of left eye*

FIG. 1 *Leiomyosarcoma invading ciliary body and anterior chamber angle. Haematoxylin and eosin.  $\times 55$*

### Progress

On December 2 the hyphaema had disappeared. In the iris, extending between 6 o'clock and 8 o'clock, and from the pupillary margin to the root, was a salmon-pink swelling (Fig. 2). The slit lamp showed a raised anterior surface covered with a plexus of blood vessels, and an associated ectropion uveae.

*Operation*

On December 16, 1959, an iridectomy was performed because of the increasing size of the swelling.

On January 13, 1960, an enucleation was carried out because the removal of the neoplasm had been incomplete.

*Follow-up*

On February 19, 1971, the patient was referred to the Out-patients Department for renewal of an artificial eye. There was no evidence of local or general recurrence of the neoplasm.

*Earlier medical history*

On August 25, 1954, the patient had attended the Out-patients Department with a 6 weeks' history of enlarged glands in the neck. A biopsy specimen was examined at the Central Tumour Registry based at the Christie Hospital and Holt Radium Institute, Manchester, and of the five opinions requested four pathologists diagnosed Hodgkin's paraganuloma and one diagnosed well-differentiated lymphosarcoma (Fig. 3).

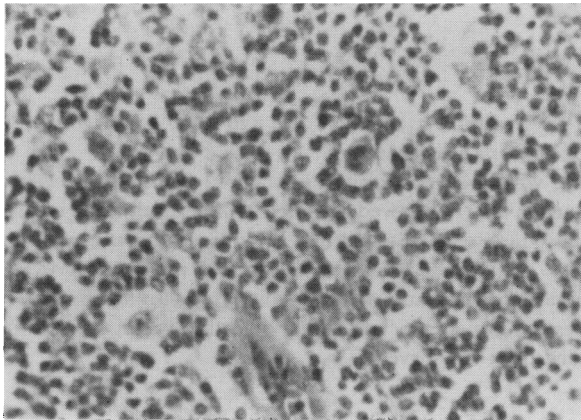


FIG. 3 *Hodgkin's paraganuloma.*  
*Haematoxylin and eosin.* × 225

A course of radiotherapy was then given.

**Comment**

This is the longest follow-up in the literature of an authentic case of invasive leiomyosarcoma of the iris. This case confirms the view that malignant iris tumours are characterized by actual or potential local invasiveness; but metastases are rare and the prognosis as regards survival is excellent.

Dual primary neoplasia in children is rare, and the survival time for a reticulosis is interesting.

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**References**

- ASHTON, N. (1964) *Brit. J. Ophthalm.*, **48**, 650  
 BLODI, F. C. (1964) In "Modern Ophthalmology", ed. A. Sorsby, vol. 3, p. 390. Butterworths, London