

Sir,

Conjunctival haemangioma in an elderly patient

Conjunctival haemangioma is a relatively rare tumour. A search of the literature failed to discover any patients over the age of 60 years with such a haemangioma.¹ Generally the older the patient, the higher the risk of malignant tumour on the conjunctiva. Thus such tumours must be carefully examined before removal. We report here on a rare case of conjunctival haemangioma in an elderly subject, with findings obtained by fluorescein angiography (FAG),² ultrasound biomicroscopy (UBM) and histopathological study.

Case report

A 71-year-old woman presented to our hospital complaining of a tumour on the conjunctiva which was increasing in size. Two months previously she had noticed a small bead-like swelling on the temporal bull-bar conjunctiva of the left eye. She went to an ophthalmologist and was treated several times by needle aspiration. However, despite treatment the tumour continued to grow in size, and she was referred to our hospital for further investigation.

Upon ocular examination, her best corrected visual acuity was found to be 0.7 in the right eye and 0.8 in the left, due to nuclear cataracts in both eyes. Eye position and eye movement were both acceptable and intraocular pressure was normal in both eyes. Slit-lamp examination of the left eye revealed a tumour on the temporal conjunctiva 3 mm from the corneal limbus. The tumour was 5 mm in diameter and was an immobile, sharply elevated, pinkish, soft and fresh mass with pulsating tufted blood vessels (Fig. 1). No other ocular abnormalities were noted. FAG revealed that fluorescein was observed after 30 s and extravasation did not occur in all phases. UBM revealed that the tumour had a sharply defined margin and had not invaded the sclera (Fig. 2). We thus diagnosed the tumour as a benign haemangioma.

Since the incidence of malignancy is high for conjunctival neoplasms in patients over 60 years, we excised the tumour completely and performed a



Fig. 1. Haemangioma on the temporal bull-bar conjunctiva in the left eye.

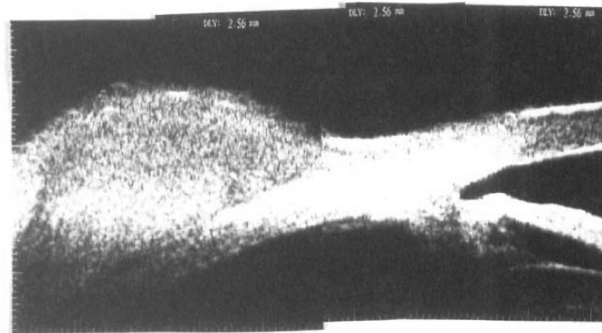


Fig. 2. Ultrasound biomicroscopy cutting across the equator of the eye. The tumour had a sharply defined margin and did not invade the sclera.

histopathological study. Two types of cells were found in the excised tumour: CD34 and IA-4I positive. CD34 is a vascular endothelium marker and IA-4 is a pericyte marker, which indicated that the tumour consisted of vascular endothelium and pericyte cells. The tumour was diagnosed as a capillary haemangioma.

Comment

Conjunctival haemangiomas account for about 2% of all conjunctival neoplasms.³ Clinically, conjunctival haemangioma occurs primarily in the young,⁴ usually from 20 to 30 years of age (unpublished data). To our knowledge, our patient is the oldest reported case with conjunctival haemangioma. Sixty per cent of conjunctival tumours in patients over 60 years are malignant.³ Therefore conjunctival tumours in elderly patients need to be carefully examined before treatment. There are no reports on the use of UBM to investigate the status of conjunctival tumours; however, it is an excellent tool for evaluating tumours, specifically the internal area of the tumour and degree of invasion into the sclera, as demonstrated in this case.

References

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