

2007 Research Days Abstract Form – Department of Ophthalmology – UNIFESP/EPM

2. SCIENTIFIC SECTION PREFERENCE (REQUIRED): Review the Scientific section Descriptions. Select and enter the two -letter Code for the one (1) Section best suited to review your abstract
TU

3. PRESENTATION PREFERENCE (REQUIRED) Check one (1)
 (a) Paper
(b) Poster

4. The signature of the First (Presenting) Author, (REQUIRED) acting as the authorized agent for all authors, hereby certifies.
 That any research reported was conducted in compliance with the Declaration of Helsinki and the UNIFESP Ethical Committee"

Camila Cassiano Simões
 Signature of First

Scientific Section Descriptions
 (OR) ORBIT
 (PL) OCULAR PLASTIC SURGERY
 (RE) RETINA AND VITREOUS
 (RX) REFRACTION-CONTACT LENSES
 (NO) NEURO-OPHTHALMOLOGY
(TU) TUMORS AND PATHOLOGY
 (ST) STRABISMUS
 (UV) UVEITIS
 (LS) LACRIMAL SYSTEM
 (LV) LOW VISION
 (CO) CORNEA AND EXTERNAL DISEASE
 (GL) GLAUCOMA
 (RS) REFRACTIVE SURGERY
 (CA) CATARACT
 (US) OCULAR ULTRASOUND
 (TR) TRAUMA
 (LA) LABORATORY
 (BE) OCULAR BIOENGINEERING
 (EP) EPIDEMIOLOGY
 (EF) ELECTROPHYSIOLOGY

Deadline: 29/10/2007

FORMAT:
 Abstract should contain:
Title, Name of Authors, Name of other authors (maximum 6), Purpose, Methods, Results, Conclusions.
 Example: ARVO (1.10 x 1.70) Abstract Book

1. FIRST (PRESENTING) AUTHOR (REQUIRED)
 Must be author listed first in body of abstract
 () R1 () R2 () R3
 () PG0 () PG1 **(X) Estagiário** () Tecnólogo () PIBIC
 Simões. Camila Cassiano
 Last Name First Name Middle
 Tumores Nº CEP
 Service (sector) (Comitê de Ética em Pesquisa da Universidade Federal de São Paulo- UNIFESP)

5. ABSTRACT (REQUIRED)
Choroidal Melanoma – Epidemiological review in the latest three years on the Ocular Oncology Unit at São Paulo Federal University.
 Simões, C.C.¹
 Sobrinho, J.R.N.¹; Dourado, L.¹; Ballalai, P.^{1,2}
PURPOSE: To evaluate the epidemiological characteristics in patients referred for treating choroidal melanoma on the Ocular Oncology service at São Paulo Federal University.
DESIGN: Retrospective noncomparative case series.
METHODS: Review of charts of all patients with choroidal melanoma on the ocular service at São Paulo Federal University between January 2004 and December 2006. The epidemiological outcomes evaluated were sex, age, race and the correlation about tumor size (A-B scan ultrasonography) and treatment.
 Patients were excluded from the study if any epidemiological reference or ultrasound records not were in the charts.
RESULTS: Data could be found for 66 patients. There were more male, 38 (57.58%) than males, 28 (42.42%). Mean diagnosis age was 54.9 years (range 25-82) and the white race was predominate (50 patients, 75.76%). Twenty-three patients were excluded.
 In the others 43 patients, the choroidal melanoma was classified by A-scan ultrasound height, as small (≤ 4.0 mm) in 12 (27.91%), medium (4.1 -6.0 mm) in 7 (16.28%) and large (≥ 6.1 mm) in 24 (55.81%).
 The primary treatment for small choroidal melanoma (SCM) was transpupillary thermotherapy (TTT) for 9 patients, I¹²⁵ brachytherapy for 2 and 1 patient underwent TTT out of our service. In medium choroidal melanoma (MCM) was brachytherapy for 3 patients, TTT for 2 patients and enucleation for 2 patients. For large choroidal melanoma (LCM) was enucleation for 19 and brachytherapy for 5 patients.
 Recurrence after first treatment occurred in 5 patients with SCM, 3 patients with MCM and 1 patient with LCM.
 The recurrence was treated by brachytherapy in 3 patients with SCM and by enucleation in 2 patients with MCM and in 2 with LCM. TTT was adjuvant treatment for recurrence in 1 patient with MCM and 1 with LCM.
 In the enucleated eyes our pathological analysis found a predominance of mixed cell melanoma (71.43%)
CONCLUSION: The Ocular Oncology service at São Paulo Federal University is one of the few references, in Brazil, when it comes to public treatment in this kind of pathology which justify our outcomes in which the major parts of patients shows large size tumors at the moment of diagnosis, giving cause for enucleation to be the only treatment possible aiming to decrease possibilities of systemic metastasis.