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BILATERAL CHOROIDAL OSTEOMA - A CASE REPORT

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ABSTRACT choroidal osteoma is an extremely rare ,benign intraocular tumours , occurs between 2-3 decade of life ,women are particularly vulnerable.Here in we report a case of 32 year old male presented with history of gradual decline in vision over 13 years with right eye vision – counting fingers at 1 meter and left eye – counting fingers at ½ meter at the time of presentation .A diagnosis of Bilateral choroidal osteoma which was complicated by subretinal hemorrhage in right eye and scarred cnvm in left eye was made based on clinical examination , ultrasonography , optical coherence tomography & Fluroscein angiography

KEYWORDS : choroidal osteoma ,sub retinal hemorrhage , scarred cnvm

INTRODUCTION:

- Choroidal osteoma is a rare benign, ossifying tumor within choroid.
- The first case presented at the meeting of Verhoeff Society in 1975 and reported by Gass etal.
- It is an often an unilateral condition that affects juxtapapillary area,more common in female.

EPIDEMIOLOGY:

- It occurs in all races ,affects young adults in their early twenties.
- It has predilection for women and is unilateral in 80% cases.

CASE REPORT:

A 32 years old male patient presented with a history of 13 years of gradual decline in visual acuity in both eyes, left eye more than right eye.

Associated with metamorphosia.

visual acuity at presentation:
RIGHT EYE: counting fingers at 1 meter. LEFT EYE: counting fingers at 1/2 meter.

Anterior segment examination was normal in both eyes.

No history of any systemic disease or significant family history.

History of multiple intra vitreal injections for the above complaint.

FUNDUS:

OD: Media-clear,optic disc size and shape normal.A whitish elevated subretinal mass with irregular contour present in the posterior pole within 30 **degrees** with scalloped edges, with pigmented epithelial change with subretinal heamorrhage in extrafoveal area in superior part at 1/2 disc diameter.

OS:Media – clear, optic disc size and shape normal.A whitish elevated subretinal mass with irregular contour present in posterior pole within 30 degrees with scalloped edges,with scarring at foveal area.

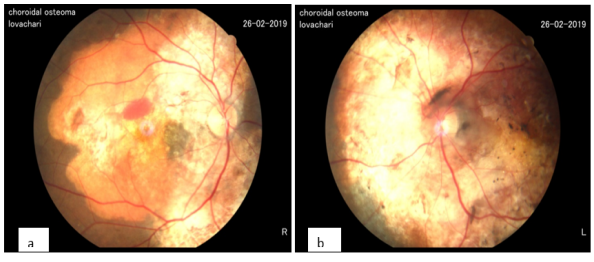

FIGURE1:a: fundus picture of of right eye showing choroidal osteoma in posterior pole involving macula with complication; b:fundus picture of left eye showing choroidal osteoma involving macula with scarring.

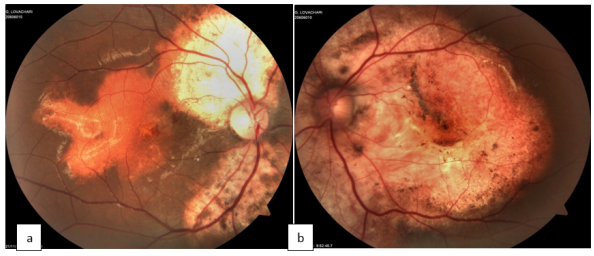

FIGURE 2: Over 10 years Photographic documentation of fundus pictures of both eyes. a:fundus of right eye showing whitish-orange lesion in juxtapapillary area superior and inferior to the disc involving macular area. B:fundus of left eye showing whitish-orange lesion involving the posterior pole.

In comparision to photographic documentation,shows that mass has increased in size over 10years.

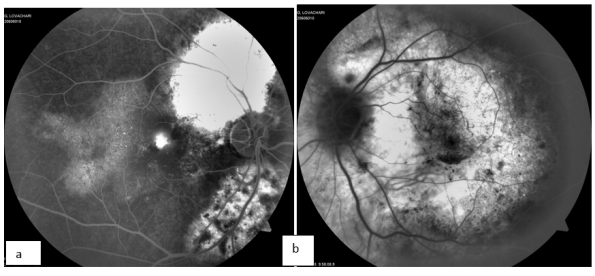

Figure3: FFA of both eyes; a: FFA of right eye shows dye leakage in foveal area with late staining of tumor.b: FFA of left eye shows late diffuse staining of tumor.b

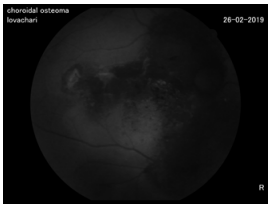

Figure 4: B- SCAN picture of both eyes showing focal subretinal calcification with shadowing posterior to lesion gives it the appearance of pseudo optic nerve.

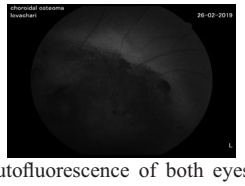

Figure5: Fundus autofluorescence of both eyes showing irregular hyperautofluorescence.

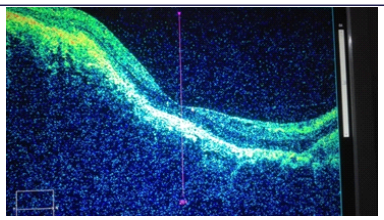

Figure6:OCT picture of right eye showing the foveal thinning.

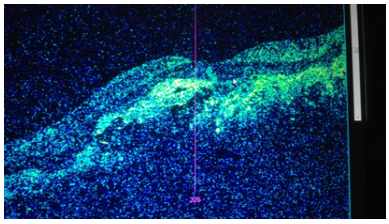

Figure7: OCT picture of left eye irregular foveal contour with scarred cnvm.

DISCUSSION:

- Choroidal osteoma is a benign calcified tumor that can focally replace normal vascular tissue with mature bone.
- The cause of this condition is unknown.
- Choroidal osteoma usually presents as a unilateral amelanotic mass and is typically discovered during the second or third decade of life.
- The diagnosis is established based on clinical and multiple imaging modality.
- As a consequence of rarity other ocular condition must be considered like amelanotic choroidal melanoma,choroidal metastasis and more.

CONCLUSION:

- Choroidal osteoma is a rare choroidal lesion of bone density with propensity for growth, decalcification, and development of CNVM.
- In the case presented here, presentation is bilateral and tumor growth over a 13 years period was noted, and decline in visual acuity with secondary complications.
- Long-term monitoring of the tumor will be important along with treatment of secondary complications.

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