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Rare and interesting case of choroidal melanoma presenting as a case of a congestive glaucoma left eye in a 55 years old male patient.

Background:


Choroidal melanomas are one of the commonest intraocular tumours which are kind of being malignant. Pigmented non pigmented more common in whites than blacks has got an early Tendency for liver meratasis however if diagnosed and treated in time one can prevent liver meratasis 6.5 per million in u s a and 7 per million in Denmark and other scandinavien countries Very difficult to diagnose due to the atypical manifestations however in most of cases present as solid or exudative retinal detachment on B scan ultrasound and indirect ophthalmoscopy malignant melanoma of c body yields poor results Diagnostic modalities are Direct ophthalmoscopy indirect ophthalmoscopy a scan ultrasound b scan ultrasound ct scan ultrasound bscan ultrasound f f angiography Key words progressive and painless visual field loss blued vision paracentral scotoma a c glaucoma a a c glaucoma sec Glaucoma ocular hypertension normal tension Glaucoma low tension Glaucoma vitrous floaters something Occular pain Case report 55 years old male patient presented with a c glaucoma Left eye received anyi glaucoma medication did not respond to routine ant glaucoma medecation no b scan was done later on second ophthalmic consultation bscan reveiled solid retinal detachment was refered for MRI scan braine for radiological confermation of melanoma however radiological report was inconclusive so it created a mistrust for the patient and he was left undiagnosed as a painful blind eye for 2b 2 years I saw patients in 2013 after 2 years of initial presentation I did bscan picked up solid retinal detachment and did mnrbi braine and my radioigist confirmed the radiological confermation of melanoma also MRI showed normal optic nerve chiasma radiation tract pit gland pit fossa and basal gangionnnormal so we're pons midbraine ventricles cerebral hemisphere were normal I performed block resection What will audience learn from your presentation?

The learning curve of this article is

- 1 If a c glaucoma is not responding to usual a g medecation do bscan ultrasound
- 2 Please do m ri scan for the radiological confermation of melanoma
- 3 Once we have melanoma confermation do enucleation
- 4 If tumour is less than 22 treatment observation
- 5 If more than 22 mm other treatments

Biography:

Dr Gowhar Ahmad sr consultant ophthalmologist Florence Hospital chanapora Srinagar Kashmir India. Has more than 40 years of experience in the field of ophthalmology national and international speaker. And has many international publications on JOJO MSOR respectively, posted more than 18000 and 1800 articles on docplex and linked in respectively influencer on curofy icon curofy for the year 2021. Editor in chief of international journal of scientific research member scientific committee of world congress of clinical pediatrics and neonatology member, scientific committee of world congress of d m and pediatric endocrinology member, international journal of ophthalmology and advanced research reviewer researcher and board member of many international journals has attended many international webinars as a speaker member, Kashmir ophthalmic society. Member aios all India ophthalmic society



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