Management of Retinoblastoma with Vitreous Seeds

(Retrospective Study)

Thesis

Submitted for Partial Fulfilment of M.S. Degree in **Ophthalmology**

By

Mona Khalil Mostafa El Awady

M.B, B.Ch. Faculty of Medicine, Cairo University

Supervised by

Prof. Dr. Magdy Mohamed EL Barbary

Professor of Ophthalmology Faculty of Medicine, Ain Shams University

Dr. Azza Mohamed Ahmed Said

Assistant Professor of Ophthalmology Faculty of Medicine, Ain Shams University

Faculty of Medicine
Ain Shams University
Cairo-Egypt
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Contents

List of Abbreviations	i
List of Figures	ii
List of Tables	V
List of Graphs	ix
Introduction	1
Aim of the Work	5
Chapter (1)	
* Etiology and Genetics	6
Chapter (2)	
* Clinical Features of Retinoblastoma	15
Chapter (3)	
* Pathology of Retinoblastoma	30
Chapter (4)	
* Diagnosis of Retinoblastoma	36
Chapter (5)	
* Management of Retinoblastoma with Vitreous See	eds47
Patients and Methods	80
Results	91
Discussion	131
Conclusion	141
Summary	142
References	149
Arabic Summary	182

List of Abbreviations

AES : Anterior eye segment

CEV : Carboplatin Etoposide Vincristine

CT : Computed tomography

EBR : External beam radiotherapy

TCT : Thermochemotherapy

IAC : Intra-arterial chemotherapy

IVC : Intravitreal chemotherapy

MRI : Magnetic resonance imaging

OCT : Optical coherence tomography

PCR : Polymerase chain reaction

PEDF : Pigment epithelium derived factor

PET : Positron emission tomography

Rb: Rentinoblastoma

DD : Disc diameter

SD : Standard deviation

US : Ultrasonagraphy

VEGF : Vascular endothelial growth factor

DNA : Deoxyribonucleic acid

RNA : Ribonucleic acid

List of Figures

Fig. No.	Title	Page No.
1	Inheritance in Rb.	9
2	Genetic counseling for Rb.	13
3	Clinical photograph of a child with leucocoria of the left eye.	15
4	Esotropia of the right eye necessitating	16
	fundus examination under anesthesia.	
5	Slit lamp appearance of diffuse anterior Rb.	17
6	Typical appearance of Rb.	19
7	Endophytic Rb.	20
8	Exophytic Rb.	20
9	Pseudohypopyon and tumor nodules on	21
	the iris.	
10	Bright white color of the large mass and	22
	the small inferiorly located tumors	
	floating in the vitreous	
11	Seeding patterns of Rb.	24
12	Flexner Wintersteiner rosettes.	33
13	Hormer Wright rosettes.	34
14	Indirect ophthalmoscopic examination.	37
15	B-scan showing echogenic mass with	38
	calcification (hyperreflective areas).	
16	CT scan of a patient with Rb	39
	demonstrating the intraocular	
	calcification seen within the tumor in the	
	right eye.	

List of Figures (Cont.)

	Dist of Figures (cont.)	D
Fig. No.	Title	Page No.
17	Characteristic features of Rb in MRI.	41
18	Rb in OCT.	43
19	Rb treated by EBR.	51
20	Osteosarcoma of the frontal bone in a 20	52
	years old patient with bilateral Rb who	0.2
	had undergone EBR at 1 year age.	
21	Cryotherapy.	55
22	Laser photocoagulation.	57
23	Thermotherapy.	59
24	Periocular edema 2 days after bilateral	66
	periocular (subTenon's injection of 10	
	mg/ml Carboplatin x 2 sites).	
25	Periocular injection of Topotecan	68
	hydrochloride in fibrin sealant.	
26	Treatment of Rb with IVC.	70
27	Procedural angiograms: balloon assisted	71
	method.	
28	Complication of IAC.	73
29	Fundus photos of the right eye shows (a)	122
	exophytic Rb mass with subretinal	
	(black arrow) and vitreous seeds (Group	
	D) before treatment which developed	
	initial improvement (b) followed by	
	resistance (c) to primary treatment in the	
	form of CRD plus focal therapy	
	necessitating secondary enucleation.	

List of Figures (Cont.)

Fig. No.	Title	Page No.
30	Fundus photos show (a) endophytic active Rb mass (black arrow) with active vitreous seeds (white arrow) nearby the main tumor and also present more than 3 mm from the mass (Group D) still active (b) following CRD and focal therapy and completely regressed main mass (c) and seeds (d) following addition of sub-Tenon's Carboplatin injection.	128

List of Tables

Table	Title	Page
No.		No.
1	Features of heritable and non-heritable Rb.	10
2	Reese-Ellsworth classification.	27
3	International classification of intraocular retinoblastoma.	28
4	Factors affecting transscleral drug delivery.	65
5	Mean age at diagnosis \pm SD in the study groups.	92
6	Comparison between group (1) and group (4) as regards the mean age at diagnosis (months) \pm SD.	93
7	Mean duration of follow up (years) \pm SD in the study groups.	93
8	Comparison between group (1) and group (4) as regards the mean age duration of follow up (years) ± SD.	94
9	Sex distribution among the study groups.	95
10	Comparison between group (1) and group (4) as regards the sex distribution.	96
11	Number and percentage of each presenting complaint in the study groups.	97
12	Comparison between group (1) and group (4) as regards the presenting complaint.	98
13	Number and percentage of eyes with positive and negative family history in the study groups.	100
14	Number and percentage of eyes with positive and negative consanguinity.	101

List of Tables (Cont.)

Table	Title	Page
No.		No.
15	Number and percentage of eyes in each	102
	group of international classification of	
	Rb in the study groups.	
16	Comparison between group (1) and	103
	group (4) as regards international	
1.7	intraocular classification of Rb.	104
17	Comparison between group (1) and	104
10	group (4) as regards tumor number.	106
18	Number and percentage of the tumor	106
19	location in the study groups. Comparison between group (1) and	107
17	group (4) according to the tumor	107
	location.	
20	Number and percentage of tumor base	108
	diameter in the study groups.	
21	Comparison between group (1) and	109
	group (4) as regards tumor base	
	diameter.	
22	Number and percentage of eyes with	110
	tumor thickness $>$ and ≤ 5 mm in the	
22	study groups.	111
23	Comparison between group (1) and group (4) as regards tumor thickness.	111
24	Number and percentage of each type of	113
27	vitreous seeds in the study groups.	113
25	Comparison between group (1) and	114
_	group (4) as regards type of vitreous	
	seeds.	
26	Number and percentage of eyes with and	115
	without subretinal seeds in the four	
	groups of the study.	

List of tables (Cont.)

Table	Title	Page
No.	1	No.
27	Number and percentage of eyes with and without subretinal seeds in the four groups of the study.	116
28	Number and percentage of thermotherapy sessions in primary treatment in the study groups.	118
29	Comparison between group (1) and group (4) as regards number of thermotherapy sessions in the primary treatment.	119
30	Number and percentage of each response to primary treatment in the study groups.	120
31	Mean interval of recurrence (months) ± SD in the study groups.	123
32	Comparison between group (1) and group (4) as regards the mean interval of recurrence (months) \pm SD.	124
33	Number and percentage of enucleated and salvaged eyes in the study groups.	124
34	Comparison between group (1) and group (4) as regards rate of ocular salvage.	125
35	Effect of the four treatment modalities on the rate of ocular salvage in relation to the groups of international classification of Rb.	127
36	Rate of ocular salvage in each type of vitreous seeds in the study groups.	129
37	Mean event free interval from last treatment (years) ± SD in the study groups.	130

List of tables (Cont.)

Table No.	Title	Page No.
38	Comparison between group (1) and group (4) as regards the mean event free interval from last treatment (years) ± SD.	130

List of Graphs

Graph	Title	Page
No.	Tute	No.
1	Sex distribution among the study groups.	95
2	Comparison between group (1) and	96
	group (4) as regards the sex distribution.	
3	Number and percentage of each	98
	presenting complaint in the study groups	
4	Comparison between group (1) and	99
	group (4) as regards the presenting	
	complaint.	100
5	Number of eyes in each group in	102
	international classification of Rb in the	
	study groups.	102
6	Comparison between group (1) and	103
	group (4) as regards international intraocular classification of Rb.	
7	Comparison between group (1) and	105
/	group (4) as regards tumor number.	103
8	Number of the tumor location in the four	106
O	groups of the study.	100
9	Number of tumor base diameter in the	108
	study groups.	
10	Comparison between group (1) and	109
	group (4) as regards tumor base	
	diameter.	
11	Number of eyes with tumor thickness >	111
	and \leq 5 mm in the study groups.	
12	Comparison between group (1) and	112
	group (4) as regards tumor thickness.	
13	Number of each type of vitreous seeds in	113
	the study groups.	

List of Graphs (Cont.)

Graph No.	Title	Page No.
14	Comparison between group (1) and	115
	group (4) as regards type of vitreous seeds.	
15	Number of thermotherapy sessions in	118
	primary treatment in the study groups.	
16	Comparison between group (1) and	119
	group (4) as regards number of	
	thermotherapy sessions in the primary	
	treatment.	
17	Number of each response to primary	121
	treatment in the study groups.	
18	Number and percentage of eyes	125
	enucleated and salvaged in the study	
	groups.	
19	Comparison between group (1) and	126
	group (4) as regards rate of ocular	
	salvage.	

Introduction

Rentinoblastoma (Rb) is the most common primary ocular malignancy of childhood. There are two forms heritable and non heritable. Presentation is in the first few years of life, sometimes in the neonatal period. Early detection and prompt treatment can give cure rates up to 95% for intraocular tumors, but extraocular diseases carries a very high mortality. The diagnosis is essentially clinical and biopsy is contraindicated due to the risk of extraocular spread. (*Parulekar.*, 2010)

The presence of vitreous seeds has been recognized as a major risk factor for eye survival. Vitreous seeding is characterized by presence of tumor cells in the vitreous cavity. It may also appear during the treatment course (secondary) in eyes devoid of vitreous seeds at diagnosis. A possible iatrogenic component is present which is laser thermotherapy used for treatment. Another cause of secondary vitreous involvement is the sudden vitreous dispersion of large tumors shortly after the initiation of chemotherapy due to a necrotic disruption of the internal limiting membrane. (*Gombos et al.*, 2006)