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Case Report

Eye Rhabdomiosarcoma: An unusual Localisation about a Case Report

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Abstract: Rhabdomiosarcoma is a malignant and life-threatening tumor. It is more common in children than in adults. Oftentimes it is located in soft tissue; it occurs in the orbit. We report a unilateral case in a-50-year old lady..
Keywords: Rhabdomiosarcoma, tumor, mesenchymal cells

INTRODUCTION

Rhabdomyosarcoma (RMS) is a malignant tumor derived from the mesenchymal cells, with varying degrees of striated muscle cell differentiation and chromosomal or genetic imbalances [1]. About 40% of new cases of RMS arise from the head and neck, including parameningeal sites; the orbit and eyelid make up 10% of all new cases. Orbital rhabdomyosarcoma is the occurrence of this tumor in the area of the eye [2, 3]. Orbital rhabdomyosarcoma (RMS) historically has been associated with an excellent survival rate. The majority of patients are cured with the use of both chemotherapy and radiation therapy, but significant number experience important late sequelae of treatment [4].

CASE REPORT

A 52 –year- old lady presented with gradual left eye proptosis for nine months. She had no special history. She was complaining of slight painful red eye. The visual acuity was 6/6 in the right eye and light perception in the left. On examination, the left eye was bulging, the conjunctiva was pink. The eye was deviated outward and was associated with a total opacification of the lens. The ocular motility was restricted in adduction. The right eye was normal and no lymphadenopathy was noted. A Computed Tomography (CT) scan was performed and revealed a well defined mass in the left orbital cavity pushing the left eyeball outside the orbit and outward. A biopsy was then performed and the histopathologic examination showed that the tumor was an alveolar rhabdomyosarcoma. The patient was referred to the oncologist for chemotherapy prior to surgery. She accepted to undergo chemotherapy but was totally reluctant to surgery.

Fig. 1: photograph showing the proptosis

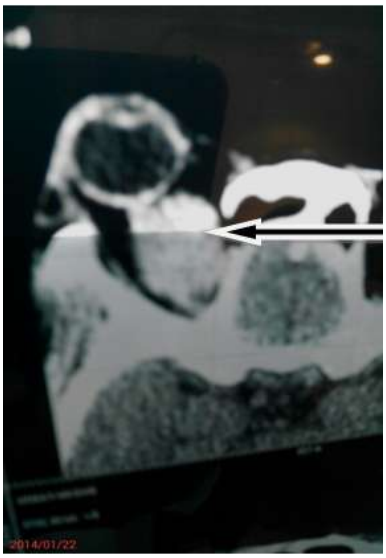

Fig. 2: CT scan showing a well defined mass in the left orbital cavity (arrow)

DISCUSSION

Rhabdomyosarcoma (RMS) is a malignant mesenchymal tumor. It originates from pluripotential mesenchymal cells that have the capacity to differentiate into skeletal muscle [5].

Primary Orbital RMS is mainly a disease of young children, where 90% of cases present before the age of 16 years old. The mean age of onset is 5-7 years old. Orbital RMS usually presents as a space-occupying lesion in the orbit during the first decade and may mimic other neoplastic or inflammatory masses [6, 7]. Most ocular RMS arises from the soft tissues of the orbit and on some occasions can arise in other ocular adnexal structures and even within the eye. Children are likely to have embryonal rhabdomyosarcoma, whereas young adults tend to have alveolar. The common ocular findings of orbital rhabdomyosarcoma include proptosis, globe displacement, conjunctival congestion, blepharoptosis, dilated episcleral vessels, and ocular motility restriction [8]. Classic clinical picture is sudden onset and rapid evolution of proptosis without history of previous trauma or sign of upper respiratory tract infections; ptosis and strabismus may also present [9, 10].Our patient had proptosis with restriction of the ocular motility along with conjunctival congestion.

Rrhabdomyosarcoma is very uncommon in adults; pleomorphic rhabdomyosarcoma is the one which is more common in older adults. [11].

CONCLUSION

Rhabdomyosarcoma is a highly malignant tumor that is not common in adult. Its management may involve chemotherapy, radiotherapy and surgery. Its prognosis depends on the earliness of the diagnosis and management.

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