Bilateral Choroidal Metastases from Mesothelioma

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Choroidal metastases are uncommon. Most reported cases of choroidal metastases are from breast or lung cancer.1 We have not been able to find any reports of choroidal metastases developing in a patient with mesothelioma. Here we present such a case.

CASE REPORT

A 69-year-old retired carpenter with previous asbestos exposure was diagnosed with pleural epithelioid mesothelioma in 2003. He was treated with a pleural decortication but subsequently relapsed in supraclavicular and axillary lymph nodes and in the peritoneum. He was treated with palliative radiotherapy to symptomatic sites and then with chemotherapy, including pemetrexed, carboplatin, and gemcitabine. After initial response, his disease progressed.

In late 2005, he presented with rapidly progressive loss of vision. Ophthalmologic assessment revealed bilateral choroidal lesions consistent with metastatic deposits (Figures 1 and 2). Differential diagnoses included choroidal melanomas, especially amelanotic melanomas, and benign lesions such as hemangiomas, and inflammatory granulomas.1 The presence of multiple lesions in one eye and the involvement of both eyes in the setting of known metastatic mesothelioma established the diagnosis of choroidal metastases.1

Computed tomography scans of the brain, orbit, chest, abdomen, and pelvis were also performed showing overall progression of disease within the mediastinum, abdomen, peritoneum, and lungs and possible cerebellar metastasis (Figure 3).

He was treated with dexamethasone and bilateral orbital irradiation to a dose of 30 Gy in 10 fractions using 6-MV photons. Following completion of radiotherapy, his vision stabilized, and 2 months after treatment, he is able to read, although with some difficulty. The patient is

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alive 5 months after his presentation with choroidal metastases, and 3 years after his initial diagnosis. Unfortunately, his systemic metastatic disease continues to progress, requiring further palliative radiotherapy for symptom control.

Although mesothelioma is not usually considered a radiosensitive disease, useful palliation of symptoms arising from localized deposits can often be achieved with modest doses of radiotherapy as we have demonstrated here and previously.²

REFERENCES