

## P104

## PTERYGIUM POST-OPERATIVE IRRADIATION RESULTS AND COMPLICATIONS

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Even though a benign disease, pterygeon can sometime have on aggressive behaviour, by its multiple recurrence after a surgical excision. Recurrence rate is between 30% to 80% after many authors opinion, which leads to a great morbidity based in the fact, there has been different alternative treatment, such as multiple surgical techniques associated or not to Mytomicina C and Betatherapy.

From October 1986 in Santa Maria Hospital decided to treat recurrent pterygeon and giant primary pterygeon with the irradiation of Estroncio 90. We try to evaluate the efficacy of this treatment, concerning recurrence rate, and eventual problems with complications of this therapy.

A prospective analysis was made in 57 patients, with 61 primary or recurrent pterygeon, in which after surgical excision with Terson technique, irradiation with Estroncio 90 were made 2 and 20 hours after resection in doses of 30 to 60 Gy, in 3 to 6 fractions during 5 to 36 days. Of the 57 studied patients, only 49 were followed until the end of the study, been 23 male and 26 female, and a mean age of 45,8 years old.

We analysed recurrent rate in a group of recurrent pterygeon (group I - 14,5%) and in a group of primary pterygeon (group II - 0,7%). More frequent problems were scleral atrophy (4) and chronic irritation (6), found in 11 patients of group 2 and 2 patients of group II.

We can therefore conclude that the association of surgery with betatherapy diminishes the local recurrence and the number of problems in patients without previous recurrence.

## P 105

## PERIOCLAR MERKEL CELL CARCINOMA: MANAGEMENT AND HISTOPATHOLOGY

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**Background:** Merkel cell carcinoma is a highly malignant cutaneous neoplasm with a high rate of local recurrence and systemic metastasis. Ten percent of all Merkel cell carcinomas involve the periocular region. We present three patients.

**Patients and Methods:** Patient 1 (B.H.): 86-year-old male presenting with a painless reddish tumor involving two thirds of the right upper eyelid and a basal cell carcinoma of the lateral lower eyelid centrally. Wide surgical excision with full thickness resection of the eyelid and reconstruction using a semicircular flap were performed. Patient 2 (Sch.K.): 83-year-old female presenting with a purplish tumor involving the central two thirds of the left upper eyelid. Wide full thickness resection of the eyelid was done. Reconstruction was performed using a Cutler-Beard bridge flap. Patient 3 (M.Ch.): 78-year-old female presenting with a reddish tumor involving the left eyebrow laterally. Wide excision was done and reconstruction was performed using sliding flaps. No patient showed evidence of systemic disease. The excised specimens were processed for histopathologic, immunohistochemical and electron microscopic studies.

**Results:** Histopathologically, the tumor cells showed round-to-oval uniform nuclei with finely dispersed chromatin, and one to three inconspicuous nucleoli. Mitotic figures were numerous. Immunohistochemical studies showed positive reactions for NSE, cytokeratin 18 and chromogranin A. Electron microscopy revealed membrane-bound, dense core granules. After a follow-up of 3 years, there was no evidence of local recurrence or systemic metastasis in 2 patients.

**Conclusions:** Characteristic features of Merkel cell carcinoma include a reddish or purplish erythematous hue and a fast tumor growth. Therapy of choice is wide surgical excision of the mass with a suggested margin of 5 mm, preferentially with frozen section control. Immunohistochemical and electron microscopic studies may be helpful in establishing the diagnosis and differentiating this tumor from other poorly differentiated neoplasms.

## P 106

## TITLE : THE SUBPOPULATION OF LYMPHOCYTES' INFILTRATING IN THE KERATOCONJUNCTIVAL SQUAMOUS CELL CARCINOMA

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**Purpose** We investigated the subpopulation of lymphocytes infiltrating in the keratoconjunctival squamous cell carcinoma.

**Methods** Five specimens embedded in paraffin were sectioned and stained with immunohistochemical technique. Used primary antibodies were LCA, MT-1, UCHL-1 and L-26. The number of positive cells for each primary antibody were counted and positive rates were calculated.

**Results** In three specimens, lymphocytes were infiltrated deeply into the cell nest of the tumors. Almost all of these lymphocytes were T lymphocytes. In the other two specimens, few lymphocytes were infiltrated into the cell nest of the tumors.

**Conclusions** The keratoconjunctival squamous cell carcinoma is under the immunological surveillance by the host. The degree of the immunological regulation by the host vary in each case.

## P 107

## TITLE: ENDOSCOPY OF THE ORBIT: A NEW SURGICAL AND DIAGNOSTIC TECHNIQUE. EXPERIMENTAL MODEL.

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**Purpose:** The approach to the retroequatorial orbital cavity with surgical or exploratory objectives is limited because of its situation.

With the aim to avoid these limitations we developed an experimental model of orbital endoscopy based in endoscopic techniques applied in others areas of surgery and we tried to evaluate the possible applications in the orbit.

**Methods:** We have used pigs of Yorkshire of 15 Kg. weight and 7 weeks of age. Under general anesthesia, we used an arroscope of 1.9 mm diameter. The necessary space was created injecting physiologic solution.

**Results:** We could observe extrinsic ocular muscles, arterial and veins of the ophthalmic branches, optic nerve and branches of the V nerve. The image of the orbital cavity is good and we could visualize the posterior orbit. Surgical trauma is minimum without appearance of hemorrhages nor tissue damage.

**Conclusions:** We estimate that endoscopy is useful in the orbit, but more experiences are needed.