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Bilateral Diffuse Uveal Melanocytic Proliferation: a case report

Eric Vieira[1], João Guilherme Oliveira de Moraes[1], Alex Treiger Grupenmacher[1], Arthur Onofre Beltran Filho[1], Jéssica Calixto Calil Penteado[2], Laís Mileski Schumiguel[2], André Daniel Dijkstra[2], Lilitth Santos Della Giustina[3]

1. Retina Curitiba 2. Hospital Universitário Evangélico Mackenzie, Brasil 3. Universidade do Sul de Santa Catarina

RETINA CURITIBA
CENTRO DE TRATAMENTO ESPECIALIZADO

Hospital Universitário Evangélico Mackenzie

PURPOSE

To report a case of a patient diagnosed with Bilateral Diffuse Uveal Melanocytic Proliferation (DUMP).

METHODS

Analysis of medical records, fundus photography and optical coherence tomography (OCT).

RESULTS

A 59 years old female, sought the ophthalmology service in Curitiba complaining of visual loss in both eyes (OU) with progression for more than 1 year. No previously history of eye diseases and surgeries. She mentions diagnosis of uterine and ovarian cancer, with renal and hepatic metastasis, with no oncological treatment at the moment.

On examination, her best visual acuity was absence of light perception in the right eye and light perception in the left eye. In biomicroscopy, pigmented iris nodules, cataracts and iris neovessels were found in OU. On fundus examination, the patient presented round pigmented areas at the posterior pole in OU.

She had an autofluorescence fundus photography, which showed changes in the retinal pigmented epithelium (RPE) in a “leopard spot” pattern in OU and OCT with bilateral serous detachment of the retina.

DISCUSSION

BDUMP is a rare paraneoplastic disease characterized by a benign proliferation of melanocytes in the uveal tract[1]. The most associated neoplastic cause in women is ovarian cancer and in men, lung cancer, and occurs through the production of melanocytic growth factors by tumor cells.[2–3]

The main characteristics of BDUMP are: multiple round or oval red-orange spots at the level of the RPE, usually at the posterior pole, with a classic pattern described as 'leopard spots'; multiple, focally elevated, pigmented and non-pigmented uveal melanocytic tumors with diffuse thickening of the uveal tract; exudative retinal detachment; rapidly progressive cataract. In biomicroscopic examination, pigmented iris nodules can be found.[1–3]

The goal of treatment is to find and treat underlying malignancies, which can performed with radiotherapy, corticotherapy or plasmapheresis.[1–2] The prognosis is reserved, with evolution to blindness, in some cases, within 1 year from the presentation of the disease.[4]

IMAGES

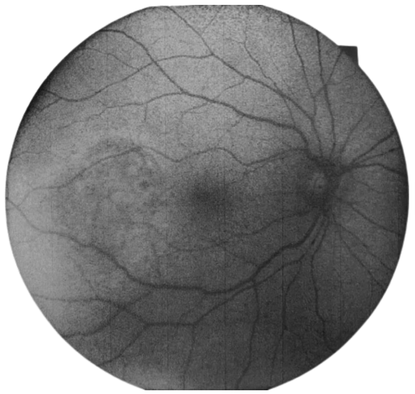

Image 1: Autofluorescence of the right eye

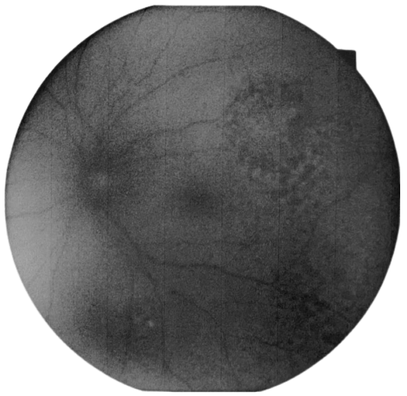

Image 2: Autofluorescence of the left eye

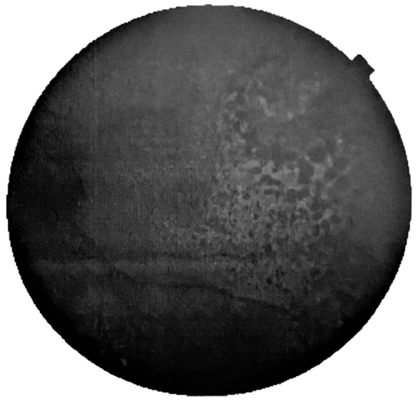

Image 3: Autofluorescence of the left eye

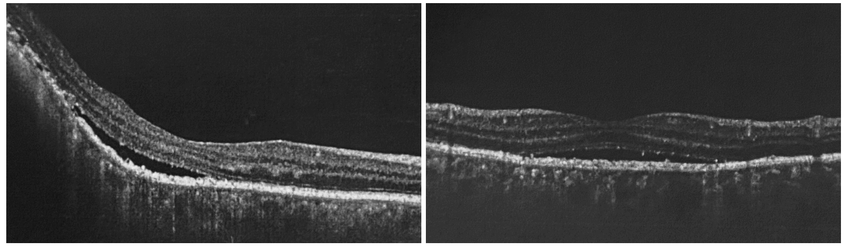

Image 4: Bilateral serous retinal detachment (OCT)

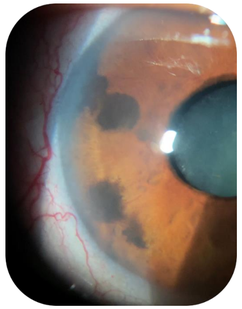

Image 5: Pigmented iris nodules

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