

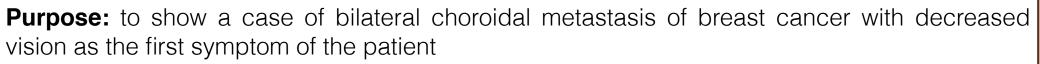




BILATERAL SEROUS DETACHMENT AS THE FIRST MANIFESTATION OF BREAST CANCER.

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Case Report: The 53-year-old female patient presented with decreased vision in her left eye since 2 days ago. Past ocular, medical and family histories were unremarkable and she was not taking any medications. Her best corrected visual acuity was 20/20 in the right eye and 20/200 in the left eye. Ocular motility was normal. There was no relative afferent pupillary defect.

Anterior segment examination was revealed normal. IOP was 17 mmHg in both eyes. Dilated fundus examination revealed in the right eye 2 plaques of yellowish lesion with indistinct borders in temporal arcade and one plaque in nasal arcade (figure 1). The left eye revealed macular detachment and elevated mass in the macula (figure 2).

OCT displayed small subretinal fluid nasal and extensive serous macular detachment macular on the left eye (figure 3). Fluorescein angiography show punctate areas of hyper fluorescence over the lesions. (figura 4).

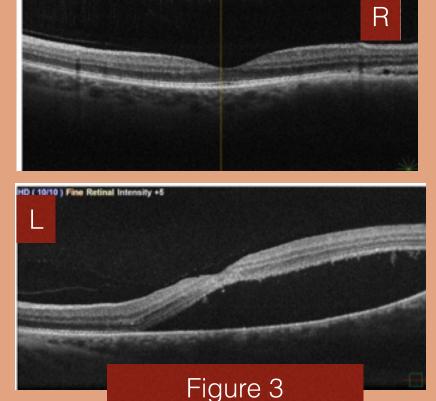
The patient underwent extensive work up including MRI showed osteolytic lesions in the brain, bone and vertebral column. Thoracic CT revealed diffuse pulmonary nodules. Breast ultrasound showed one solid nodule of $2.6 \times 3.0 \times 1.0$ cm on the left and another of $2.9 \times 2.4 \times 0.7$ cm on the right breast. Breast biopsy revealed invasive ductal carcinoma. At the moment, the patient has been treated with systemic chemotherapy.

Discussion: Breast cancer is also the most common malignancy to metastasize to the uvea.¹ It accounts for 40% of all uveal metastasis.² Shields et al in their series of 520 patients with uveal metastases found that the most common primary tumor site was breast (47%), followed by lung (21%), and gastrointestinal tract (4%)¹

Choroidal metastasis is the smallest detectable lesion of metastatic breast cancer and was detected at a median of 3 years after diagnosis of the primary cancer. ³

A striking majority of choroidal metastases from breast cancer are yellow in color, plateau shaped, associated with subretinal fluid and located posterior to the equator. Choroidal metastases from breast cancer was more commonly bilateral (33%) and multifocal (32%) compared with other primary neoplasms.²









Conclusion: bilateral serous detachment can be he first sign for metastasis, therefore, it is important to perform extensive work up including MRI. Breast cancer is the most common lesion to malignancy to the uvea, accounting for 40% of all uveal metastasis. In some patients, the decreased vision can be the first symptom. The classic lesion is yellowish, plateau shaped and associated with sub retinal fluid.

References

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