

Rhabdomyosarcoma of Eyelid: A picture presentation

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Abstract

This is a picture review of a case of orbital rhabdomyosarcoma. The course of patients diagnosis, treatment and outcome is briefly presented.

Introduction

Rhabdomyosarcoma is the most common pediatric soft tissue sarcoma. Overall, about 9% of these tumors occur in the orbit area¹. The embryonal type accounts for about 60% of the cases and has an intermediate prognosis. Proptosis is the most common clinical manifestation in orbital rhabdomyosarcoma¹. The standard treatment for these patients includes chemotherapy and surgery with or without radiotherapy².

Report of the case

A 9 year- old girl developed left upper eyelid mass and eye proptosis (Figure 1A and 1B), local pain, and visual impairment with rapidly increasing size of the mass. However, other physical exams were normal.

Mass biopsy also was performed which showed embryonal type rhabdomyosarcoma. In addition, orbital CT scan indicated orbital enlargement and temporal bone involvement. Due to the lack of follow-up the diagnosis was delayed.

Bone scan, chest CT scan (Figure 2C and 2D), and bone marrow biopsy were evaluated for detection of metastasis and the results were negative. The patient received several courses of chemotherapy as a high risk rhabdomyosarcoma, including Ifosphamide, Mesna, Actinomycin, and Vincristine, and local radiotherapy was performed in addition to eye enucleation. However, the patient did not respond to the treatment completely And was referred to a plastic surgeon for tumor removal.



Figure 1(A, B): Eyelid mass causing proptosis lateral (A) and anterior view (B).

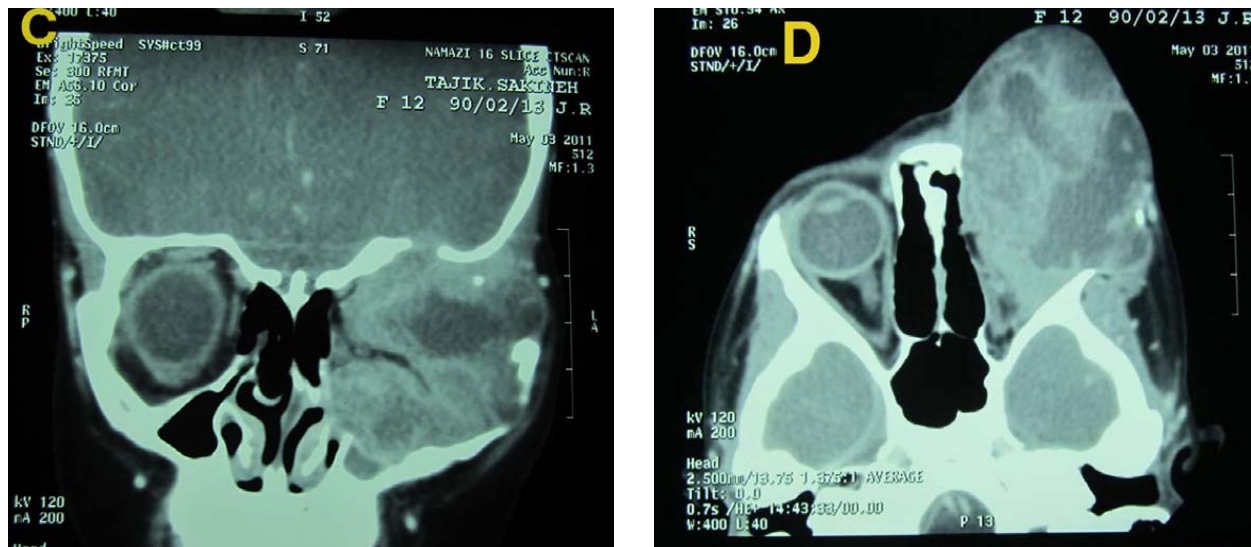


Figure 2 (C, D): CT scan of orbit showed a huge orbital mass in the left orbit extended to the posterior portion with optic nerve destruction, frontal, ethmoid and maxillary sinuses were also involved. A soft tissue mass is observed outside of the orbit protruding to the zygomatic bone and ear canal.

Conclusion

It seems that delay in diagnosis and treatment of orbital rhabdomyosarcoma can affects their prognosis and survival.

References

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2. Egas-Bejar D, Huh WW. Rhabdomyosarcoma in adolescent and young adult patients: current perspectives. *Adolesc Health Med Ther.* 2014;5:115-25.