

OPHTHALMOLOGIC EXPRESSION AS A LATE RECURRENCE OF BREAST CANCER

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Breast cancer in women is considered the primary tumor that metastasizes most frequently to the choroid. Although it occurs infrequently, ophthalmologic expression can be key in diagnosis of late recurrence.

In this communication we shall present the case of a 66-year-old woman with history of breast cancer in remission since 2012, without active follow-up in Gynecology-Oncology consultations since 2016. She came with loss of vision in the right eye of several days of evolution.

After a detailed anamnesis, the fundus was explored, detecting an apparent tumor near the optic nerve with a mottled pattern, associated with exudative detachment; therefore performing fluorescein angiography and type B ultrasound, confirming the initial findings. The examination was completed with optical coherence tomography, revealing diffuse raised lesions with "lumpy bumpy" image and subretinal fluid, forming an inferior retinal detachment. With suspicion of late recurrence of breast cancer, oncology department was contacted, extending the study with MRI and thoracic CT, confirming this suspicion after biopsy of a lung nodule.

Exudative retinal detachment may be associated with inflammatory conditions or malignant lesions. Choroid metastases are an infrequent finding, although in this location they are more common than primary tumors.

Based on our case and literature review, we conclude that ophthalmologic manifestations may be the first manifestation of a breast tumor. Likewise, in case of exudative retinal detachment, it is important to perform a good anamnesis and evaluate complementary tests as a screening for tumor pathology, as well as to always maintain a comprehensive approach of the patient.