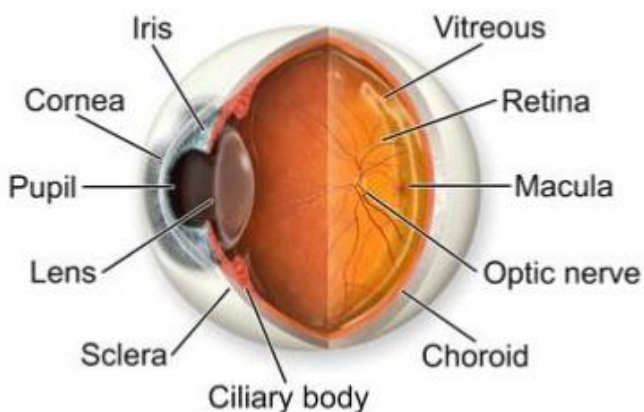


Uveal melanoma

What is uveal melanoma?

Uveal melanoma is a rare malignant (tumorous) cancer, affecting seven people in every million each year. It develops from cells called melanocytes, which are found in the uvea (the middle layer of tissue in the wall of the eyeball). The uveal tract is made up of the choroid, ciliary body and iris.

Normal Eye Anatomy



What is the cause of uveal melanoma?

There is no known cause of uveal melanoma and it is not related to sun exposure. However, uveal melanoma is more common in those who are fair skinned and have grey/blue eyes. The average age at which an ocular melanoma develops is 55-60 years old. If diagnosed in younger patients, there

may be an association with atypical benign moles or skin melanoma.

What are the symptoms of uveal melanoma?

For some people there may not be any symptoms and the tumour is found during a routine eye test. For others, it can cause visual disturbances such as flashing lights, blurred vision or a shadow in one eye.

How is the diagnosis made?

During your first visit to the ocular oncology clinic at Moorfields, we will carry out the following investigations:

- vision test and pupil dilation of both eyes using eye drops.
- clinical examination of the eyes.
- imaging of the lesion.
- ultrasound scan of the eye to determine the size and location of the lesion.

Sometimes it is also necessary to perform an intravenous angiogram – this involves an injection in the arm or back of the hand of one or two dyes (fluorescein and/or indocyanine green). Photographs are then taken at timed intervals to look at the blood flow of the



complications, which can damage vision.

Photodynamic therapy

Photodynamic therapy involves the slow injection of a drug, called visudyne (verteporfin), through a vein in your arm. Once the injection has been performed, a low power laser is shone into the eye, focusing on the area being treated for just over a minute to activate the visudyne. Photodynamic therapy is reserved for only the smallest sized tumour (choroidal melanoma). The success rate is lower than conventional ruthenium plaque brachytherapy or proton beam radiotherapy. Visual complications are rare.

Enucleation (removal of the eye)

We usually only consider removal of the eye if:

- your tumour is too large to treat with ruthenium plaque brachytherapy or proton beam radiotherapy.
- your eye is already painful, due to high pressure inside the eye.
- the tumour is growing through the wall of the eye.

Exenteration (removal of the eye and surrounding tissue)

This is only considered if a large amount of tumour has grown through the wall of the eye and cannot be removed with an enucleation.

Local resection (surgical removal of the tumour)

Small melanomas near the front interior of the eye can occasionally be surgically removed under general anaesthetic. Additional ruthenium plaque brachytherapy is often recommended.

Iridectomy (surgical removal of iris melanoma)

Small melanomas on the iris (the coloured part of the eye) can occasionally be surgically removed under a general anaesthetic. Additional ruthenium plaque brachytherapy is often recommended.

Who decides what treatment I will need?

The treatment decision is an agreement between you and the consultant in charge, following a discussion on the advantages and disadvantages of each option above. The decision is also discussed at a multidisciplinary team meeting, when other senior members of the team and cancer specialist nurses will have an opportunity to contribute towards your treatment and care plan.

Please note

If you do require an operation this will be carried out at St Bartholomew’s Hospital or Moorfields Eye Hospital. The medical and nursing team will explain where you will receive your treatment when they discuss your treatment plan with you.





In need of urgent help?

If you are feeling very **distressed, despairing or suicidal and need immediate help**, please contact your GP and ask for an emergency appointment. If your GP is closed, please consider calling the national non-emergency number 111.

You can also go to your nearest Accident and Emergency (A&E) department where a mental health practitioner will be able to assess you and give you appropriate help.

Other sources of support available: **Macmillan Cancer Support**

www.macmillan.org.uk

Tel: 0808 808 00 00

Macmillan provide practical, medical and financial support and advice for people going through cancer.

Changing Faces

www.changingfaces.org.uk

General enquiries tel: 0845 4500 275

Support service helpline: 0300 012 0275

A charity for people and their families who are living with conditions, marks or scars that affect their appearance.

Maggies Cancer Support Service

St Bartholomew's Hospital

London

www.maggiescentres.org

Certificate of Visual Impairment (CVI)

Information about sight loss and registration.

Phone: 0207 566 2355

Mental health support -Samaritans

A free 24 hour helpline for anyone in mental distress.

Phone: 116 123 or email:

jo@samaritans.org

Website: www.samaritans.org

MIND

Provides mental health information, advice, counselling and advocacy.

Phone:0300 123 3393 or email:

info@mind.org.uk

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www.moorfields.nhs.uk

Moorfields Direct telephone helpline

Phone: 020 7566 2345

Monday-Friday, 8.30am-9pm

Saturday, 9am-5pm

Information and advice on eye conditions and treatments from experienced ophthalmic-trained nurses.

Patient advice and liaison service (PALS)

Phone: 020 7566 2324/ 020 7566 2325

Email: moorfields.pals@nhs.net

Moorfields' PALS team provides confidential advice and support to help you with any concerns you may have about the care we provide, guiding you through the different services available





at Moorfields. The PALS team can also advise you on how to make a complaint.

Your right to treatment within 18 weeks

Under the NHS constitution, all patients have the right to begin consultant-led treatment within 18 weeks of being referred by their GP. Moorfields is committed to fulfilling this right, but if you feel that we have failed to do so, please contact our patient advice and liaison service (PALS) who will be able to advise you further (see above). For more information about your rights under the NHS constitution, visit www.nhs.uk/choiceinthenhs

