Capillary Hemangioma of Conjunctiva: A Rare Ocular Surface Growth

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We report a case of a 17 year old mentally retarded male with a previous history of seizures who presented with a painless, progressively increasing mass in the right lateral conjunctival region. Histopathologic examination of the excised mass revealed it to be a capillary hemangioma.

Keywords: Hemangioma, ocular, oral, excision.

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17 year old male was brought by his father with a history of a painless, progressively increasing mass in the right eye since three months. The patient was a known case of mild mental retardation. The patient was receiving treatment for gingivitis in the form of tablet metronidazole from dental department. The patient's prenatal, perinatal, postnatal and family histories were all unremarkable. There was no history of any other systemic disease, trauma, seizures, ocular infection and surgery. His visual acquity was 6/24 in both the eyes without any improvement on pinhole; pupillary reactions, ocular movements, fundus and intraocular pressure were normal bilaterally. Examination of her right eve revealed a reddish, pedunculated, smooth, mobile mass with its surface revealing multiple blood vessels. It was located in the bulbar conjunctiva near the limbus at 8 o'clock position and was of 9mm x 8mm size (Figure 1). The slit lamp examination of the left eye was normal. Routine blood and urine examinations were normal. An excision biopsy of the mass under local anaesthesia was planned. A preoperative general physical and systemic examination was carried out by the medical specialist and a go ahead was given for surgery. Excision biopsy

of the mass was done (Figure 2) and the patient was started on topical antibiotic-steroid eye drops. The patient reported back to us after two weeks postoperatively along with the histopathological report which revealed the conjunctival mass to be capillary hemangioma (Figure 3). The patient was added timolol drops to decrease the incidence of recurrence of the lesion.



Figure 1: Patients Photograph Showing the Lesion.



Figure 2: Patients Photograph-First Postoperative Day.



Figure 3: Histopathological Report.

DISCUSSION

Conjunctival vascular tumours are not common and a few examples of the lesions commonly found in this group are pyogenic granuloma, lymphangioma, and capillary hemangioma¹. A haemangioma is a developmental malformation of blood vessels and is an example of a hamartoma. It may be capillary, venous or arterial. Its incidence is reported as 1-2% of all benign growths of the conjunctiva².

Conjuctival hemangiomas are rare tumors³ which are present at birth as reddish elevated lesions increasing in size over the next few months and then spontaneously involuting by 4–5 years of age⁴. These tumors can be asymptomatic or may cause visual impairment if large sized. Capillary hemangiomas show a greater preponderence in females (especially with a history of chorionic-villus sampling during pregnancy) and premature or low-birth-weight infants. They have an association with cardiorespiratory and hematologic disorders⁵.

Histopathological examination shows proliferative vessels lined by endothelial cells without nuclear atypism. They generally locate to the superior orbit and lids. Acquired capillary hemangioma of the periocular region is very rare. The main differential diagnoses are pyogenic granuloma, angiosarcoma, and acquired tufted angioma of the eyelids⁶. The treatment modalities currently available include intralesional and systemic steroids, bleomycin, interferon- α , topical timolol maleate, oral propranolol, laser treatment and surgical excision⁷. Caution should be taken in using beta blockers in patients of hemangioma with cardiorespiratory disorders as worsening of respiratory and cardiac symptoms can occur⁸.

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