

Conjunctival Leiomyoma “A Case Report”

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A 16 years old boy presented to the eye OPD with a conjunctival growth of one year duration which was gradually increasing in size. On examination visual acuity was 6/6 in both eyes. It was a conjunctival growth originating from the inferior fornix and lateral end of medial canthus, it was like a pedunculated, congested, out pouching of the conjunctiva. We opted for excision biopsy and per-operatively it was found to be very vascular and tough tissue to cut. End to end conjunctival suturing was done to cover the defect. The histopathology done at Liaquat National Hospital, histopathology lab. showed it to be a leiomyoma.

Conjunctival growths can have many etiologies and occasionally one is surprised with the histopathology that comes ones way.

To find a leiomyoma in the histology of a conjunctival growth was a real surprise; it being a tumor of the female uterus¹. Leiomyoma is a benign tumor that usually arises from smooth muscle of vascular tissue, subcutaneous tissue, stomach, large and small intestine and the uterus. Uterus being the most common site. Orbital leiomyoma has been reported since 1896.

CASE REPORT

A 16 years old boy presented to the eye OPD with a conjunctival growth of one year duration which was gradually increasing in size. He only came for cosmetic reasons. There was no history of trauma, infection, surgery or bleeding from the lesion.

On examination visual acuity was 6/6 in both eyes. It was a conjunctival growth originating from the inferior fornix and lateral end of medial canthus, it was like a pedunculated, congested, out pouching of the conjunctiva.

The rest of the ocular examination was unremarkable and within normal limits. Movements were full with no double vision and it looked benign, well pedunculated, conjunctival growth. No further investigation like B-scan or C.T scan were done as they

would not have contributed to current management to the patient as the patient only wanted excision of the growth.

We opted for excision biopsy and per-operatively it was found to be very vascular and tough tissue to cut. End to end conjunctival suturing was done to cover the defect. The biopsy showed it to be a leiomyoma. The cut section revealed conjunctival and skin tissue with intact surface lining. The underlying stroma was collagenous and the lesion was fairly circumscribed composed of spindle shapes cell showing a vaguely whorled arrangement. These cells were highlighted with trichome. Immunohistochemistry was done to confirm the diagnosis (Anti-smooth muscle actin antibody)² (Fig 2-4). No atypia or mitosis were seen.

DISCUSSION

Leiomyoma of conjunctiva is one of the rarest tumors of the eye. The only report which we could find was by Brannan SO in 2003⁵. As far as we know it has never been reported by anyone in Pakistan.

Leiomyoma is a benign tumor that usually arises from the smooth muscle of blood vessels, subcutaneous tissues, stomach, large and small intestine and uterus, the last being the most common site^{1,2}. Histopathologically they may resemble any “spindle cell” tumor, and immunohisto chemical

staining with smooth muscle actin is necessary to differentiate this tumor from other spindle cell tumors.²⁻⁵

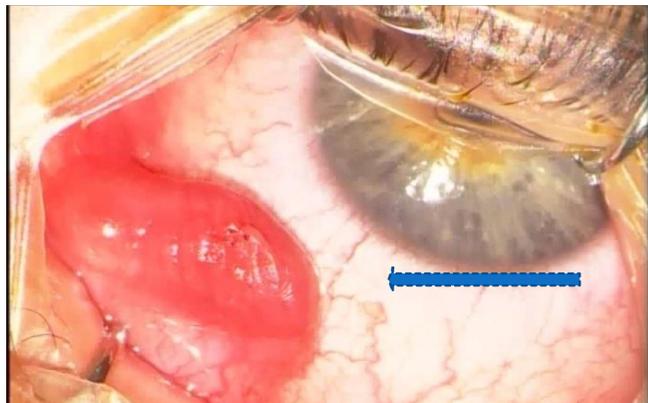


Fig. 1: Conjunctival Lesion

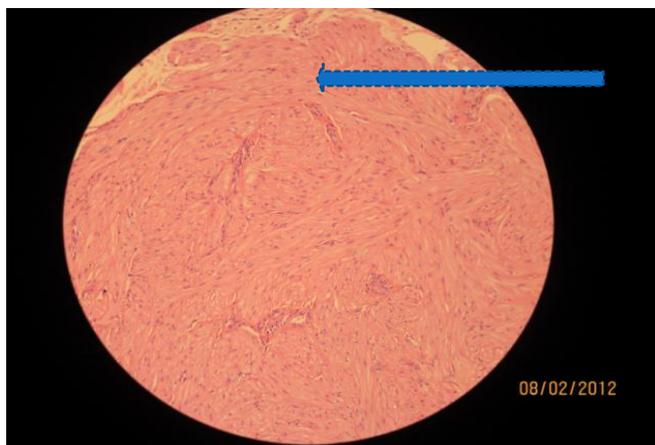


Fig. 2: Interlacing bundles of spindle shaped cells

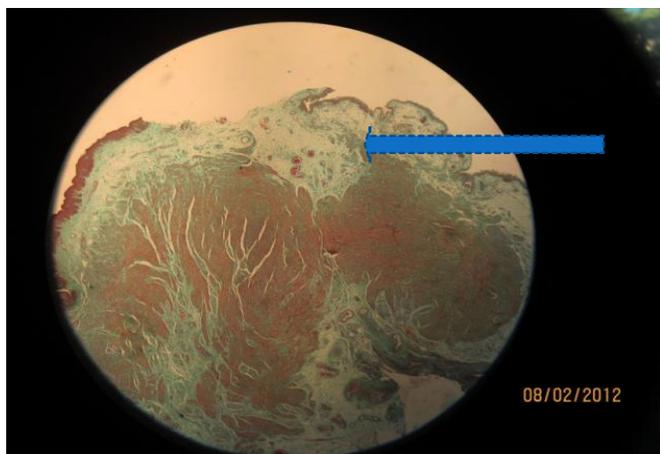


Fig. 3: Tumor is positive for muscle on trichrome stain

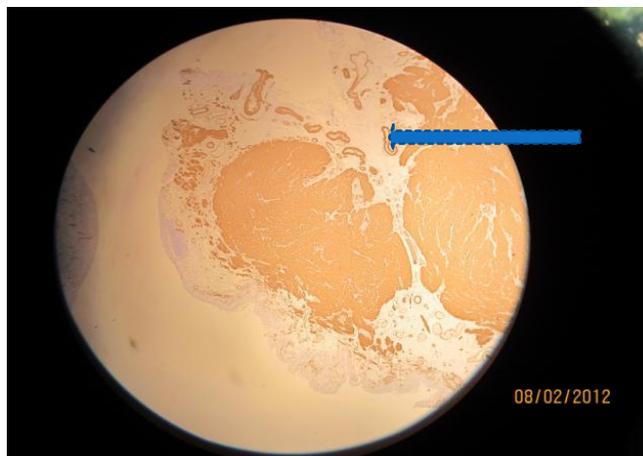


Fig. 4: Spindle shaped cells show strong positivity for Anti smooth muscle actin antibody

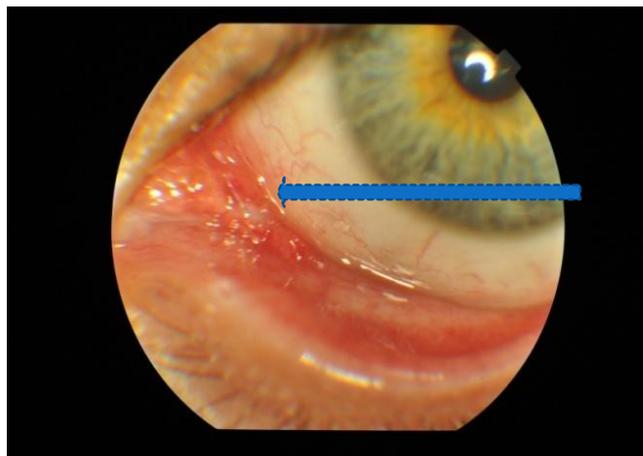


Fig. 4: 6 weeks Post operative picture after removal of conjunctival lesion.

Among the ocular leiomyomas orbit is the most common site. It has been reported from both anterior and posterior part of orbit and capsulo - palpebral muscle of Hesser as well as smooth muscles of the blood vessels implicated.² Recurrence after incomplete excision has been observed.² Orbital leiomyoma is not radiosensitive². There are reported cases of iris, ciliary body and choroidal leiomyomas.²⁻⁶ The most probable site of origin of this leiomyoma may be from the smooth muscle of the blood vessels or embryonic tissue present in the medial canthus. There are also reports of leiomyosarcomas³⁻⁴ as well, which tell us that these benign tumors can turn to malignancy, and that the patient will require follow-up for the rest of their life.

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