

Dirofilariasis in ophthalmology emergency department

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Source / Izvornik: **Liječnički vjesnik, 2020, 142, 40 - 40**

Journal article, Published version

Rad u časopisu, Objavljena verzija rada (izdavačev PDF)

Permanent link / Trajna poveznica: <https://um.nsk.hr/um:nbn:hr:220:306966>

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Download date / Datum preuzimanja: **2025-02-22**



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THE JOURNAL OF THE CROATIAN MEDICAL ASSOCIATION
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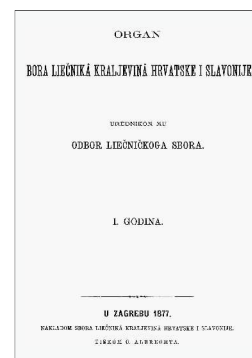
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Founded 1877



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UDK 61(061.231)=862=20

Liječnički vjesnik indexed or abstracted in: EMBASE/Excerpta Medica, Scopus, EBSCO, Hrčak

Liječnički vjesnik printed edition ISSN 0024-3477

Liječnički vjesnik online edition ISSN 1894-2177

Founder and Publisher

HRVATSKI LIJEČNIČKI ZBOR

For Publisher

ŽELJKO KRZNARIĆ

Editor-in-Chief

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Secretary of the Editorial Board

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Secretary of the Editorial Office

Draženka Kontek

Printed by

PRINTERA grupa – Franjo Tuđman street 14, Sveta Nedelja, Croatia

Web page

Alen Babacanli

Edition

50 copies

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MEMBERSHIP AND SUBSCRIPTION: Membership, subscription or any other cash dispatches should be sent to the Croatian Medical Association, Zagreb, Šubičeva 9, Croatia. Bank account: HR7423600001101214818, VAT number HR60192951611. The membership fee for the Croatian Medical Association is 200,00 HRK. The membership fee for the family member is 100,00 HRK. Subscription fee for *Liječnički vjesnik* is 315,00 HRK (84 euros). Members and other legal entities are advised to inform Croatian Medical Association – Editorial Board of Liječnički vjesnik about any change of address in order to receive the journal regularly. Each member of the Croatian Medical Association is allowed to publish the article in the journal *Liječnički vjesnik* for free. Non-members are also allowed to publish the article with administration fee in amount of 187,50 HRK + VAT.

Printed in Croatia




Author's. Published by: Croatian Medical Association.

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ABSTRACTS

Case Reports


CR01

Dirofilariasis in ophthalmology emergency departmentVesna Galjuf^a, Karla Randelović^b^a School of Medicine University of Zagreb^b Department of Ophthalmology Sestre milosrdnice University Hospital Center
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Keywords: dirofilariasis, ophthalmology, microscope, nematode

Dirofilariasis is a state of parasitic infection in humans and animals caused by dirofilaria, a genus of nematodes or roundworms. Domestic and wild mammals are natural host and the infection is accidentally transmitted to humans by mosquito bites. 57-year-old Croatian woman came to an ophthalmology emergency department of UHC Sisters of Mercy with a sudden red eye, no other symptoms or systemic diseases. There was no history of recent travelling abroad, insect bite, stitching, injury or allergy. After clinical examination, which involved visual acuity and slit lamp, conjunctival chemosis with a motile, coiled worm like structure could be seen under bulbar conjunctiva in the temporal space of the eye. Diagnostics, ultrasound and computer tomography of right orbit were alright. Patient has undergone surgery in local anaesthesia under the microscope where after opening conjunctiva, approximately 10 cm long worm has been removed. Worm was sent to Croatian Institute of Public Health which they classified as dirofilarial species. Ocular occurrence is rare, but still present in our population, so we have to keep that in mind while examining patients in the emergency department. We report fifth incidence in the last five years of live ocular dirofilariasis in Croatia. Unfortunately, evidence of ocular dirofilaria is not regular, and there is no exact incidence of it since the first one was noticed. With climate changing, parasites are also changing their hosts and are becoming more present in humans.

CR02

Pigmented epithelioid melanocytoma - borderline melanocytic tumorDuje Čulina^a, Tomislav Cigić^a, Davor Tomas^b^a School of Medicine University of Zagreb^b Department of Pathology, University Clinical Hospital Center „Sestre Milosrdnice“
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Keywords: PEM, skin tumor, HMB-45, Ki-67

Pigmented epithelioid melanocytoma (PEM) is a low-grade melanocytic tumor with metastatic potential and is histologically indistinguishable from animal-type melanoma (ATM) and blue nevus (BN). There are no clear histological criteria separating metastasizing from non-metastasizing PEMs. Their origin remains unknown. A 40 year old female patient noticed the appearance of a new mole on the skin of her right thigh in March 2019 which kept enlarging in a few last months. She visited her physician in February 2020. The lesion showed homogeneous blue and black pigmentation during dermoscopy. The lesion was excised in total and sent to pathological analysis. The skin sample with slightly elevated, dark blue tumor that measured in greatest diameter 0,6 cm was admitted to pathology. The tumor was made of heavily pigmented epithelioid and spindle melanocytes which filled papillary and infiltrated reticular dermis. Tumor was mitotically active and three mitoses were found. There was no necrosis, ulceration, lymphocapillary invasion or atypical mitosis. Immunohistochemically tumor cells were diffusely positive for HMB-45, and proliferation activity measured by Ki-67 was up to 5%. Greatest thickness of tumor was 2,12 mm and was located 1 mm from the nearest lateral border of excision and 4,5 mm from the base. The diagnosis of PEM was made. PEM frequently metastasizes to lymph nodes but most patients have a favorable outcome. Therefore, PEM is considered a borderline melanocytic tumor. There is general disagreement in which cases sentinel lymph node biopsy should be applied, and an individual approach to the patient is recommended.