

Dirofilariasis in ophthalmology emergency department

Galjuf, Vesna; Ranđelović, Karla

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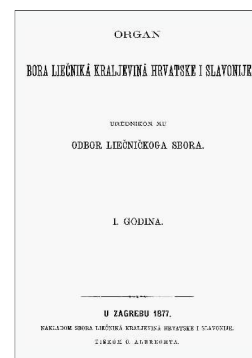
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ABSTRACTS

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
 Vesna Galjuf 0000-0003-0509-1303, Karla Randelović 0000-0001-5540-9987

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“
 Duje Čulina 0000-0002-6306-1973, Tomislav Cigić 0000-0002-5477-4648, Davor Tomas 0000-0003-3390-8683

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.