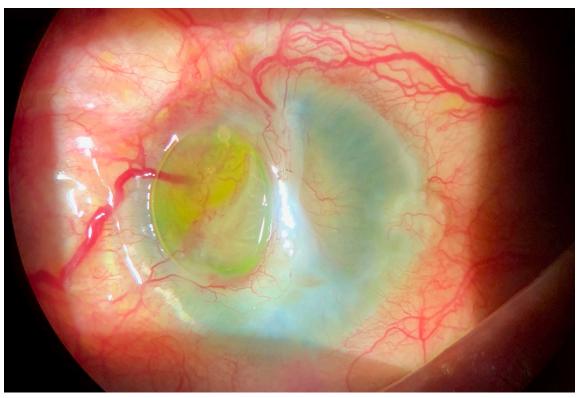
MYSTERY IMAGE BLINK



WHAT IS THIS MONTH'S MYSTERY CONDITION? Visit aao.org/eyenet to make your diagnosis in the comments.

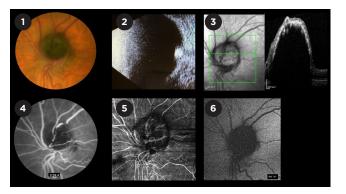
LAST MONTH'S BLINK

Optic Disc Melanocytoma

n asymptomatic 72-year-old woman was referred for evaluation of a melanocytic mass on the optic disc of the left eye to rule out malignancy. On examination, best-corrected visual acuity was 20/25 in both eyes. No remarkable anterior segment findings were present, and the intraocular pressure was normal. Funduscopy showed an elevated brownish-black mass within the optic disc, without peripapillary edema or retinal exudation

(Fig. 1). Ultrasonography (US) disclosed a dome-shaped hyperreflective lesion (Fig. 2); spectral-domain (SD) OCT revealed an elevated optic disc, an absent optic cup, and a hyperreflective lesion with deep optical posterior shadowing (Fig. 3); fluorescein angiography (Fig. 4) and OCT angiography (OCTA; Fig. 5) showed superficial telangiectatic vessels and intrinsic flow; and fundus autofluorescence demonstrated hypoautofluorescence (Fig. 6).

Although optic disc melanocytoma is a benign tumor with a low risk for transforming into melanoma, vascular complications may occur, leading



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to visual dysfunction. Multimodal imaging with US and SD-OCT is helpful in detecting and documenting possible malignant transformation or new vision-threatening complications. OCTA can be useful in noninvasively identifying related vascular features such as surface telangiectasias, choroidal neovascularization, or retinal occlusive disease.

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