

Pediatrična oftalmologija, Friday, May 16 2025, 14:45-16:00

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Chairs: Manca Tekavčič Pompe and Špela Markelj

OR-044

Conjunctival nevus in children

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PURPOSE: A nevus is the most common melanocytic tumor of the conjunctiva in children.

Conjunctival nevi are asymptomatic and benign, but they can grow and change pigmentation during childhood and puberty, often leading to concerns about malignant transformation, which is extremely rare. We will present the epidemiological and clinical characteristics, diagnostic approach, prognosis, and treatment options for conjunctival nevus in children.

METHODS: A literature review and presentation of cases involving children with conjunctival nevi.

RESULTS: Conjunctival nevi in children are well-defined, mobile, non-pigmented, or pigmented lesions on the conjunctiva. They often contain cysts within the nevus, which are a sign of benignity. During adolescence, they may grow and change pigmentation.

Histopathologically, most conjunctival nevi in children represent an inflammatory juvenile idiopathic nevus, which, in addition to the melanocytic compound component, also contains an inflammatory component. This inflammation is responsible for episodes of sudden eye redness, changes in size, and pigmentation.

Diagnosis is based on clinical examination using a slit lamp and photography of the anterior eye segment. If necessary, anterior segment optical coherence tomography (AS-OCT) is used to confirm the presence of cysts. Most nevi remain stable over time, and the risk of malignant transformation in childhood is extremely low. Over a lifetime, the risk remains small (approximately 1%). Nevertheless, annual monitoring is recommended, especially for atypical or rapidly growing lesions. Surgical excision is rarely needed but may be performed for diagnostic confirmation if malignancy is suspected or for functional or aesthetic reasons.

CONCLUSION: Conjunctival nevi are common benign lesions with a good prognosis. The risk of malignant transformation in children is extremely low. Conservative monitoring is the most appropriate approach, while surgical removal is reserved for unusual cases. Understanding the clinical and histopathological characteristics of conjunctival nevi and discussing concerns with parents helps reduce unnecessary worry and interventions while ensuring timely treatment when needed.

Nevus veznice pri otrocih

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NAMEN: Nevus je najpogostejši melanocitni tumor veznice pri otrocih.

Veznični nevusi so asimptomatski in benigni, vendar lahko v času odraščanja in pubertete rastejo in spreminjajo pigmentacijo, zato se pogosto pojavi strah pred maligno transformacijo, ki pa je izjemno redka. Prikazali bomo epidemiološke in klinične značilnosti, diagnostični pristop, prognozo in možnosti zdravljenja nevusa veznice pri otrocih.

METODE: Pregled literature in predstavitev primerov obravnave otrok z vezničnimi nevusi.

REZULTATI: Veznični nevusi pri otrocih so dobro omejene, dobro premakljive, nepigmentirane ali pigmentirane lezije na veznici. Pogosto so znotraj nevusa prisotne ciste, ki so znak benignosti. V dobi odraščanja lahko rastejo in spreminjajo pigmentacijo.

Patohistološko večino vezničnih nevusov pri otrocih predstavlja vnetni juvenilni idiopatski nevus, ki poleg melanocitne mešane (compound) komponente vsebuje tudi vnetno komponento, ki je vzrok epizod nenadnih pordelosti očesa, sprememb velikosti in pigmentacije.

Diagnoza temelji na kliničnem pregledu s špranjso svetilko in fotografranju sprednjega očesnega segmenta; če je potrebno, uporabimo tudi slikanje z optično koherentno tomografijo sprednjega segmenta (AS-OCT) za dokaz cist. Večina nevusov ostane stabilna skozi čas, tveganje za maligno transformacijo v otroški dobi je izjemno majhno, tekom celotnega življenja pa majhno (cca. 1%). Kljub temu je priporočljivo redno letno spremljanje, zlasti pri atipičnih ali hitro rastočih lezijah. Kirurška ekscizija je redko potrebna, vendar se lahko izvede zaradi diagnostične potrditve ob sumu na malignost, funkcionalnih ali estetskih razlogov.

ZAKLJUČEK: Nevusi veznice so pogoste benigne lezije z dobro prognozo. Tveganje za maligno transformacijo je pri otrocih izjemno majhno. Konzervativno spremljanje je najprimernejši pristop, medtem ko je kirurška odstranitev rezervirana za neobičajne primere. Poznavanje kliničnih in patohistoloških značilnosti vezničnih nevusov ter pogovor s starši otrok zmanjša

nepotrebno zaskrbljenost in posredovanje, hkrati pa se zagotovi pravočasno zdravljenje, kadar je to potrebno.