



Radiotherapy of Intraocular and Orbital Tumors (Medical Radiology / Radiation Oncology)

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Since the publication of the first edition of Radiotherapy of Intraocular and Orbital Tumors in 1993 the treatment programs for cure have changed from the dominance of surgical resection to the utilization of radiation therapy with preservation of the eye intact and preservation of vision. In 2002 about 2,300 primary eye tumors will be diagnosed in the United states, 75% of which will be choroidal melanomas, 20% retinoblastomas, and the remainder a wide variety of tumors - malignant lymphoma, rhabdomyosarcomas, liposarcomas, meningiomas, malignant fibrous histiocytomas, etc. Even so, the majority of malignant tumors of the eye are metastatic, primarily from cancers of the lung or breast. The impact of newer imaging studies, including computed tomography, magnetic resonance imaging, and ultrasound with and without contrast medium, have allowed for better tumor definition, more precise treatment techniques, and major improvement in local control, with preservation of the eye intact and excellent survival. The better histologic definition of the tumor has selected more appropriately the cases suitable for adjuvant chemotherapy particularly demonstrated by the combined integrated multimodal treatment of rhabdomyosarcoma without enucleation. Surgical techniques are now being reserved for biopsy and for treatment failures, a dramatic change in treatment approaches since 1993. The second edition by Sagerman and Alberti clearly demonstrates this major change in treatment. The volume explores the impact of diagnostic workup, the role of surgery, the role of external beam radiation therapy, the use of radioactive plaques, photocoagulation, cryotherapy, and other less major surgical procedures.

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