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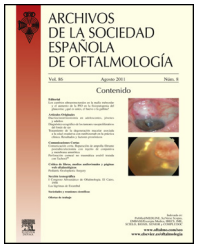

Original article

Lacrimal sac tumors presenting as lacrimal obstruction. Retrospective study in Mexican patients 2007–2012☆,☆☆

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ABSTRACT

Objective: To determine the demographic and clinical data of primary tumors of the lacrimal sac presenting as lacrimal obstruction.

Methods: Retrospective and descriptive study was conducted between the years 2007 and 2012 on all patients undergoing surgery for low lacrimal obstruction at Dr. Luis Sanchez Bulnes Hospital, an Association for the prevention of blindness in Mexico IAP.

Results: Primary tumors of the lacrimal sac represented 2.5% of all lacrimal obstructions, being more common in women than in men (8:1). The large majority (89%) of the cases were non-epithelial, with lymphoid lesions being the most frequent. Benign tumors were presented at a younger age (50 years old) than malignant (70 years old). One-third (33%) of cases were unexpected findings during surgery (100% benign).

Just over half (55%) were malignant tumors (1.4% of obstructions), all of them lymphoproliferative lesions. The most frequent clinical tumor was in the inner edge, either with or without epiphora. The progression time varied according to the degree of aggressiveness of the lymphoma (3 months-10 years).

Conclusions: Lacrimal sac tumors are rare, but they must be taken into account in patients with an unusual clinical presentation of lacrimal obstruction.

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Tumores del saco lagrimal que se presentan como obstrucción de la vía lagrimal. Estudio retrospectivo en la población mexicana durante 2007-2012

Palabras clave:
Tumor maligno vía lagrimal
Linfoma
Papiloma invertido
Obstrucción vía lagrimal
Epífora

RESUMEN

Objetivo: Conocer las características demográficas y clínicas de los tumores primarios del saco lagrimal, que debutan clínicamente como obstrucción de la vía lagrimal.
Métodos: Estudio retrospectivo y descriptivo de los pacientes operados por obstrucción baja de la vía lagrimal en el Hospital Dr. Luis Sánchez Bulnes, Asociación para evitar la Ceguera en México IAP, entre los años 2007-2012.
Resultados: Los tumores primarios del saco lagrimal representaron el 2,5% de todas nuestras obstrucciones lagrimales, siendo más frecuentes en mujeres (8:1). El 89% fueron de estirpe no epitelial, siendo las más frecuentes las lesiones de naturaleza linfoide. Los tumores benignos se presentaron a edades más tempranas (50 años) que los malignos (70 años). El 33% de nuestros casos resultaron hallazgos inesperados durante el procedimiento quirúrgico (100% lesiones benignas).
El 55% se correspondían a tumores malignos (1,4% de las obstrucciones), todos ellos lesiones linfoproliferativas. La clínica más frecuente fue tumoración en canto interno asociada o no a epifora. El tiempo de evolución varió en función del grado de agresividad del linfoma (3 meses-10 años).
Conclusiones: Los tumores del saco lagrimal son raros pero debemos tenerlos en cuenta ante la clínica de obstrucción de la vía lagrimal para un tratamiento adecuado.

Introduction

The vast majority of lacrimal pathway obstruction are idiopathic and are associated to nonspecific chronic inflammations. However, in a percentage of these, ranging between zero and 14.3% according to references, it is possible to find a specific cause for said obstruction.[1] The obstructions are generally of inflammatory or tumor etiology, the most frequent being sarcoidosis, lymphoma and papilloma.[1,2]

Lacrimal pathway tumors are extremely rare, exhibiting no preference for either sex. Even though they can present at any age, incidence peaks in the fifth decade of life.[3] The typical clinical presentation of this type of lesion consists in increased volume in the medial canthal region due to a non-inflammatory tumor, which withstands pressure and exhibits no regurgitation of material through the canaliculi (negative expression). Occasionally, it can also exhibit tears mixed with blood or epistaxis, above all in the case of melanoma. However, the most frequent clinical expression is nonspecific and similar to acute or chronic dacryocystitis.[4] Diagnostic is based on clinical suspicion and imaging tests such as tomography and dacryocystography. Recommended treatment is dacryocystectomy with inclusion of canaliculi and nasolacrimal duct; although, according to the characteristics of the tumor, dacryocystorhinostomy with simple excision of the lesion could be enough or radical surgery may be required with lateral rhinostomy and adjuvant treatments such as radiotherapy.[5]

Materials and methods

A retrospective and descriptive study was designed, including all patients intervened for low lacrimal pathway obstruction between 2007 and 2012 in the Dr. Luis Sánchez Bulnes Hospital, Association for Avoiding Blindness in Mexico IAP.

All the clinical records were reviewed searching for the etiological diagnostic of lacrimal pathway based both on anamnesis and pre- and intra-surgery exploratory findings recorded in the files, as well as histopathology study results of cases with suspected tumor etiology of the obstruction due to pre- and intra-surgery findings.

For cases with confirmed tumor etiology based on histopathological studies, a descriptive analysis of demographic, clinical and histological data was carried out.

Similarly, the findings were compared with published references till date. The statistical study was carried out with SPSS for Windows version 13.0 (SPSS Inc., Chicago, IL, USA).

Results

Presurgery lacrimal pathway exploration was carried out with observation, and lacrimal sac palpation/expression and/or high lacrimal pathway probing with irrigation cannula in all patients included in the study. Imaging tests (echography and/or tomography) were requested only for patients with clinical suspicion of intrinsic lacrimal sac lesion as well as systemic extension studies when malign nature was determined by the histopathological study.