

Case notes

Choroidal naevus

Patient details

Initials: KS

Age: 46 years

Gender: Female

Occupation: Admin

Hobbies: Gym, yoga

Reason for visit: First ever sight test, DV: good, struggling with near vision in poor light for around 6/12

Refraction: RE: +0.50/-0.25x175

LE: +0.75/-0.25x5

Distance Acuity: RE: 6/5, LE: 6/5

Reading add: RE & LE: +0.50D

Near acuity: RE: N5, LE: N5

General health: Good

Medication: Vitamins

Ocular history: Nil

Family ocular history: Nil

Driver: Yes

Smoker: Ceased 5 years ago

Tonometry

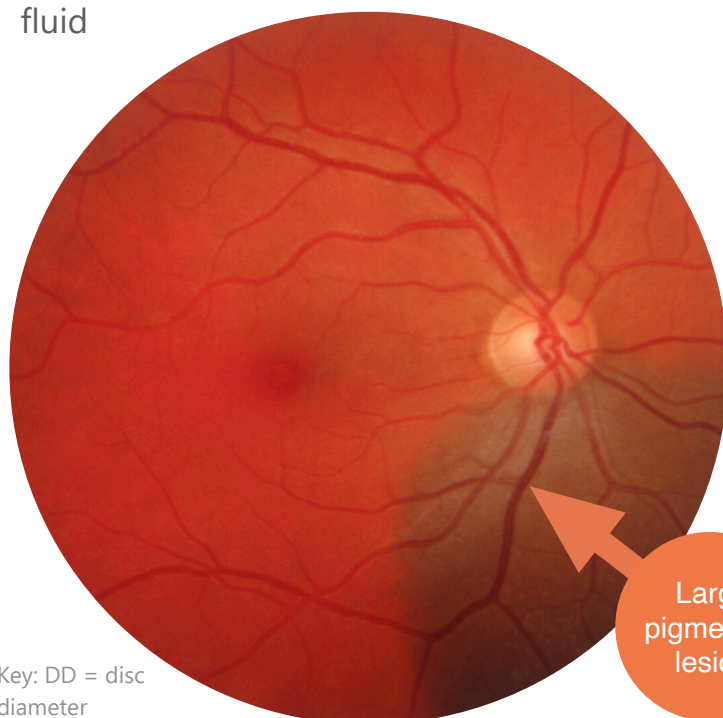
Right eye	NCT	Left eye
9mmHg	@09:15	11mmHg
(mean of 3 readings)		

Examination

Slit lamp & dilated Volk Superfield

Dilated with 1 drop of 1% tropicamide RE & LE

Right eye	Structure	Left eye
Normal	Lids & lashes	Normal
Clear	Cornea	Clear
Grade 3, quiet	Anterior chamber	Grade 3, quiet
Clear	Lens	Clear
Grade 3	van Herick	Grade 3
C:D 0.3	Disc	C:D 0.3
ISNT ✓		ISNT ✓
Normal	Macula	Normal
Large naevus 6½ x 5½ DD, inferior to disc, flat, no subretinal fluid	Periphery	No holes/tears/detachment



Large pigmented lesion

Key: DD = disc diameter

MOLES Score

The MOLES acronym¹ was described by Damato to aid differentiation between choroidal naevi (benign 'freckles') and melanomas (malignant lesions). The system involves considering whether there is **M**ushroom shape, **O**range pigment, **L**arge size, **E**nlargement and **S**ubretinal fluid. Each feature is given a score of 0 - 2 (see table) and the scores are added together to give an overall categorisation of:

Common naevus = 0 Low-risk naevus = 1
High-risk naevus = 2 Probable melanoma = 3

Indicator	Severity	Score
Mushroom shape	Absent	0
	Incipient (erosion through RPE)/uncertain	1
	Present ie definitive mushroom shape with overhang	2
Orange pigment	Absent	0
	Dusting/unsure	1
	Confluent (ie easily visible clumps of orange pigment)	2
Large size	Flat (<1mm thick) and <3DD wide	0
	Subtle dome shape (1 - 2mm thick) and/or 3 - 4 DD wide	1
	Significant thickening (>2mm) and/or >4DD wide	2
Enlargement	None (or no baseline photography)	0
	Suspected change on comparing photographs	1
	Definite growth confirmed by sequential imaging	2
Subretinal fluid	Nil	0
	Trace (limited retinal detachment seen only with OCT)	1
	Definite sub retinal fluid visible with ophthalmoscopy	2

Key: DD = disc diameter; RPE = retinal pigment epithelium

MOLES Score for KS

KS has a large pigmented choroidal lesion that measures 9.5 x 8.1mm and is 0.6mm thick (measured at the hospital eye service)

Her Moles score was:

Mushroom shape = 0

Orange pigment = 0

Large size = 2

Enlargement = 0

Subretinal fluid = 0

TOTAL = 2, ie high-risk naevus. For Routine referral to be monitored at local hospital.

Management

The College of Optometrists² recommends that dilated slit-lamp indirect biomicroscopy is performed together with colour photography for demonstrating or excluding growth of a lesion. If imaging is not available, a careful drawing should be made, with measurement, using landmarks such as retinal blood vessels or the optic disc. The College recommends that patients are given a photograph or access to a digital image in case they attend elsewhere for their next sight test.

OCT can help to identify sub retinal fluid and autofluorescence can show lipofuscin.

If a lesion is suspected to be a melanoma, an urgent referral to the hospital eye service should be made for the patient to be seen within 2 weeks.

¹ Damato (2023). <https://pubmed.ncbi.nlm.nih.gov/35764877/>

² College of Optometrists (2023). <https://www.college-optometrists.org/clinical-guidance/clinical-management-guidelines/pigmentedfunduslesions>