

Double trouble

Nur Syarafina Abdul Malek¹, Mahani Mastor¹, Cheng Teck Chee^{1,2}, Norshamsiah Md Din²

¹Department of Ophthalmology, Hospital Selayang, Batu Caves, Selangor, Malaysia, ²Department of Ophthalmology, Faculty of Medicine, Universiti Kebangsaan Malaysia, Cheras, Wilayah Persekutuan Kuala Lumpur, Malaysia

ABSTRACT

To report a rare case of unilateral abducens nerve palsy in a patient with treated breast carcinoma. A 36-year-old Malay woman with underlying spondylosis and a right invasive breast carcinoma survivor presented with sudden-onset binocular diplopia for one week. She underwent right skin-sparing mastectomy and breast implant 7 years ago and completed chemotherapy and radiotherapy. Her latest magnetic resonance imaging (MRI) of the breast, 2 years ago, showed no recurrence of malignancy, so she is currently on 6-monthly surveillance. During the presentation, her visual acuity was 6/24 over the right eye and 6/18 over the left eye. Extraocular movement examination showed restriction of right eye abduction. Hess chart, which showed right lateral rectus underaction and left medial rectus overaction. Otherwise, other ophthalmic and neurological examinations were unremarkable. An urgent contrasted-enhanced computed tomography of the orbit and brain was performed in view of high suspicion of tumour recurrence. However, there were no space-occupying lesions noted. She was also investigated for other causes of abducens nerve palsy, including multiple sclerosis, diabetes mellitus, hypertension, and infective causes such as Syphilis but all investigations were negative. A few weeks later, this patient presented again with frequent falls, back pain, and difficulty in walking, which required a walking stick. MRI brain orbit and spine was carried out and revealed extensive spine metastases with irregular lesions arising from the pituitary gland, sella tursica, and clivus with local extension. She was co-managed with the neurosurgical and oncology team and was started on radiotherapy treatment. Unfortunately, her right abducens nerve palsy did not recover. In managing patients with cancer, especially in cases where there is a high suspicion of tumour recurrence, MRI is a highly sensitive imaging modality that should be considered, even if the CT scan results are normal, to ensure thorough evaluation and timely management of cancer patients. The multidisciplinary approach in managing cancer patients involves integrating various specialties for comprehensive assessment and timely intervention.