

# Collaborative Ocular Melanoma Study (COMS) findings

Revised 2002

	<b>SMALL</b>	<b>MEDIUM</b>	<b>LARGE</b>
Reference	Arch Ophthalmol 1997 Dec; 115(12):1537-1544	Arch Ophthalmol 2001 Jul; 119(7):969-982	Am J Ophthalmol 1998 Jun; 125(6): 779-796
Type of study	Nonrandomized, prospective follow-up study	Prospective randomized clinical trial	Prospective randomized clinical trial
Number of patients in study	204	1317	1003
Size of melanomas included in study	<ul style="list-style-type: none"> <li>◆ Apical height: 1.0 to 2.5 mm</li> <li>◆ Largest basal diameter: 5 mm</li> </ul>	<ul style="list-style-type: none"> <li>◆ Apical height: 2.5 to 10.0 mm</li> <li>◆ Largest basal diameter: 5 to 16 mm</li> </ul>	<ul style="list-style-type: none"> <li>◆ Apical height: 10.0 mm or larger</li> <li>◆ Largest basal diameter: 16 mm or larger</li> </ul>
Objective of study	To describe time to tumor growth and determine baseline characteristics associated with growth of small tumors	I <sup>125</sup> Brachytherapy vs. enucleation for treatment of medium tumors	Pre-enucleation radiation vs. enucleation alone for treatment of large tumors
Findings of study	<ul style="list-style-type: none"> <li>◆ 21% grew by 2 years</li> <li>◆ 31% grew by 5 years</li> <li>◆ Characteristics associated with growth: initial tumor thickness and diameter, presence of orange pigment, absence of drusen, absence of RPE changes</li> </ul>	<ul style="list-style-type: none"> <li>◆ No clinically or statistically significant difference in survival rates between the 2 treatments for up to 12 years after treatment</li> </ul>	<ul style="list-style-type: none"> <li>◆ No significant difference in survival rates between the 2 treatments</li> <li>◆ Age and largest basal diameter of the tumor are the only factors that affect prognosis</li> </ul>

# Collaborative Ocular Melanoma Study (COMS)

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*Ophthalmic surgeon:* David H. Abramson, M.D., 1986-present

# GENETIC COUNSELING FOR RETINOBLASTOMA

If Parent Was	Bilateral				Unilateral				Unaffected			
Chance of offspring having retinoblastoma	45% affected		55% unaffected		7-15% affected		85-93% unaffected		<<1% affected		99% unaffected	
Laterality	85% bilateral		15% unilateral		85% bilateral		15% unilateral		33% bilateral		67% unilateral	
Focality	100% multifocal		96% multifocal, 4% unifocal		100% multifocal		96% multifocal, 4% unifocal		100% multifocal		15% multifocal, 85% unifocal	
Chance of next sibling having retinoblastoma	45%		45%		45%		45%		45%		7-15%	
											5%*	
											<1%*	
											<1%*	
											<1%*	
	*If parent is a carrier, then 45%											

David H. Abramson, M.D.

- Retinoblastomas:  
(212) 746-2495
- Uveal melanomas, and lid, conjunctival and orbital tumors:  
(212) I-CANCER  
(212) 422-6237