Prevalence of idiopathic orbital inflammatory syndrome in Srinagarind hospital

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Background

- The most common cause of painful orbital mass in adults
- Pathogenesis and etiology is currently unknown
- Association with a variety with rheumatologic conditions
- Clinical presented with acute onset
- Localized or diffused symptoms and signs

Question

Method

Result

Conclusion

Objective

To evaluate the distribution, clinical signs, clinical symptoms, characteristics of pathology and clinical responds to treatment of idiopathic orbital inflammatory syndrome.
Step 1: (inclusion criteria)
- Patient who was diagnosed with orbital pseudotumor, IOIS, NSOI 2009-2013
- Biopsy
- Hospital based retrospective review

Step 2
- Excluded patients who did not have biopsy

Step 3: Data collection
- Sex
- Age
- VA
- Clinical symptoms
- Laboratory finding
- Imaging
- Treatment
- Pathology

Step 4: Data analysis

Step 2
- 137 patients had diagnosed before 2009 or changing for the diagnosis
- 89 patients did not have biopsy
- 1 excluded: B cell lymphoma

Data collection
- 246 patients
- 109 patients
- 20 patients
- 19 patients

Step 4: Data analysis:
Statistic used
- Fisher exact test
- Chi-square test

Result & discussion
1. Sex: male ($p=0.0116$)
   - Prevalence: Male has more prevalent than female
   - Remark: This statistical significant can not be related to clinical significant because too low population size and do not have normal population data.

2. Age ($P value :0.032$)
   - Prevalence: 41-60 is most common age group
   - Remark: statistically significant for this age group may not have clinical significant because there was not normal population data

Sex
- Male: 21.85%
- Female: 78.15%

Age
- 0-20: 26.52%
- 21-40: 52.63%
- 41-60: 19.85%
**Result & discussion**

1. **3. VA**
   - **Remark:** VA 6/12-6/6 are commonly found in both right and left eye.
   ![Graph showing VA distribution](image)

2. **5. Neuroimaging**
   - **Result:** From CT and MRI: Most organ involved is lacrimal gland, muscle, optic nerve and orbital apex respectively.
   ![Organ involvement diagram](image)

3. **5.1 Muscle involvement**
   - **Result:** The results of our analysis show that muscles involved were lateral rectus, superior rectus, inferior rectus, and medial rectus respectively.
   ![Muscle involvement graph](image)

4. **4. Clinical signs**
   - **Result:** Clinical signs came with proptosis, limited EDM, and lacrimal gland enlargement respectively.
   ![Clinical signs graph](image)

5. **6. Treatment**
   - **Remark:** Idiopathic orbital inflammatory syndromes almost have good response to steroid. In our practice, oral steroid was common route.
   ![Route of steroid(n,%)](image)

6. **7. Pathology**
   - **Remark:** There are 5 types of histopathology: classical, granulomatous, vasculitic, and eosinophilic orbital pseudotumor.
   ![Histopathology distribution](image)
**Conclusion**

Objective To evaluate the distribution, clinical signs, clinical symptoms, characteristics of pathology and clinical responds to treatment of idiopathic orbital inflammatory syndrome.

- **Answers**
  - 1. Sex : Male
  - 2. Age group: 41-60 years
  - 3. VA: 6/12-6/6
  - 4. Clinical signs: Proptosis, EOM limited, and lacrimal gland enlargement, respectively
  - 5. Organ involvement from imaging: Lacrimal gland, muscle (LR>SR>IR>MR), optic nerve, respectively
  - 6. Treatment: Most patients have good response to all steroid's route and no correlate between histopathology and result of treatment
  - 7. Pathology: Classical type

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**Limitation**

- Small retrospective case series
- Selection bias
- The patients who had biopsy were patients with atypical and severe clinical features.
- The larger prospective study required

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Thank you For Your Attention