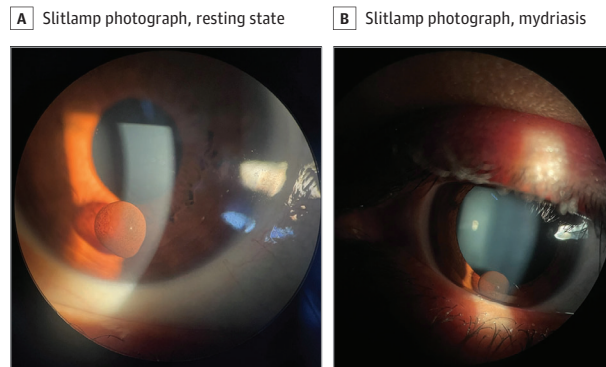


## Ophthalmic Images

## Primary Iris Stromal Cyst in a Female Patient Aged 26 Years

Nawras Alhalabi, MD; Diana Alia, MD; Ahmad Alhasan, MD, PhD



**Figure.** A, Slitlamp image of a primary iris stromal cyst. B, Slitlamp image of a primary iris stromal cyst on mydriasis.

**A 26-year-old Syrian female** patient presented with occasional blurred vision; she reported noticing a mass in her right eye for 3 months. The patient's systemic, surgical, medical, and ocular or trauma history were unremarkable.

Slitlamp examination revealed a pedunculated, fixed, inferiorly located nonvascularized iris stromal cyst (ISC) protruding through the anterior chamber (**Figure**). Best-corrected visual acuity was 20/20 OU. The remainder of the ocular examination was unremarkable. The patient was advised of a conservative approach with observation.

Iris tumors are categorized as cystic and solid lesions and, according to their etiology, as primary or secondary. Cysts originate from the iris pigment epithelium or iris stroma.<sup>1</sup> Primary cysts are usually of neuroepithelial origin. ISCs appear as translucent masses located anteriorly to the iris pigment epithelium. Secondary cysts develop due to other causes.<sup>1,2</sup>

Slitlamp examination, anterior-segment optical coherence tomography, and ultrasound biomicroscopy are used in the differential diagnosis of ISCs. Most clinicians favor a conservative approach with generally favorable prognosis.<sup>1,2</sup>

## ARTICLE INFORMATION

**Author Affiliations:** Department of Ophthalmology, Faculty of Medicine, Damascus University, Damascus, Syria.

**Corresponding Author:** Nawras Alhalabi, MD, Department of Ophthalmology, Faculty of Medicine, Damascus University, Fayed Mansour St, Damascus, Syria ([nawras@me.com](mailto:nawras@me.com)).

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