# Indocyanine green-enhanced diode laser treatment of melanoma in a rabbit model

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LAWRENCE P. CHIONG, MD *; SERDAR A. ÖZLER, MD *; JOAQUIM M. DE QUEIROZ, JR. MD *; PETER E. LIGGETT, MD +

Indocyanine green (ICG)-enhanced laser therapy was evaluated for the treatment of experimental intraocular melanoma. Immediately after an intravenous injection of ICG, a 790-nm chromophore, 810-nm semiconductor diode laser was used to irradiate Greene hamster melanomas that had been implanted in the iris of rabbits. ICG-enhanced laser treatment of melanoma (14 eyes) was compared with treatment by laser alone (4 eyes), ICG alone (1 eye), and no treatment (2 eyes). Tumors treated with ICG-enhanced laser showed no growth after treatment, as judged by clinical examination and photography. Histologically, 4 of the 14 tumors treated with ICG-enhanced laser showed total necrosis, whereas the remaining 10 tumors treated similarly demonstrated only rare viable cells around blood vessels or at the tumor periphery. Laser treatment without ICG enhancement resulted in only superficial tumor necrosis, and all four of these tumors continued to grow after treatment. With further evaluation, indocyanine green in combination with a commercially available diode laser may be useful in the treatment of ocular melanoma.

* The Doheny Eye Institute and the Department of Ophthalmology, University of Southern California, Los Angeles, California, and + the Department of Ophthalmology, Yale University, New Haven, Connecticut. Reprint requests; Lawrence P. Chong, MD, Doheny Eye Institute, 1450 San Pablo Street, Los Angeles, CA 90033-4670.

# Prilocaine: An old anesthetic agent and a new ophthalmic procedure

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ETELVINO T. COELHO, MD; EDIGEZIR B. GOMES, MD; HERALDO S. MARTINS, MD; BYRON DE SOUZA, MD, PHD, FACIP

We present a new local anesthetic technique for ophthalmic surgery that reduces the risks associated with retrobulbar and peribulbar anesthesia. This method uses topical proparacaine plus 1.5 mL of prilocaine (3%) with felpressin injected into the subconjunctival (sub-Tenon's) space. Of 5210 consecutive adult patients in whom the technique was used, all demonstrated adequate analgesia. Sixty-three (1.2%) of the eyes required supplemental analgesia, provided by a single injection of prilocaine (O.5 mL). Ecchymosis and subconjunctival hemorrhage developed in 63 (1.2%) of the eyes. There were no instances of ptosis.

From the Refractive Microsurgery Center, Belo Horizonte (Dr. Coelho), Harley Street Eye Clinic, Rio de Janeiro (Dr. Gomes), Recife Eye Center, Recife (Dr. Martins), Brazil, and Conner Glaucoma Center, Houston (Dr. de Souza), Tex. Reprint request should be addressed to Byron de Souza, MD, PhD, FACIP, PO Box 20387, Houston, TX 77225-0387.