Test your knowledge and understanding

This page is designed to help you to test your own understanding of the concepts covered in this issue, and to reflect on what you have learnt.

A baby is prepared for chemotherapy. INDIA

We hope that you will also discuss the questions with your colleagues and other members of the eye care team, perhaps in a journal club. To complete the activities online – and get instant feedback – please visit www.cehjournal.org

Tick ALL that are TRUE

**Question 1**
The following are clinical features of retinoblastoma in a child aged 18 months:
- [ ] a. white-yellow pupil reflex
- [ ] b. strabismus
- [ ] c. painful red eye
- [ ] d. decreased visual acuity
- [ ] e. proptosis

**Question 2**
The following are true for germline (hereditary) retinoblastoma:
- [ ] a. there is always a history of another family member having retinoblastoma
- [ ] b. tumours are often in both eyes
- [ ] c. there is a risk of other types of cancer in later life
- [ ] d. tumours are often multi-focal
- [ ] e. children present at an older age than non-hereditary cases.

**Question 3**
The following are methods of treating intra-ocular (stage 0 or 1) retinoblastoma:
- [ ] a. external beam radiotherapy
- [ ] b. intra-vitreal chemotherapy
- [ ] c. enucleation
- [ ] d. laser photocoagulation
- [ ] e. systemic chemotherapy.

**Question 4**
The following are methods of treating extra-ocular (stage 2, 3, 4) retinoblastoma:
- [ ] a. systemic chemotherapy
- [ ] b. intra-vitreal chemotherapy
- [ ] c. external beam radiotherapy
- [ ] d. laser photocoagulation
- [ ] e. exenteration.

**ANSWERS**

1. a, c and e are TRUE. A child of 18 months will not present with decreased visual acuity. A child with an eye turn will present with a turned out or turned in eye (strabismus). White-yellow pupil reflex (leukocoria) and pain are both associated with an increased risk of cancer in幼儿. In the absence of systemic chemotherapy and external beam radiation, the age of presentation is common in children under 1 year of age. In germline (hereditary) disease, there is a significant risk of developing secondary cancers, but the risk is not increased in children under 1 year of age. In germline (hereditary) disease, there is a significant risk of developing secondary cancers, but the risk is not increased in children under 1 year of age.

2. b, c and d are TRUE. If the disease is advanced to the point of stage 2, 3 or 4, additional treatments are required. In germline (hereditary) disease, there is a significant risk of developing secondary cancers, but the risk is not increased in children under 1 year of age.

3. b, c, d and e are TRUE. External beam radiation is no longer used to treat retinoblastoma because it was found to be associated with an increased risk of cancer in children under 1 year of age. In germline (hereditary) disease, there is a significant risk of developing secondary cancers, but the risk is not increased in children under 1 year of age.

4. a, c and e are TRUE. If the disease is advanced to the point of stage 2, 3 or 4, additional treatments are required. In germline (hereditary) disease, there is a significant risk of developing secondary cancers, but the risk is not increased in children under 1 year of age.