Nevus of Ota

Neelam N Redkar¹, Kavita J Rawat², Siddharth Warrier³, Anurag Jena⁴

Nevus of Ota (NOO) also known as congenital melanosis bulbi,¹ nevus fuscoceruleus, ophthalmomaxillaris, oculodermal melanocytosis² and Oculomucodermal melanocytosis.³ It’s a dermal melanocytosis seen along the distribution of ophthalmic and Maxilary branches of trigeminal nerve.³ Here we present a case of naevus of ota which was bilateral (Figure 1).

It is usually present at birth in the two thirds of patients who have ocular involvement. It is more common in females with 5% being bilateral.⁴ It was first described by Ota in 1939. It can be unilateral or bilateral. Exact etiology and pathology of NOO is not known. Unconfirmed hypothesis is that it represents melanocytes that have not migrated completely from the neural crest to the epidermis during the embryonic stage. The variable prevalence among different populations suggests genetic influence although familiar cases of nevus of ota are very rare. It is most prevalent in Japanese subcontinent.⁵ It is uncommon in white population. Male to female ratio is 1:4.8. First peak of onset occurs in infancy (50%). Second peak of onset occurs in adolescence. Important differential diagnoses for NOO are Blue Nevi, Hori macule, Lentigo, Malignant Melanoma, Melasma, Mongolian Spot, Ochronosis and Phytophotodermatitis. Cosmetic camouflage makeup can minimize the disfiguring facial pigmentation resulting from NOO. Otherwise, topical therapy is of no value in the treatment. Since childhood NOO is likely to be more superficial than adult NOO, early laser treatment might have some beneficial effects.⁶ Hydroquinone preparations are also helpful in partially treating this condition. Patients with NOO are at greater risk for the development of intraocular and central nervous system malignant melanomas are more common and occur in as many as 4% of cases. Therefore it is reasonable for all patients with the NOO to have yearly examinations.

References


¹Professor of Medicine, ²Associate Professor in Gen. Medicine, ³Registrar, ⁴Houseman, Seth G.S. Medical College and KEMH, Mumbai, Maharashtra
Received: 28.01.2015, Accepted: 26.04.2015