

Accommodation palsy in children treated with anti-GD2 antibodies for advanced neuroblastoma

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Introduction

Children with stage 4 advanced neuroblastoma are treated on high-risk protocol with anti-GD2 antibodies to increase survival rate. This study was undertaken to analyze unusual ocular symptoms in children randomized to receive immunotherapy with anti-disialoganglioside antibodies.

Methods

Five children with ocular symptoms were identified. Median age at diagnosis of neuroblastoma was 46.8 months. All subjects had disseminated disease (stage 4 neuroblastoma).

Reference

Kremens B, Hero B, Esser J et al. Ocular symptoms in children with human-mouse chimeric anti-GD2 mAb ch14.18 for neuroblastoma. *Cancer Immunol Immunother* 2002 Apr 51(2): 107-10

Results

Mean follow-up period since presentation was 25.6 months. Internal ophthalmoplegia, including mydriasis and accommodation deficit was found in all patients. Symptoms were detected 3 weeks on average after commencement of therapy and resolved 4 weeks on average after the completion of it. All children required optical treatment. A +3 DS addition was used in all cases for a total period of up to 6 months. Accommodation deficit was resolved in all children whereas sluggish pupillary responses persisted in all cases at long-term review.

Conclusion

Reversible symptoms of a parasympathetic deficit of the eye are common following intravenous infusion with anti-GD2 antibodies not warranting termination of treatment. Short-term optical treatment with convex lenses can be used concurrently during the course of immunotherapy providing symptomatic relief.