

Abstracts

LG-28. THREAT TO VISION SCORE (TTV SCORE) IN CHILDREN WITH OPTIC PATHWAY GLIOMAS (OPGs): UK EXPERIENCE FROM PROSPECTIVE LOW GRADE GLIOMA (LGG2) TRIAL
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INTRODUCTION: Visual loss is the most worrisome complication of OPGs. Neuro-ophthalmic examination is a key component in the diagnosis and management of these tumours. Chemotherapy has become the favored initial treatment modality. A TTV score was developed using UK data from LGG2 trial in

order to establish whether this can predict final visual acuity (VA) and drive management of OPGs. **MATERIALS AND METHODS:** 114 paediatric patients with OPGs were identified after a search in the national LGG database. Neurofibromatosis status, location of tumour as per Dodge classification, best VA at presentation and age were considered the factors to take in account in creating a score ranging from 10 to 40. Each component was weighted to reflect increasing severity. The higher the score the greater the TTV. **RESULTS:** All patients who scored > 30 underwent treatment with chemotherapy within approximately 2 months after diagnosis, while only 30% of subjects who scored < 20 received chemotherapy. The median time from diagnosis to initiation of treatment in these patients was 1.6 years. Subjects with TTV score < 20 tend to have normal VA at final review, while individuals who scored > 30 tend to have poor vision of 1.0 or worse at last follow-up. **CONCLUSION:** Our study demonstrated that the TTV score might be useful in predicting final VA in patients with OPGs. Therefore it could be considered as a substantial factor in the follow-up and management of OPGs and should be taken in consideration by both oncologists and ophthalmologists.