Report of a Study of Dr. G.D. Hemmes on the Problem whether the Prognosis of Retinoblastoma in the Netherlands can be Favourably Influenced

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Some time ago Weve suggested the idea of early treatment of retinoblastoma by means of systematic follow-up of the children of retinoblastoma patients and their close relatives. The Queen Wilhelmina Funds kindly allowed a grant to the Netherlands General Society for the Prevention of Blindness, for an orienting study of the practicability of such a scheme and of the factors which inhibit early diagnosis. G. D. Hemmes has carried out this study and laid down the results in a report.

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Comparison with data of former years (1885–1910, áe Kleyn and Gerlach, 1927; Hemmes) shows that if retinoblastoma is diagnosed and treated at an early age, the lethality is reduced, so that there is an increased risk of transmission to following generations, and a higher frequency. The study revealed that the frequency was actually higher and will probably rise even more, if we fail to set up an organization as lined out by Hemmes, in which ophthalmologists are also involved and which makes early diagnosis and treatment possible.

Hemmes includes among bad risks:

All patients with unilateral retinoblastoma, since 30% of them develop tumours of both eyes.

Brothers and sisters; if a second child shows retinoblastoma, the following children have a 50% chance of being affected, according to Dollfuss and Auvert.

Children of isolated retinoblastoma patients; the percentage in which tumour will develop is estimated at 15.7%.

Among the 1267 cousins of the patients studied by Hemmes there was until August 1957 none in whom one eye had been removed on account of retinoblastoma. On these grounds, Hemmes does not count the cousins among the bad risks.

The number of former glioma patients who should be advised to have their children under ophthalmological control is estimated at 36 by Hemmes.

The family doctor, the ophthalmologist and the parents will have to undertake this supervision and make it efficient. For this purpose pupillary dilation and anaesthesia are indispensable.

On behalf of Hemmes the speaker suggested that the Society invite three members or appoint a permanent committee

who take the measures required

who is to be notified of all old and new cases of retinoblastoma

to whom preparations of removed eyeballs are to be sent and who will have to approach general practitioners and ophthalmologists

by whose co-operation an efficient control of the exposed persons can be ensured.