

International Intraocular Retinoblastoma Classification

Grouped A to E, this system was developed internationally with leadership of Dr. Linn Murphree, paediatric ophthalmologist at Children's Hospital of Los Angeles.

This system predicts eye outcome when treated with combination chemotherapy and focal therapy. This is the most common way to indicate disease in each eye, and determine appropriate treatment.

Group A: Small intraretinal tumours away from foveola and disc.

- All tumours are 3 mm or smaller in greatest dimension, confined to the retina and
- All tumours are located further than 3 mm from the foveola and 1.5 mm from the optic disc.

Group B: All remaining discrete tumours confined to the retina.

- All other tumours confined to the retina not in Group A.
- Tumour-associated subretinal fluid less than 3 mm from the tumour with no subretinal seeding.

Group C: Discrete local disease with minimal subretinal or vitreous seeding.

- Tumour(s) are discrete.
- Subretinal fluid, present or past, without seeding involving up to one-fourth of the retina.
- Local fine vitreous seeding may be present close to discrete tumour.
- Local subretinal seeding less than 3 mm (2 DD) from the tumour.

Group D: Diffuse disease with significant vitreous or subretinal seeding.

- Tumour(s) may be massive or diffuse.
- Subretinal fluid present or past without seeding, involving up to total retinal detachment.
- Diffuse or massive vitreous disease may include "greasy" seeds or avascular tumour masses.
- Diffuse subretinal seeding may include subretinal plaques or tumour nodules.

Group E: Presence of any one or more of these poor prognosis features.

- Tumour touching the lens.
- Tumour anterior to anterior vitreous face involving ciliary body or anterior segment.
- Diffuse infiltrating retinoblastoma.
- Neovascular glaucoma.
- Opaque media from hemorrhage.
- Tumour necrosis with aseptic orbital cellulites.
- Phthisis bulbi.