

# 🧈 Rhabdomyosarcoma (RMS) Fact Sheet

Cancer Type: Rare Soft Tissue Sarcoma

Common Ocular Site: Orbit (space around the eye)

Most Affected Group: Children under 10 Website Reference: OcularCancer.com

#### What is Rhabdomyosarcoma?

Rhabdomyosarcoma (RMS) is a rare and aggressive cancer that forms in skeletal muscle cells that have not yet fully developed. It is the most common soft tissue sarcoma in children and can occur anywhere in the body. When it develops in the orbit, it is known as orbital rhabdomyosarcoma, and is considered a pediatric ocular cancer emergency due to its rapid growth.

#### **II** Key Facts:

- Most common soft tissue cancer in children
- Accounts for ~4–8% of all childhood cancers
- Peak onset age: 1 to 5 years old
- Gender: Slight male predominance
- Orbital RMS: ~10% of all rhabdomyosarcoma cases

• Laterality: Usually unilateral (one eye)

#### Causes & Risk Factors:

- Mostly sporadic (no known cause in most cases)
- Genetic syndromes associated with higher risk:
  - Li-Fraumeni syndrome
  - Neurofibromatosis type 1 (NF1)
  - Beckwith-Wiedemann syndrome
- **Chromosomal abnormalities:** PAX3/7-FOXO1 fusion genes (seen in alveolar subtype)

### Types of Rhabdomyosarcoma:

- 1. **Embryonal (ERMS)** Most common type (especially in the orbit)
  - Better prognosis
  - Seen in younger children
- 2. Alveolar (ARMS) More aggressive
  - Often in older children/teens
  - Less common in orbital RMS
- 3. **Pleomorphic RMS** Rare, typically in adults

# Orbital RMS: Signs and Symptoms

• Rapid-onset bulging of one eye (proptosis)

- Swelling or redness around the eye
- Drooping eyelid (ptosis)
- Eye pain or discomfort
- Impaired eye movement or double vision
- Vision changes or loss (in advanced cases)

#### **%** Diagnosis:

- **Urgent referral** to ocular oncologist or pediatric oncologist
- Imaging:
  - o MRI of the orbit and brain
  - CT scan to evaluate bone involvement
- **Biopsy:** Required for definitive diagnosis and subtype classification
- Bone marrow biopsy and lumbar puncture may be needed to rule out metastasis
- Staging: Based on tumor size, location, lymph node involvement, and distant spread

### Treatment Options:

- Multimodal therapy is standard:
  - Chemotherapy: Primary treatment (e.g., VAC Vincristine, Actinomycin-D, Cyclophosphamide)
  - Radiation therapy: Often used to preserve eye and vision, especially in orbital RMS
  - Surgery: Sometimes performed for biopsy or resection, but often avoided in orbital cases to preserve function

#### **o** Prognosis:

- Orbital RMS has a favorable prognosis with prompt treatment
- 5-year survival rate: ~85–90% for orbital embryonal RMS
- Prognosis depends on:
  - Subtype (embryonal > alveolar)
  - Stage at diagnosis
  - Tumor location and size
  - Response to therapy

#### **I** Follow-Up & Monitoring:

- Frequent imaging and eye exams post-treatment
- Monitor for recurrence, side effects, and secondary cancers
- Long-term care may include:
  - Visual rehabilitation
  - Cosmetic or reconstructive surgery (if necessary)
  - Supportive care for growth or cognitive development

### Support & Resources:

- Pediatric oncology and ocular oncology teams
- Genetic counseling for high-risk families

- Psychosocial and mental health support
- Childhood cancer survivor groups
- Vision support programs and special education services

# ★ Key Takeaways:

- Rhabdomyosarcoma is rare but highly treatable, especially in the orbit.
- Early diagnosis is critical rapid eye bulging in a child is a red flag.
- Treatment requires a **team approach**: oncology, ophthalmology, radiation, and support services.
- Survivorship care is essential due to long-term effects of treatment.

#### Learn more and connect with others at:

OcularCancer.com – Your resource for rare eye cancers, survivor stories, treatment guidance, and community.