Comment. The findings point against a thin cornea as an associated factor for disc hemorrhages in glaucoma.\(^2\)^\textsuperscript{a} Because disc hemorrhages are usually associated with glaucoma progression, the results do not support a thin cornea to be a pathogenic risk factor for glaucoma progression.

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Primary Clear Cell Carcinoma of the Conjunctiva

Clear cell carcinoma is a rare variant of squamous cell carcinoma of the skin characterized by extensive cytoplasmic hydropic change.\(^1\)\(^2\) These tumors tend to occur in the head and neck of elderly white men. Because the clear appearance of the cytoplasm is due to hydropic change rather than the accumulation of lipid, mucin, or glycogen, histochemical stain results are negative. Some of these clear cells have a “bubbled” cytoplasm and have been confused with sebaceous carcinoma.\(^3\) To our knowledge, primary clear cell carcinoma on the conjunctiva has not been reported.

Report of a Case. A 79-year-old man visited for continuation of care after changing residency. His ocular history was significant for a conjunctival tumor excised from the right eye 12 years earlier. The patient brought his medical records with him. The original pathologic interpretation was Bowen disease. After the tumor was excised, local recurrences developed 1 and 4 years later. Both were removed surgically and diagnosed as carcinoma in situ. The patient had not had an eye examination in several years.

On examination, corrected visual acuity was 20/150 OD. A papillomatous conjunctival tumor was at the limbus, extending from the 9-o’clock position to the 3-o’clock position (Figure 1). The anterior chamber was normal. Other than cataract, the remainder of the examination was noncontributory. There was no regional adenopathy.

The tumor was excised under local anesthesia with a visibly normal margin, and abnormal epithelium was removed from the cornea mechanically. The surgical bed

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**Table. Criteria for the Definition of Glaucoma in the Beijing Eye Study\(^a\)**

<table>
<thead>
<tr>
<th>Criteria Type(^b)</th>
<th>Criteria</th>
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</thead>
<tbody>
<tr>
<td>Absolute(^c)</td>
<td>Neuroretinal rim notch in the temporal inferior region and/or the temporal superior region, so that the ISNT rule was not fulfilled (in eyes with an optic cup sufficiently large to allow an assessment of the neuroretinal shape) Localized retinal nerve layer defect that could not be explained by any cause other than glaucoma Abnormally large cup in relation to the size of the optic disc</td>
</tr>
<tr>
<td>Relative</td>
<td>Neuroretinal rim was markedly thinner in the inferior disc region compared with the superior disc region, even if the smallest part of the neuroretinal rim was located in the temporal horizontal disc region Diffuse decrease in the visibility of the retinal nerve fiber layer (particularly in eyes with small optic discs) if the background pigmentation of the eye allowed an assessment of the retinal nerve fiber layer and if there were no reasons other than glaucoma for retinal nerve fiber layer loss Marked diffuse thinning and/or focal thinning of the retinal arteries if there were no reasons other than glaucoma for retinal vessel thinning Optic disc hemorrhage if there were no other reasons for a disc bleeding such as retinal vessel occlusions</td>
</tr>
</tbody>
</table>

Abbreviation: ISNT, inferior-superior-nasal-temporal.

\(^a\)If no absolute glaucoma criteria were positive, at least 2 relative criteria had to be positive including the occurrence of an optic cup in a small optic disc that usually would not show cupping. The intraocular pressure and the occurrence of visual field defects were not criteria for the diagnosis of optic disc glaucoma.

\(^b\)The only criterion for optic disc glaucoma was a glaucomatous appearance of the optic disc.

\(^c\)Each of which were sufficient.

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**Figure.** Box plots showing the distribution of central corneal thickness in subjects with and without optic disc hemorrhages in the Beijing Eye Study. The box contains 50% of the data; the line in the box represents the median.