

# MILTON WOMAN FINDS THE POSITIVES AFTER RARE AND DEVASTATING DIAGNOSIS

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Initially, Paige Panetta wanted to keep the devastating news to herself. She was only 27, about to embark on a European holiday, travelling the world with her job. There were no symptoms. She didn't even fit the profile; this was an illness that most often affected older white males with light skin and blue eyes.

Family and friends were the only ones who would know the painful truth.

"So many people close to me started saying, 'Paige, I've never been through an eye test before because you have to pay, it's not covered by OHIP.' Then I realized how important it was to share my story, if it means people are going to go get their eyes checked. This cancer is silent; if you don't catch it early, it spreads, and once it spreads to your liver or lungs, you have advanced cancer. There are clinical trials and treatment, but there's no cure for it."

The disease that shattered her world is ocular (or uveal) melanoma (OM), a cancer of the eye, diagnosed in approximately five out of every million people. Although produced by the same cells in the body, melanocytes, OM is different from skin melanoma and is not related to sun exposure, according to the OM Foundation.

"It's not very well understood. It presents differently than melanoma," said Panetta, a board certified behaviour analyst. "I had no symptoms. Actually, it



Travis Gerrits photo  
Paige Panetta with Sam, her nine-month-old Golden Retriever, purchased after she finished cancer treatment and traveled to Greece.

wasn't discovered the first time, which is the scary part."

After a routine eye exam in the spring of 2017, she was told "everything looked great, there was nothing wrong with my eyes, I had perfect vision."

A week later, while on the beach she got sand in her eye and "a pretty good scratch."

"Luckily," when she called the same optometrist to book an appointment, there wasn't one available and the office was closed the following day.

"So, I was referred to somebody else in Milton, and that eye doctor found the cancer, Dr. Philip Vrkljan (Milton Optometry)."

"My eye was really red and irritated. All through

the examination, he kept paying attention to my right eye, kept looking in it, taking second looks and I kept thinking to myself, 'What is he thinking? My left eye is red and irritated.'"

What Dr. Vrkljan had seen was something like a freckle in Panetta's eye. "Freckles aren't a big deal, everyone has freckles, even in their eyes, but he said yours has characteristics that could make it cancerous."

She was immediately referred to an ophthalmologist, and with the official diagnosis July 10 at Princess Margaret Hospital's ocular oncology clinic, "everything became very real."

"I think I blocked most of it out to be honest. I think I went into shock. I didn't hear anything. It felt like my whole world just paused or stopped."

She underwent brachytherapy, or plaque radiation therapy, a treatment that involves installation of a radiation-containing plaque (metal piece) that is sewn to the wall of the eye. The device stayed in for a week and caused some miserable side effects.

"Each day was a little bit different. My peripheral vision was very different and my depth perception was so off. I was walking into things. I couldn't drive, I wasn't allowed to have normal showers, I needed help washing my hair, I was pretty nauseous, didn't eat a lot, threw up a lot."

Because of the location of her tumour, surgeons had to cut a couple of muscles that hold the eye in

place resulting in double vision while the muscles healed.

Panetta is monitored very closely; every six-month visit to PM, she undergoes a blood tests, an MRI and her abdomen is checked for any signs the cancer has spread.

Recently, she has had to begin monthly Avastin injections to try and stop a hemorrhage in her eye, a side effect from the radiation last year and hopefully save her eye, she said.

All of this, yet she considers herself one of the lucky ones.

Yes, there's always that reminder; if she's tired, her eye gets droopy or lazy, and if she stares at a computer screen too long, she may experience some pain. Some days, her vision is blurry, but she can still see and read tiny print.

"If you saw me on the street, you'd have no idea."

"I got really lucky. I went in thinking I'd lose quite a bit of vision. They have to tell you all the possibilities — they might have to remove your eye, you could lose all of your vision or some of it. My tumour was pretty close to the vision centre, so there was that worry."

Strangely enough, through sharing her story, the family has discovered four other people in Milton alone who suffer from OM.

She's trying to adjust to her "new normal, but I definitely have my moments where it's scary or I get sad or angry. I'm very lucky I have so many friends and family that are always there

## OCULAR MELANOMA

In his 15 years of practice, Dr. Philip Vrkljan, the Milton optometrist Paige Panetta credits with saving her life, has encountered three cases of ocular melanoma.

"All cases were diagnosed during a routine eye examination without any patient symptoms. All cases were diagnosed using a 20D lens with a binocular indirect ophthalmoscope, which is a standard instrument in all optometry offices."

The use of digital retinal imaging and OCT scan is helpful in the diagnosis and monitoring of the condition as well," he said. Optometrists are primary eye care providers, whereby they are a patient's first line of defence against sight threatening conditions, he said.

"Unfortunately, many people still believe that going to see an optometrist is 'simply to see if I need glasses'. What people still don't know is that an optometrist will provide a comprehensive eye examination."

This will include an assessment of visual function and the need for glasses, but more importantly, a complete overall health system check of the eye and visual system, said Dr. Vrkljan.

This examination will include a screening visual field to test a patients' peripheral vision and a digital retinal image/OCT scan of a patients' retina. A complete patient health history will include a review of family history for ocular diseases such as glaucoma, macular degeneration or cancers of the eye.

A complete eye examination will also include a test of visual acuity, binocular function, extraocular muscle function, pupil evaluation, front of the eye check under a slit lamp microscope, intraocular pressure check and a back of the eye check through a dilated pupil using a slit lamp microscope and/or binocular indirect ophthalmoscopy.

Many times, asymptomatic diseases are detected prior to any patient's awareness of symptoms. In other words, someone coming in for a routine eye exam may have no idea that they have a serious eye health issue, he said.

In the case of a diagnosis of a suspicious lesion or "spot" in the back of the eye, it is important for prompt detection, he said. As is the case for many conditions, early detection is paramount for prevention and treatment.

When it comes to the diagnosis of an ocular melanoma, typically an optometrist will identify a "suspicious freckle" also called a "suspicious nevus" in the back of the eye.

Everyone, starting at six months of age, should see an optometrist yearly to have their vision and eye health checked, he said.

All patients with blurry vision, sudden changes to their peripheral vision or sudden-onset flashing lights/floating spots in their vision should make an appointment immediately with an optometrist because early detection and treatment is the key to vision loss prevention, he said.

supporting me, taking time off of work to get me to my appointments."

"It still feels surreal sometimes, even though it's been over a year now. I definitely am one of those luckier ones. I definitely have one of the happier stories to share."

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