Objective: To determine the coexistence of ocular melanoma with Parkinson's disease (PD), in Veterans, using electronic health records (EHR).

Background: Cutaneous malignant melanoma is considered to be more common in PD patients. However, the association of non-cutaneous melanoma, e.g. ocular melanoma, with PD is less clear. We identified two cases of ocular melanoma in a recent chart review study (unpublished data) while exploring the association of PD with malignant melanoma among Veterans within VA integrated service network 16 (VISN 16). This study was designed to determine the coexistence of ocular melanoma (as a subgroup of malignant melanoma) with PD, in the same population, by expanding the search criteria to include ocular malignancy diagnostic codes.

Methods: Electronic medical records for VISN 16 during the period of 10/01/1997 to 09/30/2007 were queried for diagnosis of movement disorders, malignant melanoma and ocular malignancy, based on ICD 9 codes. Out of 504 charts with dual diagnosis of malignant melanoma and movement disorders, 59 cases had ICD 9 codes for ocular malignancy. These charts were further reviewed for accurate movement and ocular diagnosis.

Results: Nine cases of ocular melanoma were identified. Two with comorbid diagnosis of idiopathic parkinsonism, one with drug induced parkinsonism, two each with Essential Tremor and non-specific tremor. Two cases were miscoded for a movement disorder: 40 cases were miscoded as ocular malignancy despite having benign lesions, 9 patients had non-melanoma ocular malignancy, while one chart was inaccessible. In addition to the 4 previously identified cases, an additional 55 charts were reviewed for subjects with codes for both eye cancer and a movement disorder.

Conclusions: Only two cases of ocular melanoma were found to co-exist with idiopathic parkinsonism in a Veteran population, using these search criteria, similar to what was noted for other movement disorders. However, the miscoding of benign ocular conditions with ocular malignancy raises the question of possible miscoding of ocular melanoma with benign ocular diagnoses. Hence, we plan to expand our search criteria by including codes for benign ocular lesions to complete our query and resolve the above mentioned coding concern.