

How Proton Therapy Helped Eradicate Ocular Melanoma

A spot was discovered in a retired airfield manager's eye during the height of COVID-19. Today, scans show no indication of cancer.

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Six years ago, 66-year-old Ron White, a retired civilian airfield manager from Lacey, Washington, went to the optometrist for a routine appointment. There, his doctor noticed a tiny spot in the back of his eye and urged him to see an ophthalmologist — a physician who provides full-scope eye care, including complex medical treatments and surgery.

Unfortunately, it was the height of the COVID-19 pandemic, when healthcare facilities faced staffing shortages and closures. White tried but was unable to schedule an appointment. Without symptoms, it was easy for him to delay being seen.

But when he went back to an optometrist in December 2024, he was again referred to an ophthalmologist because of the spot, and immediately on to [Andrew Stacey, MD](#) at UW Medicine, a leading ocular cancer specialist in the Pacific Northwest.

The ophthalmologist had speculated that the spot could be ocular melanoma, so White was nervous. After a thorough exam and an MRI, Stacey confirmed the diagnosis.

"It's scary being diagnosed with melanoma," White said. "Melanoma is aggressive." If left unchecked, even ocular cancers can metastasize to other organs, including the liver, lungs and bones and can be fatal.

Ocular melanoma risk factors include exposure to UV radiation from the sun. White spent a lot of his life outdoors working with planes at Joint Base Lewis McChord. While this may have contributed to his risk, there is no way to know.

White went to see [Lisa Ni, MD](#), at the proton therapy facility to discuss next steps. Ocular melanoma was one of the first cancers treated with proton therapy — which is considered the treatment of choice due to its precise targeting of the tumor within or surrounded by critical and sensitive healthy tissue. In preparation, he had surgery to place tantalum clips on his eyeball — small metal clips that help direct the radiation and stay on the eye permanently, though they are

typically neither seen nor felt after a few days.

He began his week of daily proton therapy sessions in April 2025.

“Choosing radiation therapy often requires multidisciplinary discussions between the patient’s ophthalmologist and radiation oncologist,” said Ni, who treats ocular and central nervous system tumors at Fred Hutch – Proton Therapy and treated White’s cancer.

“In addition to the precision and local tumor control that proton beam therapy provides, another advantage is that we aren’t limited anatomically by the location of the tumor in relation to the eye and surrounding structures,” she said.

Ni and Stacey decided together that due to the tumor size and location, proton beam therapy would be the most appropriate for treating his tumor.

“The minute I walked into the proton therapy lobby, everyone was so caring,” White said. “They made things so easy for me in terms of appointments, which in turn made the process so much less stressful. The radiation therapists took pictures for me in my mask, and I enjoyed being able to mentally prepare with coffee and the literature in the lobby. In fact, once I read that the course of treatment can take between one and nine weeks — and mine was one — I felt so lucky.”

For treatment, White had a [mask](#) made to hold his head in place while the beam was on. Seated in a chair, with the mask attached, he had to look first at one spot, then a second one while the beam was active.

“The actual treatment was just a couple minutes, but getting positioned took the most time,” he said.

For White, short-term side effects included severe irritation of his eyelid, which resolved with ointments after about a month. Longer-term side effects include sensitivity to outdoor light and dryness. Mornings are the most difficult.

“When I wake up, my eyesight is foggy for about 10 minutes. I clean the morning gunk and put in the drops, and then I can see well again. When wearing my glasses, it feels almost normal,” White said. “And I always wear sunglasses and a baseball cap outside now to shield my eyes from the sun.”

His providers were extremely happy with the outcome of radiation when they saw White for a follow-up. The tumor had shrunk and is continuing to do so.

They advised White that his vision could decline over the next few years, a normal side effect of ocular melanoma treatment, and that he should follow up with them every six months. White also needs to be followed by a medical oncologist to monitor his body for metastases, as melanoma is the type of cancer that spreads easily. A recent scan, however, showed no indications of cancer.

Now, White is back at the driving range, perfecting his golf swing, and is looking forward to spending time on the golf course in the spring.

Advice for others?

“Be positive,” White said. “Make sure you talk to the doctors as well as the nurses and assistants. They have different perspectives, and it can really help you feel more prepared. For me, the more prepared I am, the more relaxed I am.”

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