Superior divisional oculomotor paresis due to intracavernous internal carotid artery aneurysm

A 49-year-old woman presented with vertical diplopia, drooping of the right eyelid, and right-sided retro-orbital pain for 10 days. Examination revealed ptosis, hypotropia, and elevation paresis in the right eye (figure, A). Other findings were normal, including the pupils. MRI and cerebral angiography disclosed a right-sided intracavernous carotid aneurysm (figure, B) that was treated with coil embolization (figure, C).

Superior divisional oculomotor paresis is characterized by ptosis and superior rectus palsy.1,2 Divisional oculomotor palsy usually indicates a lesion in the anterior cavernous sinus or superior orbital fissure since the oculomotor nerve branches into superior and interior divisions in those areas.1

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Address correspondence and reprint requests to Dr. Ji Soo Kim, Department of Neurology, Seoul National University College of Medicine, Seoul National University Bundang Hospital, 300 Gumi-dong, Bundang-gu, Seongnam-si, Gyeonggi-do, 463-707, Korea; jisookim@snu.ac.kr

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Joo Young Kwon, Hyun Seok Song and Ji Soo Kim

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