Teaching NeuroImages: Optic nerve sheath meningioma presenting as gaze-evoked amaurosis

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Figure Imaging shows optic nerve edema, calcification, and postgadolinium enhancement consistent with optic nerve sheath meningioma

A 47-year-old woman reported a slowly progressive 15-month history of intermittent visual loss on rightward gaze as well as diminished visual acuity of her right eye. Examination revealed right ocular red desaturation, afferent pupillary defect, impaired visual acuity, and optic disc swelling (figure, A). Head imaging revealed an optic nerve sheath meningioma (figure, B and C). A brain MRI performed 4 months prior to the current evaluation displayed a similar pattern of optic nerve enhancement. Gaze-evoked amaurosis is transient monocular visual loss on eccentric gaze. It is suggestive of intraconal
pathology and is putatively caused by position-dependent occlusion of the retinal or optic nerve circulation. The most common causes of gaze-evoked amaurosis are optic nerve sheath meningioma and cavernous hemangioma. Treatment options for optic nerve sheath meningioma include observation, radiotherapy, radiosurgery, and resection.

Author contributions
Stephen A. Abraham Johnson: preparation of manuscript. John J. Chen: review of manuscript, funduscopic imaging. W. Oliver Tobin: review and supervision of manuscript.

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Disclosure
The authors report no disclosures relevant to the manuscript. Go to Neurology.org/N for full disclosures.

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