A 71-year-old man presented to the emergency department with bilateral blurred optic discs, referred by his optometrist following a routine eye test. He had no visual or headache symptoms. Visual acuity was 20/20 bilaterally; funduscopy concurred with the optometry findings. Investigations for presumed papilledema were initially interpreted as normal (CT head/lumbar puncture). In clinic, optical coherence tomography (OCT) imaging identified optic disc drusen (ODD) (figure 1).

The invasive investigations could have been avoided if an ophthalmology examination had been performed to exclude pseudopapilledema, as recommended. ODD are common in the general population.
population (up to 2.4%). They are clearly visualized with OCT imaging including cross-sectional optic nerve head volume scans and blue autofluorescence (figure 1D). Indeed, the CT head documented the drusen (figure 2). Although rarely ODD can coexist with papilledema, this is evident on both cross-sectional OCT imaging and dilated slit-lamp biomicroscope examination.

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**References**


Teaching NeuroImages: Distinguishing Papilledema From Pseudopapilledema Using Optical Coherence Tomography

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