A 17-year-old girl, who previously lived in South America, complained of painful diplopia for 1 month. Two similar transient episodes occurred 6 and 36 months previously. Left abduction and elevation were limited, with 2 mm left proptosis. Orbital MRI revealed a left medial rectus muscle cysticercus (figure). Blood serology was positive for cysticercosis. Rapid improvement followed oral albendazole and prednisone therapy.

Cysticercosis develops when humans become the intermediate host of *Taenia solium*, occurring mostly under poor sanitary conditions. Because of travel, cysticercosis is encountered worldwide. MRI appearance and blood serologies are diagnostic and oral albendazole is usually curative.1,2

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

Appendix
Authors

<table>
<thead>
<tr>
<th>Name</th>
<th>Location</th>
<th>Contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emmanuelle Moret, MD</td>
<td>Hôpital Ophtalmique Jules-Gonin, Lausanne, Switzerland</td>
<td>Examined the clinical chart, wrote the manuscript, composed the figure</td>
</tr>
<tr>
<td>François-Xavier Borruat, MD</td>
<td>Hôpital Ophtalmique Jules-Gonin, Lausanne, Switzerland</td>
<td>Acquired the data (examined the patient, established the diagnosis), revised the manuscript</td>
</tr>
</tbody>
</table>

References

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Painful Recurrent Diplopia Caused by Medial Rectus Cysticercosis
Emmanuelle Moret and François-Xavier Borruat

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