

EXOPHTHALMIA REVEALED OPTIC NERVE SHEATH MENINGIOMA

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A 38-year-old woman suffered from painless and progressive right exophthalmia for two months. The clinical exam revealed a loss of visual acuity with a visual field defect. The orbital CT showed calcified thickened of the right optic nerve, causing exophthalmia without the involvement of intra-orbital fat or muscles (Figures A, B). The diagnosis of optic nerve sheath meningioma was strongly evoked. Radiotherapy is offered first before discussing a complementary surgery.

The optic nerve sheath meningioma (ONSM) is a rare and painless tumor. The progressive loss of vision is the main clinical sign. According to Schick and al. classification, 03 main types are distinguished: Type I: purely intra-orbital ONSM. Type II: with extension through posterior orbital orifices. Type III: with intracranial extension. The orbital CT shows thickened optic nerve which can be totally or partially calcified. MRI delimits better the optic nerve within the tumor in the classic imaging of tram-tracking or doughnut shape.

Keywords: optic nerve sheath meningioma, Diagnosis, Orbital CT.

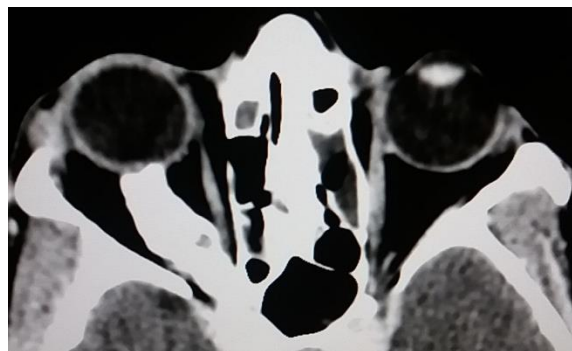


Figure A: Calcified thickening of the right optic nerve causing exophthalmia in CT (soft filter).



Figure B: Calcified thickened right optic nerve better showed in CT (bone filter).