

# **Out Of Left Field:**

# The utility of perimetry in nonspecific vision loss

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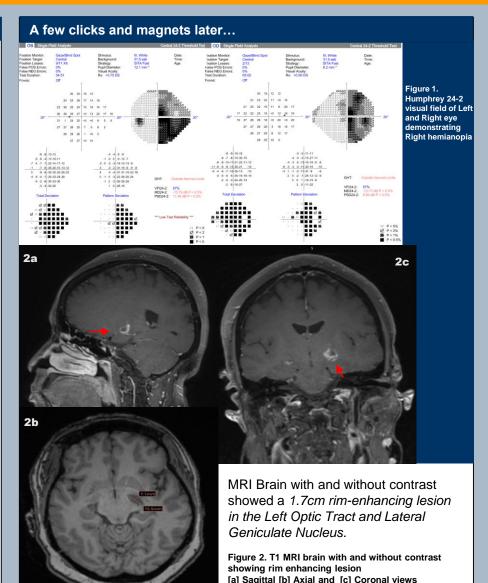
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#### **Case Introduction**

- A 47 year-old female with no reportable medical history presented to the ED for acute onset blurred vision of both eyes
- Ophthalmic exam at this time was unremarkable. Imaging, including CTA head and neck, was also nonrevealing
- She was seen in Clinic the following day where her examination was notable for VA of 20/500 in the right eye and 20/100 in the left eye
- Pupillary exam, IOP, Confrontational fields, Extraocular movements, anterior and posterior examination was all normal
- OCT macula and RNFL were grossly unremarkable

Our workup thus far was negative, so we decided to get some visual fields...

- Visual field testing demonstrated a suspicious Right Hemianopia (Figure 1 top middle panel)
- At this point she was sent back to ED for urgent neuroimaging



### **Discussion**

Differential Diagnosis of rim enhancing lesion: **MAGIC DR**<sub>r41</sub>

#### Metastases

Abscess, including pyogenic abscess and abscess caused by atypical organisms, such as bacterial pathogens, fungal pathogens and parsitin pathogens

Glioma and other primary CNS neoplasms

Infarction

Contusi

Demyelination (multiple sclerosis, acute disseminated encephalomyelitis)

lesolving hematoma/radio necrosis

- Our patient was admitted, where workup for the above etiologies was negative
- Once infectious causes were ruled out, she was treated with IV steroids and subsequently discharged
- The cause of her rim enhancing lesion remains unknown, but repeat MRI showed complete resolution of the lesion, making demyelinating disease more likely
- In a case report from UCLA, HVF defects preceded MRI findings in GBM in 2 patients<sub>[2]</sub>

## **Takeaways**

- Visual Field testing may be useful in the workup of unexplained vision loss
- Visual Field defects may precede neuroimaging findings in certain cases
- The differential for rim-enhancing lesion is broad and requires immediate workup
- It is important to recommend the correct neuroimaging studies when referring patients to the Emergency Department

#### ReferencesAcknowledgements

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