Case Study 117 Pseudotumor

AA is a 36-year-old woman who presented with bulging of her right eye over several weeks. She denied pain or double vision. Examination found exophthalmometry measurements of 21 mm OD and 16 mm OS. A CT scan showed a probable mass lesion, and an excisional biopsy was scheduled. An ultrasound consultation was ordered, and the findings were reported as most consistent with orbital pseudotumor based on low internal reflectivity (Fig. 1). The lesion did not have the molding effect commonly seen with orbital lymphoma. The patient

was started on high-dose oral steroids based on this report and was reexamined the day before surgery. The lesion could not be detected at that time, and this supported the diagnosis of pseudotumor.

Various series report the incidence of orbital pseudotumor to occur in 5–7 % of orbital disease processes [39]. The general category of orbital pseudotumor is more specifically defined by the orbital structure involved. The extraocular muscles are not commonly involved by the idiopathic inflammatory process defined as myositis.

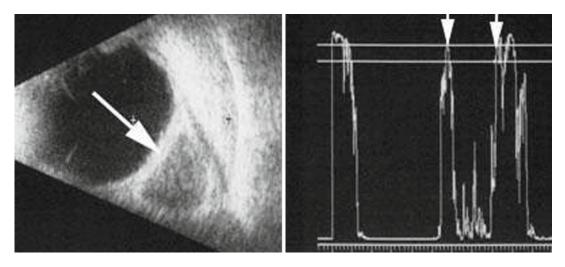


Fig. 1 Left: B-scan of orbital pseudotumor (arrow). Right: A-scan of lesion (arrows)