

MINERVA

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A 62 year old woman was referred with three months of worsening diplopia. She had a left pulsatile exophthalmos, a

left sixth cranial nerve palsy, and generalised extraocular muscle restriction affecting her left eye. She also had marked left conjunctival and eyelid oedema and dilated episcleral blood vessels. Her left intraocular pressure fluctuated between 28 and 32 mm Hg with each pulsation, and a bruit was audible on auscultation. She subsequently developed worsening left pulsatile tinnitus. Contrast enhanced computed tomography identified a cavernous, sinus arteriovenous fistula with left orbital venous congestion. After embolisation of the fistula, her symptoms resolved.

Patient consent obtained.

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