Enophthalmos in silent brain syndrome

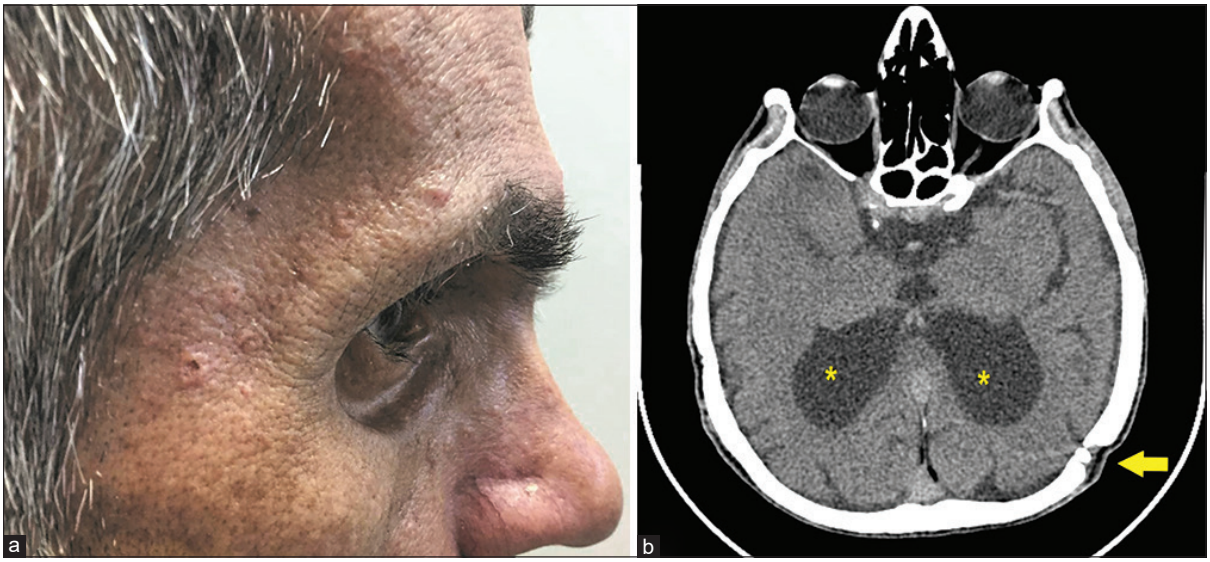

Figure 1: (a) Lateral view photo exhibits prominent enophthalmos due to the syndrome (b) CT scan displays brain changes related to the significant orbital volume reduction

No related papers from this study have been published before this submission for Indian Journal of Ophthalmology.

A 56-year-old man underwent a shunting procedure in childhood due to hydrocephalus secondary to meningitis. Along the following years, he manifested recurrent tearing, foreign body sensation, and slow "eye shrinking". External clinical exam confirmed enophthalmos, poor lid apposition to the globe, and inferior ectropion bilaterally [Fig. 1a]. Biomicroscopy showed dry eye syndrome bilaterally. Computed tomography scans of the brain and orbits revealed ventriculomegaly (asterisks), ventriculoperitoneal shunt valves (one implant at arrow), posterior displacement of eyeballs, and significant orbital remodeling [Fig. 1b]. The patient was diagnosed with silent brain syndrome, a rare form of progressive enophthalmos after intracranial pressure resolution.[1,2]

Declaration of patient consent

The authors certify that they have obtained all appropriate patient consent forms. In the form the patient(s) has/have given his/her/their consent for his/her/their images and other clinical information to be reported in the journal. The patients understand that their names and initials will not be published and due efforts will be made to conceal their identity, but anonymity cannot be guaranteed.

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Nil.

Conflicts of interest

There are no conflicts of interest.

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