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Optic nerve involvement as a first manifestation of acute lymphoblastic leukaemia after remission

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DESCRIPTION

A 20-year-old girl with acute lymphoblastic leukaemia in second remission for 4 years, presented with blurring of vision and binocular diplopia for 2 months duration. Examination revealed isolated left 6th cranial nerve palsy. Fundus showed swollen both optic disc and fan-shaped macular star suggestive of papilloedema. CT scan and MRI of brain revealed no space occupying lesion or hydrocephalus. However the presence of peripapillary yellowish infiltrates raised suspicion of leukaemic infiltrates (figures 1 and 2). Lumbar puncture revealed numerous blast cells. Bone marrow biopsy also showed frank relapse with precursor B cells acute lymphoblastic leukaemia. Leukaemic

optic disc infiltration is rare and may mimic papilloedema.¹ Presence of yellowish peripapillary infiltrates² should alert attending physician to proceed with lumbar puncture to confirm the diagnosis of a relapse. This patient underwent systemic and intrathecal chemotherapy.

Competing interests None.

Patient consent Obtained.

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Figure 1 Right fundus image shows peripapillary yellowish infiltrates and haemorrhages.

Figure 2 Left fundus image shows peripapillary yellowish infiltrates and haemorrhages.

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Please cite this article as follows (you will need to access the article online to obtain the date of publication).

Peyman M, Hieng TLN, Subrayan V. Optic nerve involvement as a first manifestation of acute lymphoblastic leukaemia after remission.
BMJ Case Reports 2011;10.1136/bcr.11.2010.3517, date of publication

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