Orbital Myositis Presenting as Painless Ophthalmoplegia

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A 78-year-old non-diabetic woman was admitted to our hospital with a 20-day history of acute painless right ptosis, upper eyelid swelling, and diplopia. There were moderate total limitations of eye movement (Picture 1). Computed tomography and magnetic resonance images showed gross enlargement of the belly of the extraocular muscles (Picture 2). A high signal was present in these muscles on T2-weighted imaging. There was no clinical or serological evidence of collagen vascular disease, sarcoidosis, or Graves’ disease. Idiopathic orbital myositis (IOM) was diagnosed.
Corticosteroid treatment produced dramatic improvement.

IOM is a nonspecific orbital inflammation primarily involving the extraocular muscles. Its cardinal clinical feature is orbital pain exacerbated by eye movement (1). IOM is one of the most important differential diagnoses of "painful ophthalmoplegia", ranking with Tolosa-Hunt syndrome or vascular conditions such as an aneurysm. Painlessness (2) indicates that IOM should not be ruled out in the case of "painless ophthalmoplegia."

References


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