

Papilloedema pathway WAHT-TP-020

Diagnosis

Patients may have accompanying cranial nerve lesions, cortical, cerebellar and pyramidal signs.

All patients with papilloedema need urgent scanning to exclude a symptomatic intracranial mass lesion.

Inclusion criteria:

Bilateral disc swelling where intracranial SOL and IH cannot be excluded.

N.B may be unilateral if contralateral optic atrophy

Exclusion criteria – alternative differential diagnoses for disk swelling*

Vascular CRVO, Malignant hypertension, NAION

Inflammatory (Ocular) AION, Scleritis, Uveitis, Optic neuritis
(Orbital) Wegeners, Sarcoidosis, Chug Strauss, IgG4 disease, TED

Infective- e.g. Toxoplasma

Toxic optic neuropathy (drug associated)

Hypotony

Diabetic papillopathy

*Managed under care of named Consultant Ophthalmologist