Imaging review and diagnostic outcomes of individuals with suspected papilloedema seen in emergency eye services

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Background/Aims

- Guidelines from Association of British Neurologists state that all patients should have CT or MRI head and venogram to investigate cause of papilloedema [1]
- However often many parent specialities are not confident in identifying papilloedema, leading to many cases that could be seen and managed outside the eye emergency department (EED).

This project aimed to:

1. Ascertain if people are being imaged as per guidance
2. Gauge numbers of people attending EED with papilloedema
3. Determine final diagnoses of those with suspected papilloedema

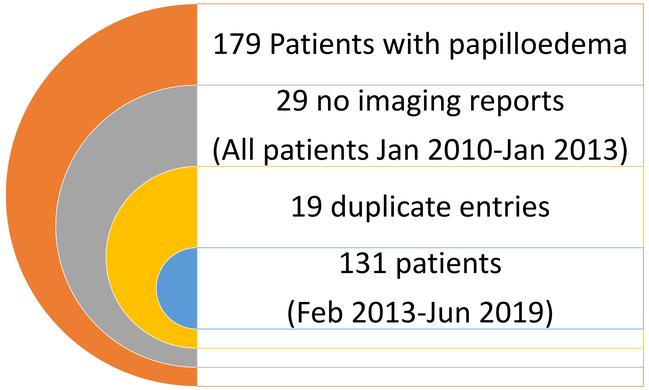
Methods

- Retrospective review of EED electronic records & hospital imaging
- Only reviewed first presentation
- Timespan covered by study: Jan 2010-Jun 2019

Reference

[1] Mollan SP, Davies B, Silver NC, et al. Idiopathic intracranial hypertension: Consensus guidelines on management. *J Neurol Neurosurg Psychiatry*. 2018;89(10):1088-1100.

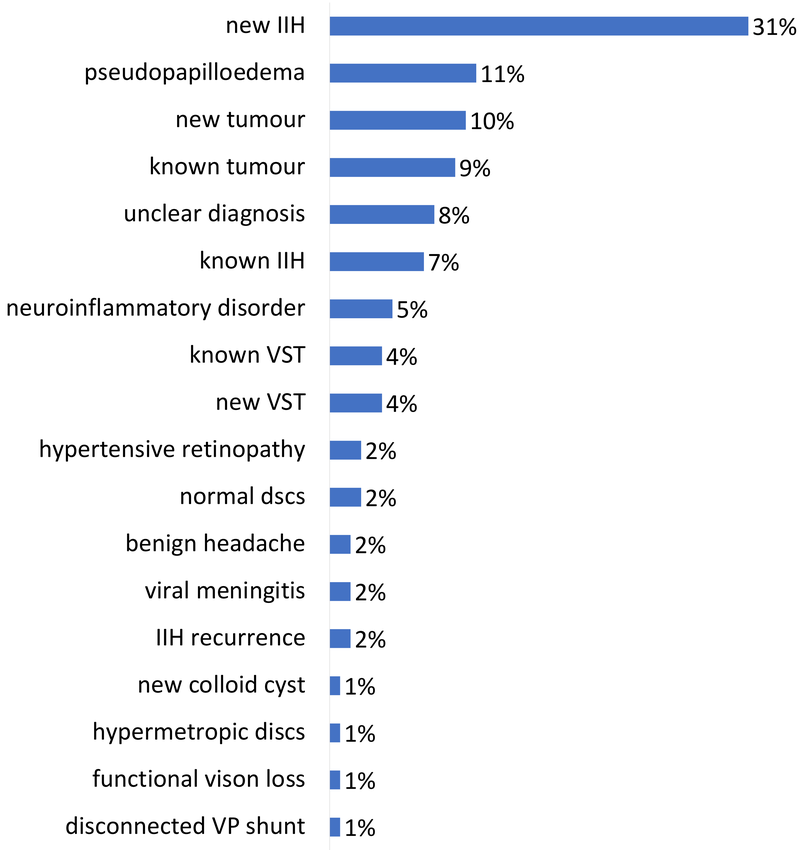
Results: Number of patients



Results: Guideline compliance

Investigation	% patients	Guideline %
CT or MRI head	**73%**	**100%**
CT or MRI intracranial venogram	**49%**	**100%**

Results: Eventual diagnoses



Conclusions

- Imaging not performed as per guidance; however eventual diagnosis may not warrant it
- Potential to give extra capacity in EED by creating alternate pathway for those requiring baseline fields and disc assessment prior to intervention