

Drug-Induced Intracranial Hypertension from Tibolone: A Rare Case Report

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Objective

This report presents a rare case of intracranial hypertension induced by **tibolone**, a synthetic steroid used in managing postmenopausal symptoms. While drug-induced IIH is known with agents like retinoids and tetracyclines, its link to tibolone is exceedingly rare. This case raises awareness of the potential neurologic risks associated with hormonal therapies in postmenopausal women

Case report

Patient: 54-year-old postmenopausal woman**Symptoms:** 3-week history of pulsatile headache, transient visual obscurations, and tinnitus**Medication:** On tibolone for 8 months to manage vasomotor symptoms**Findings:**Bilateral papilledema on fundoscopyNormal MRI brain (no mass or hydrocephalus)**Lumbar puncture:** opening pressure 33 cmH₂O, normal CSF biochemistry

Conclusion

Tibolone should be considered in the differential diagnosis of drug-induced IIH, especially in postmenopausal womenClinical vigilance and early intervention are critical for vision preservationFurther research is needed to define the incidence, clarify the mechanism, and develop risk stratification protocolsIncreasing awareness can improve outcomes and prevent complications

Discussion

Drug-induced IIH is most commonly associated with tetracyclines, vitamin A analogues, and oral contraceptives. Tibolone, with estrogenic, progestogenic, and androgenic properties, may disrupt cerebrospinal fluid dynamics, especially in predisposed individuals (e.g., obesity, prior hormone exposure).Although extremely rare, this case aligns with findings from Giuseffi et al. (2020), which included reports of hormone-associated IIH. The mechanism may involve altered CSF absorption or venous sinus outflow impedance due to hormonal effects.This case illustrates the importance of drug history in evaluating IIH and the potential for full recovery with timely drug withdrawal. Visual symptoms and papilledema, if missed or ignored, can result in permanent visual impairment.

References

- Giuseffi, V., et al. (2020). Drug-Induced Intracranial Hypertension: A Systematic Review. Journal of Neuro-Ophthalmology.Friedman, D. I., et al. (2014). Revised diagnostic criteria for the pseudotumor cerebri syndrome in adults and children. Neurology, 81(13), 1159–1165.Wall, M., & Corbett, J. J. (1990). Idiopathic intracranial hypertension: A prospective study of 50 patients. Brain, 113(4), 855–874.Smith, J. L. (1985). Pseudotumor cerebri: the idiopathic intracranial hypertension syndrome. Neurologic Clinics, 3(1), 73–81.

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