Orbital myositis

Idiopathic orbital inflammation is the third most common orbital disease, following Graves orbitopathy and lymphoproliferative diseases. We present an 11-year-old girl with 15 days history of painless diplopia. There was no history of fluctuation of symptoms, drooping of eyelids, or diminished vision. She had near-total restricted extra-ocular movements and mild proptosis of the right eye. There was no conjunctival injection, chemosis, or bulb pain. There was no eyelid retraction or lid lag. The rest of the neurological examination was unremarkable. Erythrocyte sedimentation rate was raised with eosinophilia. Antinuclear antibodies were positive. Liver, renal, and thyroid functions were normal. Antithyroid, double-stranded deoxyribonucleic acid, and acetylcholine receptor antibodies were negative. Repetitive nerve stimulation was negative. Magnetic resonance imaging (MRI) of the orbit was typical of orbital myositis. The patient responded to oral steroids. Orbital myositis can present as painless diplopia. MRI of the orbit is diagnostic in orbital myositis [1].

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Chakor RT, Santhosh NS. Painless orbital myositis. Ann Indian Acad Neurol. 2012 Jul;15(3):224-6. doi: 10.4103/0972-2327.99729. PMID: 22919201; PMCID: PMC3424806.