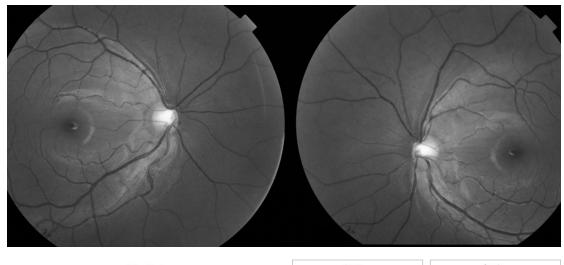
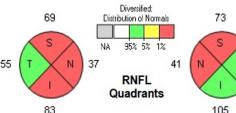
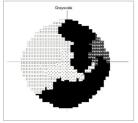
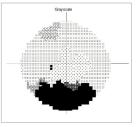
MYSTERY IMAGE BLINK









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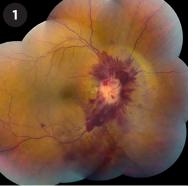
WHAT IS THIS MONTH'S MYSTERY CONDITION? Visit aao.org/eyenet to make your diagnosis in the comments.

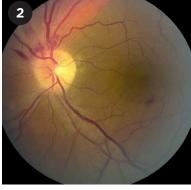
LAST MONTH'S BLINK

Asymmetric Papilledema With Vitreous Hemorrhage Caused by Cryptococcal Meningitis

48-year-old man with AIDS (CD4 lymphocyte count, 27 cells/mm³) presented with headache and fever. Lumbar puncture revealed an opening pressure of 35 cmH2O and positive cryptococcal antigen in the cerebrospinal fluid. The patient reported

mild blurring of vision in the right eye. Visual acuity was 20/40 in the right eye and 20/20 in the left, with no afferent pupillary defect. The right eye (Fig. 1) showed marked disc edema, intraretinal hemorrhage, preretinal hemorrhage, vitreous hemorrhage, macular edema, and hard exudates. The left eye (Fig. 2) had mild sectoral disc edema and a few flame-shaped hemorrhages. There was no evidence of infectious retinitis or endophthalmitis.





The patient was treated with IV amphotericin and fluconazole. On repeat lumbar puncture, the opening pressure was normal (13 cmH2O). The disc edema and hemorrhage resolved, and the patient's visual acuity returned to 20/20 in both eyes.

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