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# Intra-cranial hypertension and vision-threatening papilloedema caused by intradural spinal tumours: a case series of three

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## Abstract

Spinal tumours infrequently cause hydrocephalus, on rare occasions, they can also cause papilloedema, in the absence of ventriculomegaly. When the latter occurs, they can be a diagnostic challenge for physicians. In the absence of limb neurology, much of the initial diagnostic effort is focused solely on intra-cranial causes. This can result in diagnostic delay, misdiagnosis and mistreatment. We describe three cases of intradural spinal tumours that presented with isolated vision-threatening papilloedema. We compare and contrast these patients who had similar presentations, but different management strategies. The different operative management of their spinal tumours, as well as the acuity of visual deterioration determined their respective clinical course and patient journeys. We emphasise the need to preserve vision as a priority, through emergency cerebrospinal fluid (CSF) diversion if necessary. We remind our readers to 'think outside the box' in cases of unexplained papilloedema, and recognise spinal pathology as a possibility amongst the differentials.

**Keywords:** Spinal tumour; hydrocephalus; neuro-oncology; neuro-ophthalmology.

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