**Ophthalmological manifestation of dural arteriovenous fistula** **in the area of the right orbit**

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**Introduction:** Nowadaysit is well known the classic ophthalmological symptoms and signs of the intracranialarteriovenous fistula, but great variety of the anatomical variants of the fistula commonly complicate differential diagnostics of the orbital lesion.

**Aim:** The aim of this paper is to present the case of 72 years old female with unusual case of intracranial dural arteriovenous fistula in the area of the right orbit with ophthalmological manifestation.

**Methods:** Case study. Besides standard ophthalmological examination B-scanning («Vu MAX II» 10 MHz) of the orbits and selective angiography (iodixanol 49%) have been carried out as well.

**Results:**

Clinicalexamination revealed the following: proptosis 2 mm, restricted right ocular motility, periorbital edema, chemosis with dilatation of conjunctival vessels, decreased visual acuity (6/10), concentric narrowing of the visual field, elevated intraocular pressure, no afferent pupillary defect. Fundus exam revealed paleness and glaucomatous excavation of optic disc cap, dilatation of retinal vessels. Any pathological changes of ENT and maxillofacial areas, respiratory systems, any history of periocular trauma or surgery, any history of endocrine or oncological diseases were not detected. B-scanningvisualized convolutive tubular anechogenic formation in the superior-medial area of the orbit (diameter 2,03-2,09 mm), enlargement of the levator and upper rectus muscle, local edema of the orbital cellular tissue. Some intracranial pathological process was suspected and selective angiography were carried out. Opacification of the right external carotid artery detected infilling of the right superior orbital vein from terminal branch of the right middle dural artery.

**Conclusion:** This case presents that sometime intracranial vascular disorders may have unusual ophthalmological manifestation.

**Intracranial arteriovenous fistula in ophthalmological practice**

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