



Ocular coherence tomography of the macula showed diffuse ganglion cell layer (GCL) thinning OD and nasal GCL thinning OS.

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Summary:

Contrast-enhanced magnetic resonance imaging (MRI) of the brain and orbits showed a stable tiny ring-enhancing cystic lesion anterior to the pituitary infundibulum and atrophy of the right greater than left optic nerves.

The presence of bow-tie, or band, atrophy suggests that there is a compressive optic neuropathy from an anterior chiasmal and/or medial, posterior optic nerve lesion. This clinical sign warrants further evaluation with magnetic resonance imaging (MRI) or computed tomography (CT) in a patient with unexplained vision loss. Unilateral band atrophy can also be seen in a patient with a unilateral optic tract lesion.

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