Eastern Region Referral Pathway for Suspected IIH

Headaches+ optic disc oedema or Asymptomatic optic disc oedema

Referring hospital

Review history

Document Weight/Height/BMI/Medications/Tanner/Pubertal status

MRI (include orbits/optic nerves/pituitary fossa

MRV to rule out venous sinus thrombosis and look for signs of IIH

Send MRI/MRV via PACS to Addenbrooke's

FBC, U&E, LFT, BFT, Ferritin, Glucose, TFT, Vitamin D level, Lipid profile



Discuss case with DKR* or on call Paediatric Neurologist

Fax Urgent Referral letter to IIH clinic**/Paediatric neurologist on call

Fax urgent referral letter to Paediatric Neuro-ophthalmology*** (review with BM to confirm Papilloedema)

Optic oedema -unable to grade Or Grade 1-3 papilloedema AND Vison intact Grade 3/4 +/- retinal Haemorrhages

OR

Vision compromised

Child will be seen within 2 weeks of referral in IIH clinic

(Paediatric neurology+Neuroophthalmology)

Decision on LP/CSF infusion study made Review with ophthalmology in 2-4 weeks Discuss with On-call Paediatric Neurology team Baseline OCT

If CSF infusion study not available/Unable to be organised urgently at Addenbrooke's consider Urgent LP Review with ophthalmology in 2-4 weeks

Chronic headache + High BMI + failure of antimigraine medication + MRI features suggestive of IIH + No papilloedema

Discuss with local Paediatric Neurologist before referral to IIH clinic

^{*}DKR - Dr. Deepa Krishnakumar

^{**}IIH clinic/CDC Fax number 01223 217525/ Neurology Nurse Sharon Whyte 01223 216618

^{***}BM – Ms. Brinda Muthusamy, Paediatric Neuro-ophthalmology Fax number 01223 274810