ABSTRACTS

EDITED BY THOMAS J. LIESEGANG, MD

• **Idiopathic intracranial hypertension. Relationship to depression, anxiety, and quality of life.** Kleinschmidt JJ*, Digre KB, Hanover R. Neurology 2000;54:319–324.

IDIOPATHIC INTRACRANIAL HYPERTENSION (IIH) IS A condition of increased intracranial pressure of unknown etiology that occurs most frequently in obese women of childbearing age. The most common symptoms are headache, transient visual obscurations related to papilledema, pulsatile tinnitus and diplopia. This study was designed to assess the prevalence of depression and anxiety among women with IIH and to measure the quality of life in patients with this condition. A matched group cross-sectional study was conducted in which women with IIH (n = 28) were compared with control groups of weight- and age-matched women not diagnosed with IIH (n = 30) and with age-matched women of normal weight (n = 30). Eighty-eight women completed a questionnaire soliciting health information and standardized questionnaires measuring depression, anxiety, and quality of life. Patients with IIH reported a greater number of adverse health problems than either of the control groups. Non-health-related psychosocial concerns were equally prevalent among the three groups, but IIH patients were significantly more affected by hardships associated with health problems than the other two groups. The patient group also had higher levels of depression and anxiety than the control groups. These adverse health conditions were reflected in decreased quality of life measures for the IIH patients. This study supports previous reports that link obesity and psychosocial difficulties, but obesity alone is not the explanation for the higher levels of depression and lower levels of quality of life.—Nancy J. Newman

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• **Optic nerve damage in shaken baby syndrome. Detection by β-amyloid precursor protein immunohistochemistry.** Gleckman AM, Evans RJ, Bell MD, Smith TW*. Arch Pathol Lab Med 2000;124:251–256.

SHAKEN BABY SYNDROME (SBS) INCLUDES THE CONSTELlation of injuries incurred as the result of intentional whiplash movement of an infant's head. The rapid acceleration-deceleration of the head causes retinal hemorrhages, although retinal hemorrhages may also be present in accidental trauma, papilledema, sepsis, severe hypertension and possibly as an artifact of resuscitation. In order to identify additional ocular histologic abnormalities associated with SBS, the authors studied optic nerve axonal injury. Stretch or shear injury to the optic nerve theoretically induces axonal injury with disruption of the cytoskeletan. It is known that immunostaining for β-amyloid precursor protein (β-APP) is a sensitive and reliable method of detecting diffuse axonal injury in craniocerebral trauma, including SBS. The authors immunostained eyes including the optic disc and distal optic nerve from infants who died from SBS (n = 5), combined SBS/blunt head trauma (n = 3), and one case each of blunt head trauma, suffocation, sudden infant death syndrome, positional asphyxia, and an enucleated eye with a retinoblastoma. Results showed positive staining in the optic nerve in three of five of the SBS cases and all three of the combined SBS/blunt head trauma cases. The remaining cases failed to stain. Axonal injury could not be detected in corresponding hematoxylin-eosin stained slides in the positive cases. The β-APP immunoreactivity occurred in beaded or swollen axonal segments and failed to occur in cases where survival after injury was less than two hours. The authors conclude that β-APP immunohistochemistry appears to be the most effective method for demonstrating axonal damage in the optic nerve.—Hans E. Grossniklaus

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• **The therapy of amblyopia: An analysis comparing the results of amblyopia therapy utilizing two pooled data sets.** Flynn JT*, Woodruff G, Thompson JR, Hiscox F, Feuer W, Schiffman J, Corona A, Smith LK. Trans Am Ophthalmol Soc 1999;97:373–390.

THE AUTHORS PREVIOUSLY PRESENTED THE RESULTS OF an original pooled data set of 961 amblyopic patients who underwent patching therapy for amblyopia from 1965

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