documented by the laser ophthalmoscope toward the seeing hemiretina. The authors believe macular sparing to be a perimetric artifact.


Subarachnoid pressure was measured in the optic nerve of 16 eyes before previously scheduled enucleation or evisceration. The mean pressure was 8.5 mm Hg but increased 1–2 mm in Trendelenburg position.


Eleven patients who had surgery for symptomatic Rathke's cleft cysts were identified from records review, eight of whom had initial visual symptomatology. Reduced acuity, visual field defect, and/or optic atrophy were found in nine of 11. Six patients had increase in visual function postoperatively. Although these lesions may mimic craniopharyngioma, it may be important to try to distinguish them preoperatively as a conservative surgical approach is usually curative for these cysts.


The authors purported to ascertain whether or not malingers can be uncovered by the Humphrey's machine but actually challenged unsophisticated volunteers to feign a superior right relative visual field defect both eyes, which they were able to do. Anyone who has seen a malingerer referred with a "screwy" automated field (usually an amoeba-shaped one) knows that this machine offers no help in ferreting out feigned visual loss.


The authors, from Helsinki, Finland, report their experience with ten patients with ocular manifestations of Lyme disease. Not all were seropositive to the ELISA test. Four patients had a neuroretinitis, and three of these had an associated optic neuropathy.

Clinical Features and Treatment of Seven Patients with Carcinoid Tumor Metastatic to the Eye and Orbit. Fan JT, Buettner H, Bartley GB, Bolling JP. *Am J Ophthalmol* 1995;119:211–8 (Feb). [Reprint requests to Dr. H. Buettner, Department of Ophthalmology, Mayo Clinic, 200 First St. SW, Rochester, MN 55905; fax: 507-284-4612.]

Seven patients with carcinoid tumors metastatic to the eye and orbit were found in Mayo Clinic patient files between 1974 and 1992. Patients with metastases to the choroid had the best long-term survival after appropriate therapy. All reported similar cases are discussed, and the entity and its treatment in general described.


A 65-year-old woman had stuttering loss of visual acuity and visual field over eight years. She demonstrated cerebral atrophy over time, especially of the parietal lobes, and brain biopsy demonstrated findings of both Alzheimer's disease and