

**MYSTERY CASE: PENDULAR SEE-SAW
NYSTAGMUS AS A DELAYED COMPLICATION OF
TRAUMATIC BRAIN INJURY**

Eric R. Eggenberger, East Lansing, MI: I read with interest the delayed see-saw nystagmus case detailed by Yunusov et al.¹ We also published 2 delayed cases occurring 21 and 37 years post head trauma involving the chiasmal region.² Both patients exhibited bitemporal hemianopia and MRIs suggestive of chiasmal disruption; one case experienced a modest response to clonazepam. The mechanism of delayed onset

neuro-ophthalmic syndromes and the more familiar oculopalatal tremor are unclear, but may be more common than previously thought.

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1. Yunusov F, Park JH, Huh YE, Kim HJ, Kim JS. Mystery Case: Pendular see-saw nystagmus as a delayed complication of traumatic brain injury. *Neurology* 2014;82:e147–e148.
2. Eggenberger E. Delayed-onset seesaw nystagmus posttraumatic brain injury with bitemporal hemianopia. *Ann NY Acad Sci* 2002;956:588–591.

CORRECTION

IgG4-related diffuse perineural disease

In the NeuroImage “IgG4-related diffuse perineural disease” by M. Soussan et al. (*Neurology*[®] 2014;83:1877–1878), there is a misspelling in the byline. The fourth author’s name should read “Alexis Guyot, MD,” rather than “Guillot” as originally published. The authors regret the error.

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IgG4-related diffuse perineural disease

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