Iridodonesis as a cause of recurrent vertigo

A 56-year-old woman complained of recurrent attacks of vertigo. Attacks lasted no longer than a second and could be easily provoked by abrupt eye movements. Vertigo disappeared when the left eye was covered. Symptoms had begun after left-sided cataract surgery resulting in subluxation of the left lens. The characteristic feature of iridodonesis is the tremulousness of the iris with eye movement (video on the *Neurology*® Web site at Neurology.org). While in many cases iridodonesis is asymptomatic, we speculate that in our patient, the instability of the optical system results in a trembling image on the retina, which, in turn, causes irritation in downstream brain regions.

Hagen Kunte, MD, Friedemann Paul, MD, Florence Pache, MD, Jan Dörr, MD, Judith Bellmann-Strobl, MD, Lutz Harms, MD, Golo Kronenberg, MD

Supplemental data at Neurology.org

From NeuroCure Clinical Research Center (H.K., F. Paul, F. Pache, J.D., J.B.-S.) and Charité Center 15 for Neurology, Neurosurgery and Psychiatry (L.H., G.K.), Charité-Universitätsmedizin Berlin; and Experimental and Clinical Research Center (J.B.-S.), Max Delbrück Center for Molecular Medicine, Berlin, Germany.

Study funding: No targeted funding reported.

Disclosure: The authors report no disclosures relevant to the manuscript. Go to Neurology.org for full disclosures.

Correspondence to Dr. Kunte: hagen.kunte@charite.de

WriteClick® rapid online correspondence

The editors encourage comments about recent articles through WriteClick:

Go to *Neurology.org* and click on the "WriteClick" tab at the top of the page. Responses will be posted within 72 hours of submission.

Before using WriteClick, remember the following:

- WriteClick is restricted to comments about studies published in Neurology within the last eight weeks
- Read previously posted comments; redundant comments will not be posted
- Your submission must be 200 words or less and have a maximum of five references; reference one must be the article on which you are commenting
- You can include a maximum of five authors (including yourself)



Iridodonesis as a cause of recurrent vertigo

Hagen Kunte, Friedemann Paul, Florence Pache, et al. Neurology 2015;85;1353 DOI 10.1212/WNL.000000000002025

This information is current as of October 12, 2015

Updated Information & including high resolution figures, can be found at: http://n.neurology.org/content/85/15/1353.full

Supplementary Material Supplementary material can be found at:

http://n.neurology.org/content/suppl/2015/10/10/WNL.0000000000002

025.DC1

Subspecialty Collections This article, along with others on similar topics, appears in the

following collection(s):

Clinical neurology examination

http://n.neurology.org/cgi/collection/clinical_neurology_examination

Nystagmus

http://n.neurology.org/cgi/collection/nystagmus

Ocular motility

http://n.neurology.org/cgi/collection/ocular_motility

Vertigo

http://n.neurology.org/cgi/collection/vertigo

Permissions & Licensing Information about reproducing this article in parts (figures, tables) or in

its entirety can be found online at:

http://www.neurology.org/about/about_the_journal#permissions

Reprints Information about ordering reprints can be found online:

http://n.neurology.org/subscribers/advertise

Neurology ® is the official journal of the American Academy of Neurology. Published continuously since 1951, it is now a weekly with 48 issues per year. Copyright © 2015 American Academy of Neurology. All rights reserved. Print ISSN: 0028-3878. Online ISSN: 1526-632X.

