VEP Testing in Clinical Practice

VEP Case Review: Occipital Ischemic Stroke Case ID: 90S

Patient Work-Up	
DOB	12/1937
Gender	Male
Age	75
Ethnicity	White
Complaints/Symptoms	History of strokes (2)
Family History	None
IOP (mmHg) OD	15
IOP (mmHg) OS	18
Refraction OD	+3.25
Refraction OS	+3.25
BCVA OD	20/30
BCVA OS	20/30
Preliminary Diagnosis	Stroke

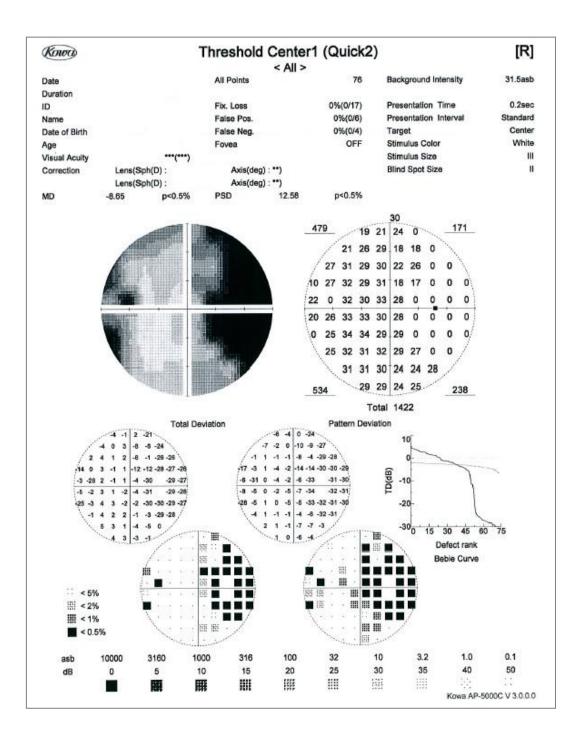
Tests Performed

- Visual Field: OD shows reduced response in the temporal hemifield that remains significant on the pattern deviation plot. OS shows reduced response in the nasal hemifield that remains significant on the pattern deviation plot. The defects are congruent and incomplete.
- OCT: shows all optic disc and RNFL parameters within normal limits.
- VEP: low and high contrast latencies OU are significantly delayed.

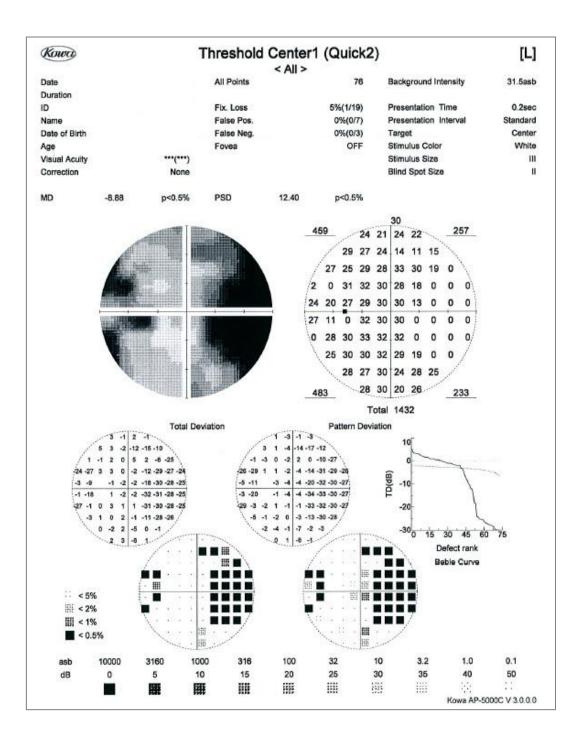
Conclusion

This functional disorder is not explained by the OCT structural analysis; however, the VEP delays correlate with the visual field which shows a complete abnormal function of the visual pathway. These findings support the diagnosis of stroke and the normal finding of the OCT is expected unless trans-synaptic degeneration is present. VEP must be repeated annually unless a new ischemic event occurs.

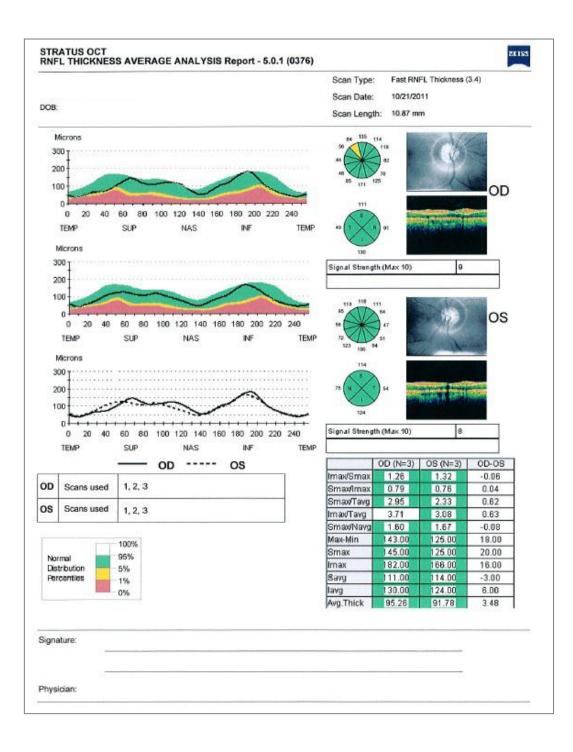
Visual Field - OD



Visual Field - OS



OCT



VEP-LX

