Comment on: Intracranial hypertension and visual loss following COVID-19: A case report

Dear Editor,

With great interest, I went through the article Intracranial hypertension and visual loss following COVID-19: a case report by Ilhan B et al. [1] The authors have very nicely described a possible association of intracranial hypertension in a COVID-19 positive, obese patient. Benign intracranial hypertension can be associated with risk factors like obesity, intracranial venous thrombosis, medications, endocrine and metabolic factors. There are reports associating intracranial hypertension and Vitamin-B12 deficiency in literature. [2-4] The exact cause of association is yet to be ascertained, but the plausible mechanism is venous stasis due to hypercoagulability and hyperviscosity secondary to hyperhomocysteinemia. [5]

In the present case, the patient had recently recovered from COVID-19 and was obese. Laboratory studies found Vitamin B-12 deficiency. Association between COVID-19 and intracranial hypertension seems more coincidental in this case rather than being causal. There was prompt resolution of disc edema following changes in diet and introduction of Vitamin B-12 therapy. The authors have mentioned obesity to be a primary factor responsible for clinical condition. However, clinical reduction in disc edema was not associated with significant reduction in weight. Correction of vitamin B-12 levels might have resulted in resolution of disc edema. A serum homocysteine level at baseline could have helped.

It is very difficult to pin point on a single etiological factor when multiple risk factors are present. Being aware of possible associations can help in managing such conditions successfully.

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Conflicts of interest
There are no conflicts of interest.

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