Acute Fourth Nerve Paresis

Acute fourth nerve paresis is probably the most frequent cause of acquired vertical diplopia. In this issue, Khaier et al. found that many cases of acute fourth nerve paresis have a benign etiology and clinical course. Although the most common cause of vertical diplopia related to a fourth nerve palsy has been thought to be a decompensation of a congenital condition, the authors in the current study found microvascular disease to be the most common cause. However, acute fourth nerve paresis can be an early clinical sign of a serious intracranial abnormality. The authors suggest that because they found a benign etiology and clinical course for most acute fourth nerve paresis, there is no need for hasty neuroimaging. This recommendation is predicated on a normal neurological assessment and the clinical presentation is compatible with a benign etiology. Because a normal neurological assessment in a patient with an acute fourth nerve palsy does not completely rule out a serious intracranial abnormality, neurological imaging prior to a 3-month observation period, recommended by the authors, may be a better course of action.

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