We would like to thank Drs Zvorničanin for re-emphasising the importance of a good history and clinical examination of patients with suspected optic neuritis. If the referring physicians would have followed the advice of Drs Zvorničanin, none of the patients reported by us would have gone through the anxieties of a potential diagnosis of multiple sclerosis until they could be reassured about the benign nature of their symptoms [1].

There are additional signs and symptoms to those mentioned in the letter by Drs Zvorničanin which have been summarised in a comprehensive consensus protocol for the investigation of patients with optic neuritis [2]. It is important to remember that clinical findings are influenced by the timing of assessment during the disease course. For example the Uhthoff and Pulfrich phenomena only appear during the recovery phase from optic neuritis [2]. Equally important is to recognise early signs suggestive of optic neuritis due to other pathologies than multiple sclerosis because of important management implications. The key 'red flags' to note relate to (i) an atypical clinical presentation [2]

- 1. Pain or loss of vision presenting for more than 2 weeks:
- 2. Absence of pain
- 3. Retinal abnormalities
- 4. Unexplained optic atrophy
- 5. Severe loss of vision in patients with a non-white ethnic background
- 6. Severe loss of vision without early recovery

## or (ii) an atypical disease course:

- 1. Progressive loss of vision
- 2. Absence of recovery for more than 3 months
- 3. Worsening of visual function after reducing or stopping steroids or immunosuppression

Likewises any past medical history of cancer requires special attention. Finally, special care needs to be taken not to miss bilateral optic neuritis because as Drs Zvorničanin letter correctly implies these patients may not have a relative afferent pupillar deficit [2].

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## References

- [1] Burggraaff, M. C.; de Vries-Knoppert, W. A. E. J. and Petzold, A. (2017). *Prefoveal floaters as a differential diagnosis to optic neuritis: "mouches dormantes".*, Acta neurologica Belgica .
- [2] Petzold, A.; Wattjes, M. P.; Costello, F.; Flores-Rivera, J.; Fraser, C. L.; Fujihara, K.; Leavitt, J.; Marginier, R.; Paul, F.; Schippling, S.; Sindic, C.; Villoslada, P.; Weinshenker, B. and Plant, G. T. (2014). The investigation of acute optic neuritis: a review and proposed protocol., Nat Rev Neurol 10: 447-458.