Pseudo-Argyll Robertson pupil of patients with spinocerebellar ataxia type 1 (SCA1)

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Letters to the editor

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The first 150 words of the full text of this article appear below.

A pseudo-Argyll Robertson pupil is a neurological sign indicating a normal near reflex but the absence of a light reflex (light-near dissociation), a lack of miosis, and pupil irregularity. It has been reported in patients with diabetes mellitus, multiple sclerosis, Wernicke's encephalopathy, sarcoidosis, tumours, and haemorrhage.[1] Although the appearance of pseudo-Argyll Robertson pupil is very similar to Holmes-Adie pupil, the first is distinguishable from the second by the location of lesions and pharmacological response. The responsible lesion in pseudo-Argyll Robertson pupil is in the central region, whereas that of Holmes-Adie pupil is peripheral. Dilute pilocarpine constricts the pupils of patients with Holmes-Adie pupil, but it is not effective in patients with pseudo-Argyll Robertson pupil. We present a patient with spinocerebellar ataxia type 1 (SCA1) and her asymptomatic younger brother who both exhibited pseudo-Argyll Robertson pupil.

Patient 1 was a 21 year old woman who complained of gait instability in 1996. Thereafter, she noticed difficulties . . . *[Full text of this article]*