

# **Congenital Trochlear nerve (IV) palsy and a few dilemmas in the treatment**

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**Introduction:** Its anatomical features make the Trochlear nerve vulnerable. Trochlear nerve palsy causes paralysis of m.Obliquus superior. It is manifested by vertical, torsional deviation and diplopia. The presence of Torticollis should be examined and the Bielschowsky maneuver should be performed. Indications for surgical treatment are: diplopia, abnormal head position, hyperopia in the primary position or lateral version and degradation of binocular vision.

**Material and Methods:** This paper is a presentation of 3 clinical cases aged 4 years (M), 5 years (F), and 18 years (M). Patients present with various symptoms and signs of congenital paralysis of the Trochlearis nerve. One of the cases (M – 18 years old) was referred for consultation to the Ophthalmologist by the Orthopedist. In all three cases, clinical examinations were performed, with special emphasis on the examination of the presence of Torticollis, the Bielschowsky maneuver, and the measurement of the deviation angle. Surgical intervention was recommended (the parents of two of the patients refused the intervention).

**Conclusions:** Congenital paralysis of the Trochlear nerve is detected late by the parents, but also by the family doctor and pediatrician. In our practice, we have found many cases with consequences. Early surgery is quite successful (strabismus and functional consequences improve). It is necessary for ophthalmologists of other subspecialties, family doctors and pediatricians to be informed about the latest developments in strabology, to enable the early diagnosis of oculo-motor and functional disorders. The earlier strabismus is diagnosed, the higher the success of the treatment.

**Key-words:** Trochlear nerve palsy, Torticollis, Bielschowsky maneuver, Surgical intervention.