A 54-year-old man presented for neuro-ophthalmology consultation with visual loss without ocular cause and complaints of driving difficulty and an inability to perform his usual occupational tasks as an electrician. Examination revealed a best-corrected visual acuity of 20/25 both eyes and an otherwise normal ocular examination. Neurological examination revealed ideomotor apraxia, oculomotor apraxia, and optic ataxia. Formal neurocognitive testing revealed deficiencies in visuospatial functioning, processing speed, and executive functioning with relatively preserved memory functions. MRI brain with and without contrast revealed bilateral posterior cortical atrophy and corresponding regions of PET-CT (FDG) hypometabolism in the bilateral occipitoparietal (upper panel) and bilateral occipitotemporal (lower panel) regions. The patient met clinical and imaging criteria for Posterior Cortical Atrophy [1], a degenerative disease most commonly associated with Alzheimer’s disease pathology, with or without cortical Lewy bodies.

References