We here report a 79-year-old female patient presenting with intermittent redness and pain in the left eye. The ophthalmologic examination revealed a proptosis of 2mm of the left eye, but the level of proptosis did not change through Valsalva maneuver. There was no palpable bruit or pulsation. Dilated episcleral veins were detectable under slit lamp examination and glaucoma with an intraocular pressure of 30mmHg was present. Left perimetry revealed glaucomatous defects. Orbital magnetic resonance imaging revealed a retrobulbar tortuous tubular lesion resembling an orbital varix. The color doppler imaging ruled out fistula. The digital subtraction angiography confirmed the diagnosis of thrombosed orbital varix. The patient was diagnosed with glaucoma secondary to a primary orbital varix.

Vascular lesions of orbit are uncommon and might have varying presentations. Orbital varices account for less than 1.3% of all orbital tumors. Orbital varices are divided into two groups: primary and secondary. Primary orbital varices are mostly congenital, idiopathic and isolated lesions. Secondary orbital varices on the other hand usually arise due to a condition increasing orbital blood flow such as intracranial arteriovenous malformations, caroticocavernous fistula or dural arteriovenous fistula. Usually advanced radiological imaging techniques are needed for the differential diagnosis.