Purpose: To report a case of cerebral venous thrombosis.

Case description: A 32 year-old man who was referred to our ophthalmology department with diplopia, headache, nausea and vomiting. Ophthalmologic examination revealed left eye esotropia, abduction limitation and bilateral papilloedema. Cranial computed tomography and magnetic resonance venography demonstrated that the right transverse sinus, sigmoid sinus and proximal internal jugular vein were occluded completely and that there was a small right temporal lobe cortical venous infarction. He was treated with oral acetazolamide and anticoagulation. After two months of medical treatment, bilateral papilloedema improved and six nerve palsy recovered.

Conclusions: Cerebral venous thrombosis should be kept in mind as a rare remediable etiology of sixth nerve palsy.