Supplementary Table I. Diagnostic criteria for pseudotumor cerebri syndrome.*

1. Required for diagnosis of pseudotumor cerebri syndrome

a. Papilledema

b. Normal neurologic examination

(except for cranial nerve abnormalities)

c. Neuroimaging:

Normal brain parenchyma without evidence of hydrocephalus, mass, or structural lesion and no abnormal meningeal enhancement on magnetic resonance imaging (MRI), with and without gadolinium, for typical patients (female and obese), and MRI, with and without gadolinium, and magnetic resonance venography for others; if MRI is unavailable or contraindicated, contrast-enhanced computed tomography may be used

d. Normal cerebrospinal fluid (CSF) composition

e. Elevated lumbar puncture opening pressure in a properly performed lumbar puncture:

≥25 cm H_2O CSF in adults and ≥28 cm H_2O CSF in children

(≥ 25 cm H_2O CSF if the child is not sedated and not obese)

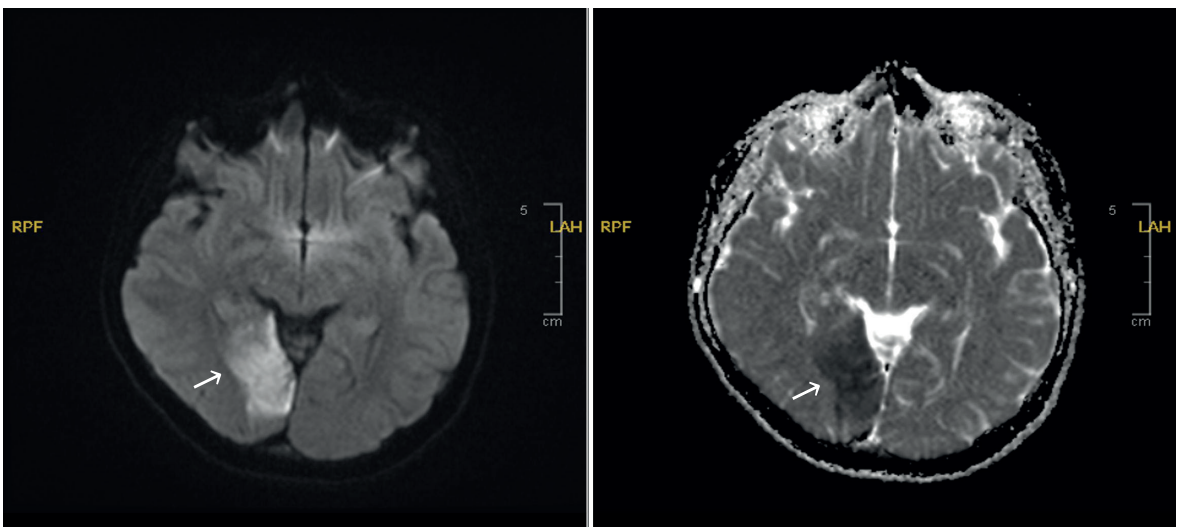
2. Diagnosis of pseudotumor cerebri syndrome without papilledema

In the absence of papilledema, a diagnosis of pseudotumor cerebri syndrome can be made if b–e from above are satisfied, and in addition the patient has a unilateral or bilateral abducens nerve palsy

In the absence of papilledema or sixth nerve palsy, a diagnosis of pseudotumor cerebri syndrome can be suggested but not made if b–e from above are satisfied, and in addition at least 3 of the following neuroimaging criteria are satisfied:

- Empty sella
- Flattening of the posterior aspect of the globe
- Distention of the perioptic subarachnoid space with or without a tortuous optic nerve
- Transverse venous sinus stenosis

Definitive: The patient fulfills criteria a–e.
Probable: Criteria a–d are met, but the measured CSF pressure is lower than specified for a definite diagnosis.
*Adapted from reference 4



Supplementary Fig. 1. Magnetic resonance imaging findings of acute infarction in the territory of right PCA. **A,** Axial diffusion image shows hyperintensity (arrow). **B,** Axial ADC image shows hypointensity (arrow).
ADC: apparent diffusion coefficient; PCA: posterior cerebral artery.