

**Supplementary Table 2. Visual and Radiographic Outcomes**

Following Radiation Treatment. This table provides a detailed summary of visual status (including visual acuity, visual field, color vision, and other exam findings) and radiographic progression of patients (summarizing all MRI notes), compiled from chart review.

CASE	VISUAL F/U (YRS)	VISION STATUS			MRI F/U (YRS)	MRI STATUS
		VISUAL ACUITY (VA)	VISUAL FIELD (VF)	OTHER ( COLOR VISION (CV), FUNDUSCOPIC, ETC.)		
1	6	Unchanged 20/20	Stable small peripheral defect	Full CV stable; pupillary afferent defect stable; profound optic nerve atrophy noted.	6	Stable; no progression
2a	17	Unchanged 20/20	Improved ( from right-sided small temporal defect)	Full CV stable	12	Stable ; no progression
2b	17	Unchanged 20/20	Full; No change	Full CV stable; swollen disk on left stable; mild afferent pupillary defect resolved	12	Stable; no progression
3	5	20/20 to 20/25	Lower right visual defect stable	Impaired CV (half of plates only) only but unchanged from pre-treatment. Right temporal disc pallor on fundus exam mildly improved.	5	Stable no progression
4	1	Unchanged 20/20	Full; No change	Full CV stable; right optic disc swelling pre-radiation is unremarkable	2	Stable no progression
5	11	20/20 to 20/30	Full; No change	Full CV stable; 1+ proptosis stable	7	Stable; no progression
6a	4	Unchanged 20/20	Full; No change	Full CV stable; Unremarkable exam	4	Recurred 4 years after treatment "new thickening and enhancement of prechiasmatic optic nerve sheath not seen in prior study"
6b	3	Unchanged 20/20	Full; No change	Full CV stable; Unremarkable exam	6	Stable; no progression
7	15	20/30 at treatment; progressed to 20/60 in 7 years and 20/80 by year 8; rapid progression to blindness/NLP at year 15	Right eye had bilateral VF defect at initial radiotherapy→ unchanged at years 7→ homogenously obliterated VF at year 15	Radiation retinopathy at yr 7, no CV, but stable; additional tumor along optic nerve at year 15 of f/u. contralateral eye no defects.	16	Stable in 2005→ imaging in 2014 showed secondary "Sinonasal mass extending to skull base along the optic nerve" biopsy " teratocarcinosarcoma"
8	2	Unchanged 20/30	Improvement from original partial VF loss in superior temporal right eye.	CV Improved from 4/13 Ishihara color plates to "no defects"	5	Unchanged from pretreatment; stable in 2017
9	5	Unchanged 20/25	Full; No change.	CV full and unchanged.	9	Mild decrease in size 1 year after treatment. Stable for additional 8 years.
10	4	Mild improvement from 20/40 to 20/20 in 2008 and 2012, resp.	Stable central vision loss	Full CV from initial defect 12/14 Ishihara plates ; 4mm proptosis unchanged.	4	No significant change in size in 2012 compared with 2008.
11	7	20/50 to 20/60 from 2006 to 2013.	Full; No change	CV defect maintained at 1/13 color plates.; 1+ to 3+ progressive pallor in fundus; proptosis present in 2005→ not appreciated in 2013	5	"Completely stable in size ad configuration" from 2011 compared with 2005 MRI
12	9	Mild improvement 20/50 to 20/25 improvement from 2001 to 2010	Full; no change	CV full and unchanged.; - retinopathy - edema -pallor by serial exams; Diplopia improved; initial proptosis has disappeared	9	Mass unchanged in size and configuration
13	20	20/50 at treatment to NLP/blind within 3 years	Small central field (profound temporal and nasal deficiencies)→ complete anopsia	No color vision. Afferent pupillary defect. Cataracts bilaterally	18	Stable meningioma with no progression since treatment.

CASE	VISUAL F/U (YRS)	VISION STATUS			MRI F/U (YRS)	MRI STATUS
		VISUAL ACUITY (VA)	VISUAL FIELD (VF)	OTHER ( COLOR VISION (CV), FUNDUSCOPIC, ETC.)		
14	9	Improvement 20/60 to 20/25	Full; no change	CV full and unchanged. WNL. Single cataract present at 9 years (pt aged 51).	5	Stable; no progression
15	7	Improvement 20/60 to 20/40	Full; no change	Affected eye doing well; contralateral eye showing unrelated decrease in vision 20/20→ 20/50	9	Stable; no progression
16	7	20/60 progressed to 20/100	Large visual defect improved mildly	Unchanged CV full. Optic disc pallor	7	Stable; no progression
17	4	20/60 to 20/CF	Generalized visual defect stable	No CV= unchanged; disc pallor unchanged; afferent pupillary defect unchanged	4	Stable; no progression
18	2	Improvement 20/100 to 20/70	Unchanged from original dense central scotoma	No CV= unchanged; 2+ pupillary afferent defect; diffuse pallor unchanged	7	Stable; no progression
19	4	Improvement 20/400 to 20/40	Bottom half of field obliterated→ full fields at 4 years	CV fully restored from none; pupillary afferent defect restored to normal reflex	2	Stable; no progression
20	5	Improvement 20/200 to 20/25	Stable arcuate bottom temporal VF defect	CV full and fundus exam unchanged and unremarkable	5	Stable; Visible compression of the optic nerve unchanged
21	5	Improvement 20/200 to 20/50	Field defect improved from nearly obliterated to recovered 75% full field	CV fully recovered from 1/8 Ishihara plates; rest of exam unremarkable	5	Stable; no progression
22	8	Progression from 20/200 to NLP/blind	Unable to assess; no change	CV unable to assess; no change; fundus borderline pale, no change. Mild new R-sided proptosis at 8 year f/u cataracts present bilaterally	8	Progression of planum sphenoidale component of meningioma in 2009; lost to follow-up
23	8	Maintained at 20/20	Hemi- Field loss in left view of right eye completely recovered	CV full and unchanged. Rest of exam unremarkable.	8	Presumed stable; unchanged description of mass; no change in overall size
24	7	Unchanged from 20/300; counting fingers only	Dense central scotoma progressed to almost complete	No CV/unable to assess; unchanged	5	"no significant change"
25	3	Unchanged from 20/400; hand motion only	Inferior temporal quadrant and superior nasal quadrant defect and dense central scotoma; unchanged	No CV/unable to assess; unchanged	3	Stable; no progression
26	7	Unchanged from 20/400; hand motion only	Nasal quadrant defect with some arcuate involvement below meridian of left eye; unchanged	No CV/unchanged; Mild proptosis; optic nerve atrophy secondary to radiation; improvement in pupillary afferent defect (sluggish)	7	Stable no progression
27	16	20/400 to NLP/blind	Unable to assess; complete loss	Unable to assess CV; small hemorrhage in right eye; 3+ pupillary afferent defect; uncontrolled diabetes; bilateral cataracts	16	Stable; no progression