

## Appendix 1. Clinical Activity Assessment Sheet and Degree of Severity

### Clinical Activity Score (CAS) GO

First CAS examination, point 1 – 7	Score
1. Spontaneous retrobulbar pain	
2. Pain on attempted upward or downward gaze	
3. Swelling of eyelids	
4. Redness of eyelids	
5. Redness of conjunctiva	
6. Swelling of conjunctiva (chemosis)	
7. Swelling of caruncle or plica	
<b>Patients monitoring after 1–3 months, point 8 – 10</b>	
8. Increase in measured proptosis >2 mm	
9. Decrease in eye movement limit of >8° any direction	
10. Decrease in visual acuity equal to 1 Snellen chart line	
<b>Total score</b>	

Note :

\*active GO = CAS  $\geq$ 3/7 in first examination or >4/10 on monitoring

\*inactive GO = CAS <3/7 in first examination or  $\leq$ 4/10 on monitoring

### Assessment the degree of GO severity based on EuGOGO

Mild GO	Score
Mild GO manifestations have a minimum impact on the daily life. It usually appears in one or more of the following signs :	
1. Minor lid retraction (<2 mm)	
2. Mild soft-tissue involvement	
3. Exophthalmos <3 mm above normal for race and gender (women 18 mm, men 20 mm)	
4. No or intermittent diplopia	
5. Corneal exposure responsive to lubricants	
<b>Moderate-to-severe GO</b>	
Patients without sight-threatening GO with sufficient impact on the daily life, who need immunosuppression (if GO is active) or surgical intervention (if inactive). Two or more of the following sign usually appear :	
1. Lid retraction ( $\geq$ 2 mm)	
2. Moderate or severe soft-tissue involvement	
3. Exophthalmos $\geq$ 3 mm above normal for race and gender (women 18 mm, men 20 mm)	
4. Inconstant or constant diplopia	
<b>Very severe GO (sight threatening)</b>	
Patients with dysthyroid optic neuropathy (DON) or sight-threatening corneal breakdown. Rare cases: Eyeball subluxation, severe form of "frozen eye", choroidal folds, postural visual darkening.	

### Conclusion

Clinical activity : \_\_\_\_Active

\_\_\_\_Inactive

Degrees : \_\_\_\_Mild

\_\_\_\_Moderate-to-severe

\_\_\_\_Very severe