Abstract: The decision of whether Graves’ ophthalmopathy must be treated should be based on the assessment of the severity and activity of the disease. If the disease is severe and active, antiinflammatory therapy is recommended, and if the disease is severe but inactive orbital decompression is preferred. Definition of disease severity includes a degree of the eye involvement such as proptosis, diplopia and optic neuropathy. A variety of methods are found to be useful for the assessment of disease activity and for the prediction of medical treatment outcome: clinical activity score, extraocular muscle reflectivity on A-mode ultrasonography, orbital octreoscan, MRI, measurement of serum or urinary glycosaminoglycans and TSH receptor autoantibodies. However, clinical assessment remains the most important first step in the selection of patients with Graves’ ophthalmopathy for further ophthalmological and ultrasonographic or CT/MR evaluation. For this reason, clinical assessment should be done by an endocrinologist with some training in ophthalmology who is familiar with the examination techniques.

Key words: Graves’ ophthalmopathy, clinical assessment.