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Central serous chorioretinopathy: Is psychological stress important?

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Objectives: Presenting a brief review on the role of psychological stress in central serous chorioretinopathy (CSR) and an illustrative clinical vignette.

Background & Aims: CSR is a nonsurgical retinopathy with a usual self-limiting course, but also with persistent or recurrent forms with visual loss. The authors aim is to discover the role of psychological stress in CSR, since stress reduction is usually recommended and we recently received a patient in our Psychiatry department for that motive.

Material & Methods: Research on PubMed with the keywords "central serous chorioretinopathy + psychological stress" and "central serous chorioretinopathy + anxiety" clinical vignette according to clinical data.

Results: The pathogenesis of CSR is still unclear, but corticosteroids seem to play a role. Abnormalities of the hypothalamo-pituitary-adrenal axis are supported by elevated levels of 24h urine cortisol and tetrahydroaldosterone and the promising results in trials with mineralocorticoid antagonists. The role of psychological stress reduction in the evolution of CSR remains unknown. The authors are following-up a patient with two episodes of CSR that he relates to stressful periods of his life. He was medicated (escitalopram and mexazolam) and started psychotherapy, and is now in remission of CSR symptoms. As CSR is a self-limiting condition, it remains unclear if our treatment influenced its course.

Conclusions: As cortisol seems to play a role in CSR and considering its link to stress, psychological stress may be an important factor. More studies are necessary to understand the role of psychological stress in CSR and the influence of stress reduction.