Central Serous Retinopathy Information

What is Central Serous Retinopathy?
The eye is like a tiny camera, with lenses in the front and film in the back. The film is called the retina. At the center of the retina is a small area called the macula, which provides most of the sharp central vision for reading and similar tasks. The retina has several layers. On the outer surface are the cells that actually detect the light. Just outside of the retina is a rich network of blood vessels that normally leak fluid. Between these two main layers is a single layer of cells called the Retinal Pigment Epithelium, or RPE. One of its many functions is to keep fluid from leaking out of the vascular area into the area under the retinal surface. Central Serous Retinopathy (or CSR) develops when a leak forms in the RPE. This results in a tiny blister of fluid within the macula or reading spot. Symptoms may include a change in glasses prescription, images looking smaller, discolored, or dim, or distortion of images.

How is CSR diagnosed?
Central Serous Retinopathy usually causes typical symptoms. It may be associated with either physical or emotional stress, and can occur at any age, although it is more commonly diagnosed in young adults (under 50 years old). Fluid can be detected in the macula with a dilated eye examination. In many cases, a special photographic test, called a Fluorescein Angiogram, may be ordered to distinguish Central Serous Retinopathy from other conditions. The photographic appearance of CSR is usually quite
distinctive, helping to confirm the diagnosis. The picture can also be used as a "roadmap" to guide laser treatment when this is performed. Also, an OCT, Optical Coherence Tomography, can be helpful in diagnosis.

**Can Central Serous Retinopathy Be Treated?**
The disease usually cures itself, and in most cases will disappear within a few months. Healing occurs as surrounding RPE cells slide over the leak to reseal it. The doctor may recommend that the patient monitor vision at home using a piece of graph paper called an Amsler Grid. Sometimes thinning of the RPE in the leaky area results in mild to moderate vision damage, but this is fairly unusual. Rarely, abnormal new vessels may grow causing scar tissue and a threat of permanent vision loss. Laser or medications may be recommended in these cases. Treatment may also be recommended if the condition does not resolve after several months, or if symptoms prevent necessary activities. Treatment is usually delayed to try to let the condition resolve itself, and because laser can rarely worsen the leak. Leakage can recur, although this is fairly unusual. This can occur at the same site or at a different site; and it can occur with or without previous laser.

Your doctor will discuss with you the particular circumstances of your case, and the risks, benefits, and alternatives of treatment versus observation.