

Occupational Profile of Patients with Central Serous Chorioretinopathy

Dr Jijnasu Agnihotri, Dr Sushil Kumar Kar, Prof. Dr Zahirrudin Khan
Hi-Tech Medical College & Hospital, Bhubaneswar

Abstract :

Purpose: To evaluate the psychosomatic association with the occupational profile of patients and its impact with the incidence of CSCR in the study group.

Materials and methods: a prospective study was carried out in 84 patients in the opd of hi tech medical college bhubaneswar. Patients were initially evaluated with indirect ophthalmoscopy and confirmed with spectral domain OCT. patient's occupation was classified under national classification 2004.

Results: Socio-demographic data confirmed that CSCR is predominantly an ailment of middle aged socially integrated men. It was least seen with skill level 1. Patients with CSCR are more stressed because of inadequate coping strategies. Study also suggests the role of preceding critical life events or highly stressful conditions before onset of CSCR.

Introduction :

Central serous chorioretinopathy (CSCR) is characterized by spontaneous serous detachment of neurosensory retina in macular region , with or without retinal pigment epithelium detachment[1].

CSCR has been known by many names since the original description by von Graefe in 1866 and these names reflect the course of progress in our understanding of the pathogenesis of the disease[6]. von Graefe described the disease as a recurrent central retinitis, whereas Horniker in 1922 called it capillarospastic central retinitis to reflect his belief that vasospasm was the mechanism. Other names of the 20th century include central angiospastic retinopathy and central serous retinopathy. Maumenee described fluorescein

angiographic (FA) characteristics; fluorescein leakage at the level of the RPE revealed that the choroid and RPE were the primary tissues involved[7] . Gass further characterized the angiographic findings and coined the term central serous chorioretinopathy[8] . Since we now understand that hyperpermeability of the choroid causes leakage through the RPE, resulting in a neurosensory retinal detachment, CSCR is the preferred term.

Patients can present with a variety of visual symptoms including relative central scotoma, metamorphopsia, dyschromatopsia and micropsia.[5] with sudden painless loss of vision (6/9 - 6/24)

The disease classically affects young men between the ages of 20 and 50 and has been associated with hypertension, corticosteroid exposure, phosphodiesterase inhibitor use, obstructive sleep apnea and "type A" personality traits and female in 3rd trimester during pregnancy.

AIM

The incidence of CSCR have been reported associated with Psychosomatic condition but still under explore . So We conducted a study to determine the occupational profile of patients with CSCR and it's possible associations and impact .

Methods :

The study was done in ophthalmology OPD of HI-TECH medical college , Bhubaneswar . Patients in ophthalmology OPD who were diagnosed to have CSCR from 1st september 2014 to 31st july 2015 were reviewed. All patients diagnosed to have fresh CSCR confirmed on spectral domain optical coherence tomography (SDOCT).

INCLUSION CRITERIA

The inclusion criteria was kept as patient 's age should be between 20 yrs-50 yrs

EXCLUSION CRITERIA-

The exclusion criteria was Pregnant females , Pt using oral contraceptives , Pt not falling under this age group and Pt whose occupation was not documented.

The occupations were classified according to national classification of occupation 2004.

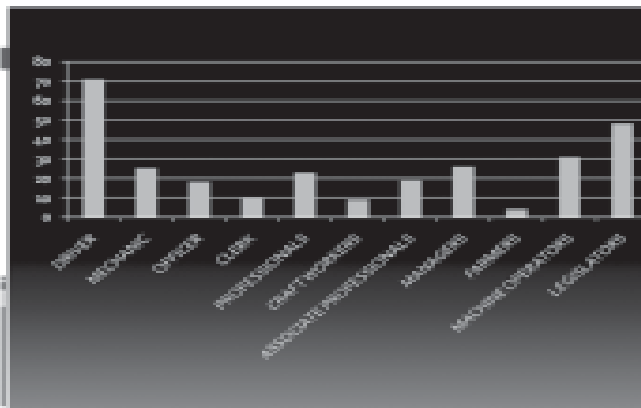
The occurrence of each occupation and skill level was calculated

The national classification of occupations 2004[5]

Division	Title	Skill Level
1.	Legislators, Senior Officials and Managers	Skill not defined
2.	Professionals	IV
3.	Associate professionals	II
4.	Clerks	II
5.	Service Workers and Shop & Market Sales Workers	II
6.	Skilled Agricultural and Fishery Workers	II
7.	Craft and Related Trade Workers	II
8.	Plant and machine operators and assemblers	II
9.	Elementary occupations	I

RESULTS

Total 84 patients were documented . Mean age we found was = 34.2 ± 6.2 years. Male patients counts for 77% of total patients



DISCUSSION

Socio-demographic data confirmed that CSCR is predominantly an ailment of middle aged socially integrated men. It was least seen with skill level I

Conrad et al have suggested that patients with CSCR are more stressed because of inadequate coping strategies.[9]

Some studies have also suggested the role of preceding critical life events or highly stressful conditions before onset of CSCR. Yanuzzi has reported the association of type A personality with CSCR[4].

Type A personality is characterised by a competitive drive, a sense of urgency,an aggressive nature and a hostile temperament. Though our study was retrospective and did not explore in depth these pshychological factors,we speculate that these factors may be associated with the occupational profile of CSCR patients

CONCLUSION

We conclude that certain occupations may be more susceptible to develop CSCR.

Psychological influences like stress, type A personality etc Can be thought to be directly related to occupational profile and thereby CSCR.Our study was limited because it was hospital based and retrospective. With hope in future, prospective questionnaire based studies and population based studies may provide more insight into psychosomatic aspects of CSCR and thus aid in the prophylaxis and management

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