Vision in Focus : Exploring Possible Sertraline – Related Maculopathy Through A Case Series Analysis

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Introduction :

To report a case series of maculopathy in 10 patients after initiating sertraline therapy (selective serotonin reuptake inhibitor) which ranged from retinal pigment epithelial (RPE) changes and dry macular degeneration to neovascular AMD, cystoid changes and central serous chorioretinopathy (CSCR) like picture, some of which were bilateral and some of which were accelerated macular changes to pre-existing changes .

Method:

Patients selected ranging from age group 40 to 64 years) , 7 male Caucasians and 2 female Caucasians , had a history of seeing a central scotoma with substantial evidence of onset of visual symptoms following commencement with Sertraline. Complete ocular examination was carried out with colour vision testing and investigation with multimodal imaging which included colour fundus photography, fundus fluorescein angiography (FFA), autofluorescence (AF) , optical coherence tomography (OCT) and optical coherence tomography angiography (OCTA).

Results :

Clinical examination , fundus photos, AF and OCT showed changes ranging from extensive macular scarring with retinal pigment epitheliopathy , disruption of the outer retinal layers with intra-retinal fluid in cases presenting as AMD, to the extent of development of a choroidal neovascular membrane needing treatment with intravitreal Anti-VEGF. Some cases developed SRF, with RPE changes similar to CSCR. Stopping the Sertraline medication showed in some cases reversal of symptoms reversal of some changes like intra-retinal fluid and sub-retinal fluid but the RPE changes remained.

Conclusion:

Sertraline is most commonly prescribed for depressive (83%) and anxiety disorders (11%), the rest including obsessive-compulsive disorders, post-traumatic stress disorders, panic and eating disorders. Patients should be warned before commencing on Sertraline and should be monitored regularly. This possible association needs more extensive study.

Please watch the accompanying video