

VISION ACADEMY VIEWPOINT

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Pachychoroid: Current Concepts on Clinical Features and Pathogenesis

Background

The term "pachychoroid" refers to a newly described phenotype in which functional and structural choroidal changes are thought to play a key pathogenic role in a spectrum of related retinal disorders.1 Several disorders, such as central serous chorioretinopathy, polypoidal choroidal vasculopathy, pachychoroid neovasculopathy, and pachychoroid pigment epitheliopathy, overlap in the pachychoroid spectrum. However, the lack of consensus on various phenotypes can lead to these disorders being categorized together as neovascular age-related macular degeneration. In some cases, polypoidal choroidal vasculopathy is included in clinical trials for neovascular age-related macular degeneration, despite having different clinical characteristics, natural history, and response to treatment.² In order to avoid such miscategorization, an understanding of how the choroid is involved in this spectrum and a better knowledge of the most relevant clinical signs of the pachychoroid phenotype are important to differentiate these disorders from other chorioretinal conditions.

A review of the literature and available evidence was conducted to3:

- Provide consensus on the definition of pachychoroid and the commonalities that may be present in the pathologies included in this spectrum
- · Provide details on the examination, monitoring, and management of these disorders

Endorsed by the Vision Academy in September 2022



Viewpoint

Pachychoroid: quantitative and qualitative features

Comparisons of anatomical differences between polypoidal choroidal vasculopathy, central serous chorioretinopathy, and age-related macular degeneration in epidemiological studies have suggested differences in the pathophysiology of the phenotypes, where increased choroidal thickness appears to be a prevalent factor.^{4,5} However, several choroidal changes other than increased choroidal thickness are believed to play an important pathogenic role in the development of the clinical manifestations of pachychoroid.

Quantitative features	Qualitative features
Congestion as manifested by this learning on antical	Pachyvessels or dilated
coherence tomography	layer
Choroidal hyperpermeability	Retinal pigment epithelial layer alterations and thinning of
Blood-flow signal attenuation in the choriocapillaris and inner	outer nuclear layer
choroid with optical coherence tomography angiography	Choroidal neovascularizationPachydrusen

The presence of hypertrophic or congested vessels in the choroid (pachyvessels), not thickened choroid per se, under an area of reduced or absent choriocapillaris in the posterior pole, appears to be the most salient feature of pachychoroid. Other quantitative and qualitative features are indocyanine green angiography hyperfluorescence, blood-flow signal attenuation in the choriocapillaris and inner choroid by optical coherence tomography angiography, retinal pigment epithelial layer alterations and thinning of the outer nuclear layer, and the presence of pachydrusen.3

Vision Academy Viewpoints are intended to raise awareness of a clinical challenge within ophthalmology and provide an expert opinion to engage in further discussion.

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Intended for healthcare professionals only. Always refer to local treatment guidelines and relevant prescribing information. August 2024 | MA-PFM-OPHT-ALL-0980-1

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Clinical spectrum of disorders

Pachychoroid constitutes a common pathogenic process, and overlapping features⁶ and progression from one disorder to another are frequently observed in the clinical spectrum. Several disorders are currently included in the spectrum and, according to their main form of presentation, can be divided into three subtypes.

Disorders with atrophic changes	Disorders with exudative changes	Disorders with neovascularization
 Pachychoroid pigment epitheliopathy 	 Focal choroidal excavation Central serous chorioretinopathy Peripapillary pachychoroid syndrome 	 Pachychoroid neovasculopathy Polypoidal choroidal vasculopathy

Differential diagnosis

Other disorders involving uveitis and infiltrative diseases that also manifest as thickening of the choroid need to be included in the differential diagnosis. However, the presence of other pachychoroid features in the absence of systemic conditions and signs of intraocular or scleral inflammation would support the diagnosis of pachychoroid disease.

Clinicians should be aware of the different disorders included in the spectrum and of their main forms of presentation, which can be divided into those with exudation, those with neovascularization, and those with retinal pigment epithelial and chorioretinal atrophic changes.³

Further considerations

Consensus on pachychoroid terms is needed. Choroidal features would be useful in the management of patients, and in terms of prognosis, characteristic features of pachychoroid may serve as a predictive factor, but these are still to be confirmed in a large study.³



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