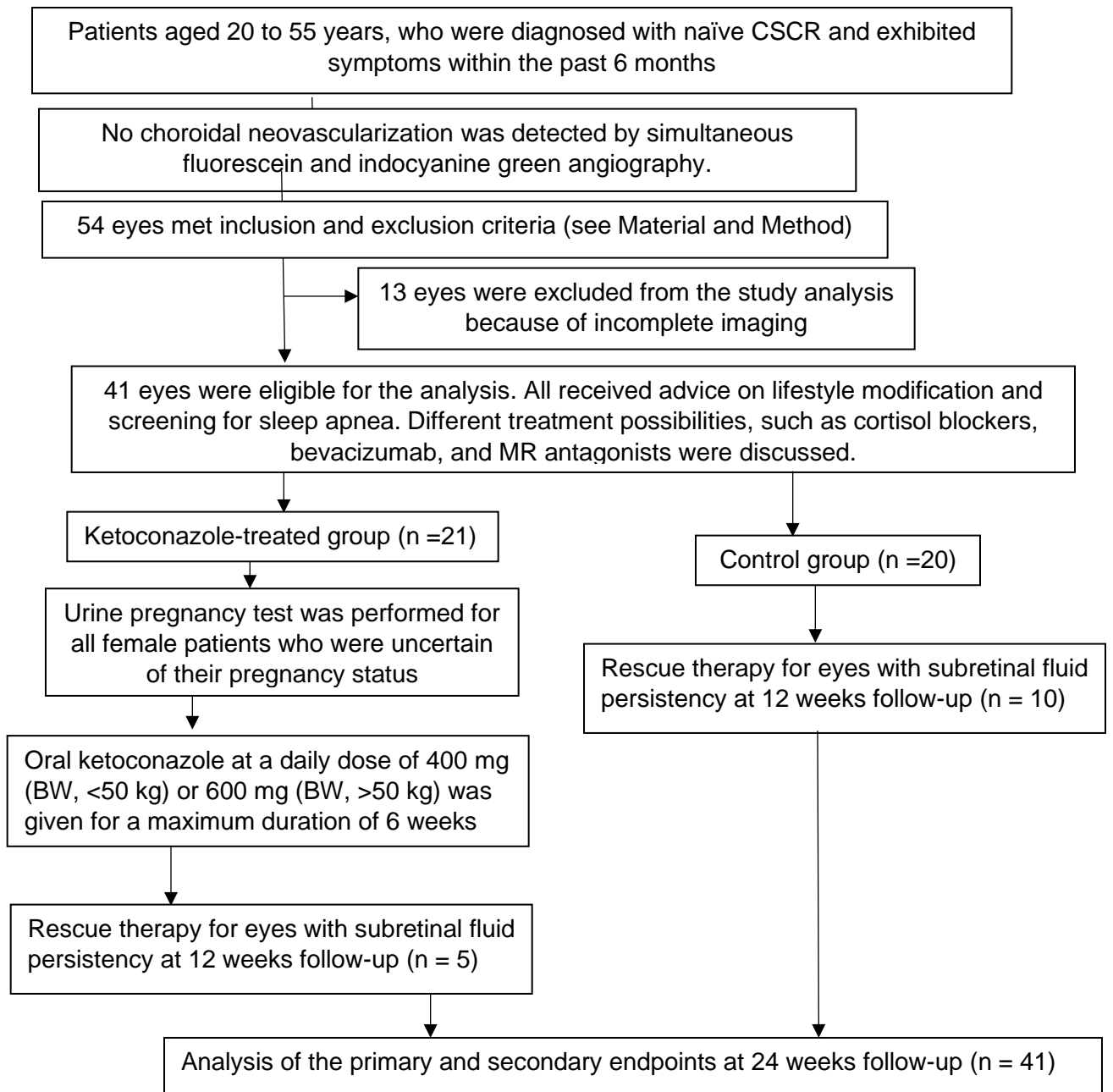


Supplementary materials

Figure S1: Flow Diagram Showing the Study Profile Based on the Study Protocol



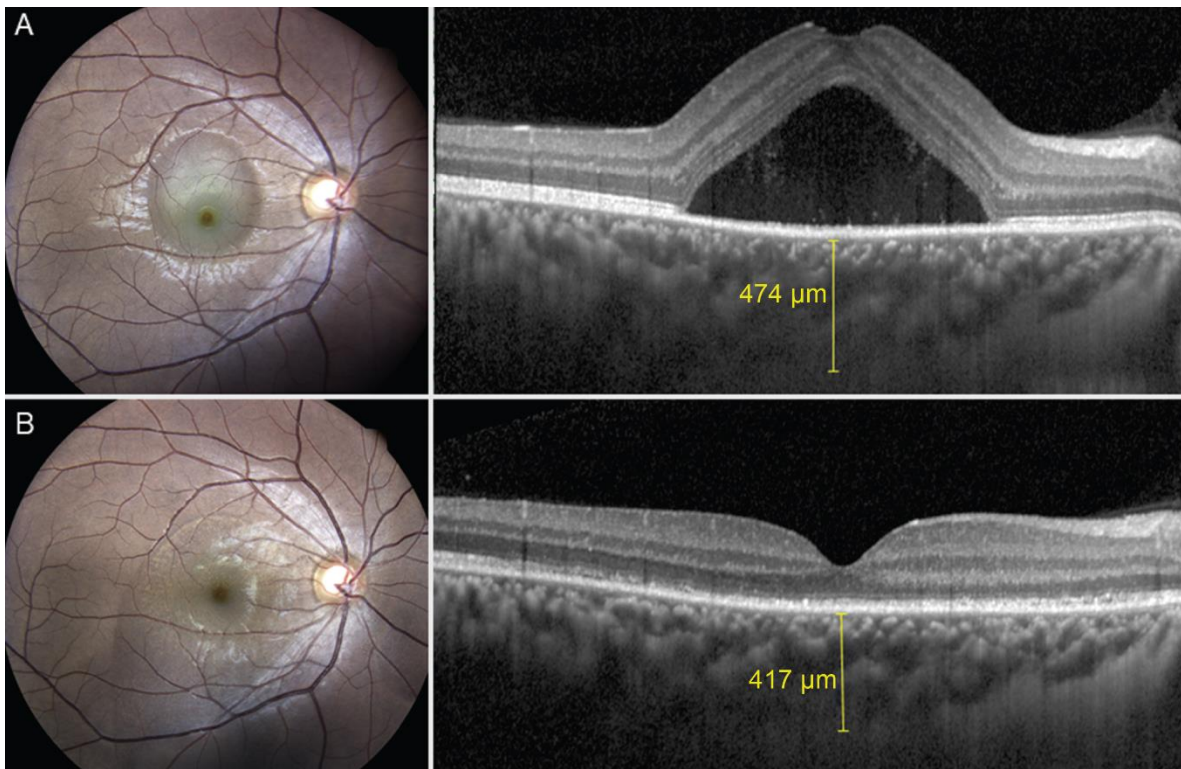


Figure S2: A typical central serous chorioretinopathy (CSCR) patient that is responsive to ketoconazole. **(A)** A 37-year-old male graphic designer with a history of chronic sleep deprivation was diagnosed with acute CSCR in the right eye. The presenting 24-hour urinary free cortisol was elevated at 254 $\mu\text{g}/\text{day}$ (range: 20–150 $\mu\text{g}/\text{day}$). Both serum aldosterone and total testosterone were normal at 10 ng/dL and 0.6 mg/dL (reference of <15 ng/dL and <0.8 mg/dL, respectively). **(B)** One week after a 6-week course of a daily dose of 400 mg ketoconazole, CSCR resolved with remained discontinuity of photoreceptors. Subfoveal choroidal thickness decreased from 474 μm at baseline to 417 μm at 7-week post-treatment.