

Cavum Septum Pellucidum and Its Relations with Psychiatric Disorders

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Dear Editor-in-Chief,

I have read with interest the article by Cengiz Al et al¹ recently published in your journal. Cengiz Al et al¹ reported that those with cavum septum pellucidum (CSP) showed lower scores on neuropsychological tests than the control group. Nonetheless, weakening of cognitive functions has been reported in schizophrenia patients and those with developmental delays with CSP; this finding was not observed in healthy adults with CSP.^{2,3} Additionally, this finding has not been previously shown in one study conducted in children with CSP, but the authors reported that these children later have psychiatric or cognitive symptoms in adulthood.⁴ Nevertheless, although we detected CSP more frequently in patients with schizophrenia and obsessive-compulsive disorder (OCD) in our previous articles, we did not find this difference statistically significant. However, we detected cavum veli interpositi (CVI), another septum pellucidum anomaly, more frequently in patients with schizophrenia and OCD patients.^{2,5}

Cavum septum pellucidum is a brain anomaly where there is a gap between the leaflets of the septum pellucidum. Although this gap usually closes between 3 and 6 months after birth, it continues into adulthood in approximately 1% of cases.¹ Some studies have reported that CSP is more common in patients with schizophrenia.² A study demonstrated that CSP is more common in OCD patients.⁵ When we look at the literature in 2024, we see that case reports still discuss the relationship between CSP and psychiatric disorders. It has been reported that there are structural changes in the anterior cingulate cortex and hippocampus, which are limbic system structures, in schizophrenia and OCD.^{2,5} Since CSP is a part of the limbic system and changes in brain volumes have been reported in those with CSP,⁴ I think that Cengiz Al et al's study¹ will increase interest in future imaging studies related to neuropsychiatric diseases on CSP and other septum pellucidum anomalies. We recommend that they compare those with and without CVI using neuropsychological tests in their future studies.

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