Purpose: To evaluate the effect of diabetic polyneuropathy on choroidal thickness in type 2 diabetes patients. Methods: Forty-one diabetic polyneuropathy (DPN) patients with no or mild retinopathy, 50 non-DPN diabetic patients with no or mild retinopathy and 42 healthy controls without any retinal complaint were included to the study. All participants underwent detailed ophthalmic examinations. Randomly selected eye of each participant were included. Choroidal thickness (CT) measurements were performed by the same independent technician between 9 and 11 a.m. to avoid diurnal variations. Perpendicular choroidal thickness from the outer edge of the hyper-reflective retinal pigment epithelium to the inner sclera at seven locations: the fovea, 500-1000-1500 µm temporal and nasal to the fovea was measured. Results: There was no statistically significant difference between the groups in terms of age and gender (p>0.05). The mean subfoveal CT values were significantly different in groups with a thickening trend from control to non-DPN and DPN (p<0.01). The mean values for subfoveal CT in control, non-DPN and DPN were 241.12±52.71, 279.82±51.42 and 304.71±54.92 µm respectively. The same thickening trend is also evident in all other six measurement points with statistical significance (p<0.01). Conclusion: Diabetic patients had increased CT compared to healthy controls. The presence of neuropathy in diabetes patients caused additional choroidal thickening compared to non-neuropathic patients.