

PATIENT INFORMATION

Squint (strabismus)

What is a squint?

Your orthoptist is available to answer any further questions about childhood squints and relate specifically to your case as required.

Squint is commonly used to refer to 'strabismus' which is the misalignment of the eyes. A squint affects the positioning of the eyes and often prevents both eyes from working together as a pair.

Types of squint

Not all squints are the same. They may be constant (there all the time), or they can be intermittent.

A squinting eye may turn inwards toward the nose or turn outwards. Some can also turn up or downwards. A squint may worsen if the child feels particularly tired or unwell.

Squints are usually present in just one eye at a time, although they may swap between the either eye.

What can cause a squint?

In some cases, there may be no obvious reason for a squint. However, a squint can be due to several factors such as:

- Congenital – a child may be born with a squint.
- Need for glasses – some children may be longsighted and need glasses. The child over focuses to see clearly without glasses and the effort required can result in one eye turning/squinting. Children can also be shortsighted which occasionally leads to a squint.
- Family history – a family history of squint or glasses has been found to increase the risk of childhood squints.
- Associated health conditions – some health conditions, such as prematurity, Down's syndrome, trauma, may make it more likely that you child will develop a squint.

Treatment

As not all squints are the same, treatment will vary from case to case. Your orthoptist will keep you informed. Most cases require a combination of the following:

Glasses

A glasses test will be performed by the hospital optometrist. Eye drops are used at this appointment to achieve the most accurate result. If a need for glasses is found, these are given for fulltime wear to improve the child's eyesight. Glasses may also correct or improve the squint.

Some squints are not affected by glasses, and not all children with a squint will require glasses.

Occlusion therapy (patching or eye drops)

Amblyopia (a lazy eye) may develop because of a squint. When the two eyes are not working together as a pair the brain often ignores what the squinting eye sees causing an unequal development and the vision may drop in the eye that turns. To treat the amblyopia, an eye patch or drops are used to prevent the use of the straight (good eye) to make the lazy eye work and improve the vision.

Patching will not improve the position of the squinting eye, just the vision.

Surgery

Some squints may be suitable for an operation to improve the position of the eyes. This is performed by the hospital ophthalmologist if required.

Surgery will not improve the vision, just the position of the squinting eye.

Sometimes no active treatment is required, although you will be reviewed regularly in the hospital by your orthoptist.

If you need to speak to the orthoptist, please contact:

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