Patching

Why does my child need patching treatment?

Your child has reduced vision in one eye, known medically as Amblyopia or 'a lazy eye'.

Amblyopia is treated by patching the eye with better vision in order to encourage the 'lazy eye' to work.

Causes

Common causes may include:

- A squint (turn in the eye)
- Refractive error (need for glasses)
- Ptosis (droopy eyelid)

When to wear the patch

It can be worn at any point through the day, at school or at home. You may achieve better compliance if your child's attention is distracted, for example colouring, reading or playing computer games.

It is important to note that if a child has a squint (turning eye), the purpose of the patch is to improve the vision in the eye and will not improve the alignment of the eye.

How to Patch

How to wear the Patch

Place the patch over the eye as instructed by your Orthoptist (see below). Make sure that the patch is directly on the skin and that your child is not able to peek around the side of the patch.

If your child also wears glasses, the glasses should be placed over the patch, and worn full time to help encourage the vision to improve.

If you child has an eye infection, the patch should not be worn.

How long should my child wear the patch for?

Your child must wear the patch
on
the.....eye, forhours
a
day,days a week.

The hours prescribed are subject to change depending on response to treatment.

Patching Risks

Depending on the severity of the reduced vision, you must be aware that you child will not be able to see as well as before, but this will get easier as the vision improves.

Teaching staff and guardians should be advised to watch your child carefully when they are playing outside etc. as they will also have a reduced field of vision and visual ability.

If your child is allergic to plasters, we have a range of hypoallergenic patches which will be given to you by your Orthoptist.

Non-adhesive patches are available; however there is a risk of peeking with this form of patching.

Other Information Appointments

We follow up patients who are undergoing patching therapy regularly (usually every 1-2 months). This is so we can help to maintain motivation, give you an idea of how the vision is developing, and make sure we are not patching for longer than necessary.

Further Important Information

If your child has a squint (turning eye), following patching treatment you may notice that the previously straight eye begins to turn at times. This is nothing to worry about—it is actually a good sign, as it means the vision is improving and your child is now happy to look with either eye.

If your child ever complains of double vision for periods of time when the patch has been removed, please stop patching and inform your Orthoptist.

Contact details

TorbayAndSouthDevonFT

② TorbaySDevonNHS

www.torbayandsouthdevon.nhs.uk/

For further assistance or to receive this information in a different format, please contact the department which created this leaflet.

Useful Links

Torbay and South Devon
NHS Foundation Trust

PATIENT INFORMATION

http://www.squintclinic.com/

http://patchpals.com/games





