

Understanding your child's squint

This leaflet provides information about squints, including the causes and the consequences. If you have any further questions or concerns, please do not hesitate to call 020 7188 4299 and leave a message on our answer phone.

What is a squint?

A squint is a condition where the eyes are misaligned. One eye can turn in (convergent), out (divergent), up, or down. Squints can occur in approximately three out of 100 children (3%).

What causes a squint?

There are several types of squint and the causes are not always known. Your child has a greater risk of developing a squint if:

1. there is a family history of squint or need to wear glasses
2. your child is long sighted (hypermetropia)
3. your child was born prematurely
4. your child has complex needs.

When does a squint develop?

A squint can be present at birth or develop soon after. It is common for babies to have an intermittent squint when their visual system is developing but this resolves when the baby is around 12 weeks old. Babies will not grow out of a true squint. A squint can also develop any time throughout life but is often seen at 1½-3 years of age when the child starts to focus. An Orthoptist (a health professional trained in visual development, eye position, and eye movement) must always see children with a suspected squint.

How does a squint affect my child?

A squint can affect your child in a variety of ways, and depends on the type of squint and many other factors:

Reduced vision (amblyopia)

The most important time in a child's visual development is up until the age of 7-8 years, and any interruption in this development, such as a squint or the need for glasses, can lead to poor vision long term if not diagnosed and treated at an early age. If the squint is only present in one eye, the vision in that eye will get worse if left untreated.

Loss of the ability to use both eyes together

A child with a squint may not be able to use both eyes together and may not perceive '3D' in the way that somebody with eyes that work together can.

Appearance

A squint can, but not always, affect a child's self-esteem and impact on their social interactions. This can occur at any age, although it is uncommon under the age of 6.

What will happen when my child comes to the Eye Clinic?

Your child will see a team of eye care professionals. The Orthoptist will measure your child's vision, carefully examine your child's eyes for a squint, check for any eye movement disorders, and may need to put eye drops in your child's eyes to dilate the pupils. The pupils are dilated to enable the Optometrist (optician) and Ophthalmologist (eye doctor and surgeon) to see if your child needs glasses and to conduct an examination to check the health of the back of the eyes and the structures inside the eyes.

What is the treatment for a squint?

As there are many different kinds of squints, and many factors involved, every child's treatment plan will differ. Your child will be seen regularly to monitor and modify this individual treatment plan. Treatment of your child's squint may involve some or all of the following:

Glasses

Some squints are completely corrected by wearing glasses, some are improved but a smaller squint persists, and sometimes glasses have little or no effect on a squint. If glasses are prescribed, it is important that your child wears them as directed so that the vision develops as well as possible. The Optometrist or Ophthalmologist will prescribe the glasses and will advise you on the types of frames and lenses most suitable for your child.

Patching

If the vision in one eye is not developing normally, the Orthoptist may give your child a patch to wear over the eye with the better vision, for a certain length of time each day. This will give the weaker eye some extra visual stimulation, encouraging it to work harder, which will help the vision to improve. If the child wears glasses, these must also be worn when the child wears their patch. The amount of time your child needs to wear the patch for is prescribed by the hospital eye care team, and treatment will be overseen by the Orthoptist. Patching is most successful when it is carried out while your child is performing visual tasks of interest, such as reading, colouring, drawing, using a tablet, etc., and must be carried out under the supervision of a responsible adult. Under no circumstances should a patch be worn unless directed by the Orthoptist or Ophthalmologist.

Exercises

In some specific circumstances, the Orthoptist may give your child eye exercises to do regularly at home to improve the way the eyes work together.

Surgery

The Ophthalmologist advises if and when squint surgery is appropriate for your child's squint. In young children, surgery will be recommended if there is a chance of restoring the ability for the eyes to work together as a pair. In older children, surgery may be indicated to improve double vision or make the eyes look straighter. Not all squints require surgery, but if it is needed, it can be carried out at any age, although the timing of surgery depends on the type of squint.

Do I pay for glasses?

All children are entitled to one free pair of glasses per year, although that will depend on your choice of frames. The Optometrist will advise you on this.

How long will my child have to attend the hospital?

It is vital that you bring your child to the follow-up appointments so that their visual development and the treatment plan can be monitored. Children are generally monitored until the age of 7 or 8 years, although some children need monitoring for much longer.

Useful sources of information

www.squintclinic.com – the videos are very helpful
www.orthoptics.org.uk

Contact us

If you have any questions or concerns please contact the **Orthoptic department on 020 7188 4299**, and leave a message on our answer phone. We aim to get back to you within three working days. (Monday-Friday 9am to 5pm).

Evelina London Medicines Helpline

If you have any questions or concerns about your child's medicines, please speak to the staff caring for them or contact our helpline, **phone** 020 7188 3003, Monday to Friday, 10am to 5pm
email letstalkmedicines@gstt.nhs.uk

Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS), **phone** 020 7188 8801 **email** pals@gstt.nhs.uk. To make a complaint contact the resolution department **phone** 020 7188 3514 **email** complaints2@gstt.nhs.uk

Language and accessible support services

If you need an interpreter or information about your care in a different language or format, please get in touch, **phone** 020 7188 8815 **email** languagesupport@gstt.nhs.uk

NHS 111

This service offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day, **phone** 111
web www.111.nhs.uk

NHS website

This website gives information and guidance on all aspects of health and healthcare, to help you take control of your health and wellbeing, **web** www.nhs.uk

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web www.guysandstthomas.nhs.uk/membership

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