Bradford Teaching Hospitals
NHS Foundation Trust

Squint Surgery for Children

Your questions answered

What is a squint?

The brain controls each eye using six muscles. A squint (strabismus) occurs when one or more of these muscles do not work normally. This means the eyes do not point in the same direction.

There are different types of squint:

- Inwards (Esotropia).
- Outwards (Exotropia).
- *or* Vertical (Hypertropia and Hypotropia).

One or both eyes can be affected and the squint can be constant or intermittent.

Why does my child need surgery?

Firstly the orthoptist will try to improve your child's vision using glasses and possible occlusion therapy (patching or Atropine eye drops). Glasses can be used to help straighten a squint, if glasses don't correct the position of the eye; the next step is an operation.

Surgery is carried out to reduce the size of the squint so that it is less obvious. It can also help control an intermittent squint.

Is there an alternative?

Surgery is the only permanent way of improving the size of a squint.

Who is involved in treating your child whilst in hospital?

- **Orthoptist -** involved in managing the squint using non surgical methods.
- **Ophthalmologist -** the eye surgeon.
- **Anaesthetist -** puts your child to sleep and carries out monitoring throughout the operation.
- **Nurses -** Looks after your child on the ward.

Before the surgery

Before the day of the operation your child will be invited to attend a pre-assessment clinic to discuss the stay in hospital, you will be told about the procedure and what to bring.

Wristbands

When your child is in hospital it is essential for them to wear a wristband at all times to ensure their safety during the stay. The wristband will contain accurate details including all of the essential information that staff need to identify your child correctly and give the right care.

All hospital patients including babies, children and older people should wear it at all times. If your child does not have a wristband whilst in hospital, then please ask a member of staff for one. If it comes off or is uncomfortable, ask a member of staff to replace it.

Anaesthetics

Your child will need a general anaesthetic so they will be asleep for the whole operation. Most children are given their anaesthetic through a cannula (a small tube in the back of their hand). They are given anaesthetic cream to the area; this numbs the skin to make it as comfortable as possible when the cannula is inserted.

Younger children can breathe in anaesthetic as a gas instead. This can be discussed with the anaesthetist. You can be there throughout the anaesthetic process, but will be asked to leave as soon as your child is asleep.

During surgery

The surgery usually lasts for about 20 minutes. Your child will be away from the ward for about an hour. The surgeon moves the muscles to straighten the eye. The eye is not removed from the socket.

This is a routine operation but as with any surgery and anaesthetic there are some side-effects & risks:

- **A sore throat** – a drink may help this.
- **Feeling sick or vomiting** – medicine can be given to stop this. In rare cases children may need to stay overnight until this settles down.
- **Feeling upset** – they may not know where they are or what has happened when they wake up.

After surgery

Your child will wake up in the recovery room. They may fall asleep again before going back to the ward where you will meet them. It is normal to sleep for a little while after a general anaesthetic.

When they wake up they might be upset and hungry. Their eyes will be red, bloodshot and feel 'gritty'. This is perfectly normal and may last for a few weeks. Their pupil may also seem bigger and their eyelid may be droopy. This should disappear within a few hours.

Once your child has had something to eat and drink and has not been sick you can go home. This is usually around two hours after the operation. If you are using your own transport two adults should take the child home together. This is in case your child feels ill during the journey.

You will receive a post-op appointment with the doctor approximately 2-3 weeks after the surgery.

Common risks

- **Double vision -** this should disappear within a few days.
- **Infection -** can be treated with drops.
- **Blood in the tears -** this is normal for the first 24 hours.

Serious risks - these are **very rare.**

- Damage to the eye during surgery.
- Losing the muscle being operated on.
- Loss of vision.

Frequently Asked Questions

How do I look after my child's eyes at home?

If the eyes are painful oral Paracetamol or Calpol should help. If the eyes become sticky, boil some water and allow it to cool completely. Gently wipe it over the eye using cotton wool.

Will the surgery fix the squint or will another operation be required?

Surgery should improve how the eye looks.
One in 10 children may need another operation.

Do the stitches need to be removed?

No, the stitches are designed to dissolve by themselves over six weeks. This may leave a small scar on the white part of the eye.

If my child rubs their eyes will this affect their stitches?

No, the stitches don't move. Rubbing may cause more pain and an increased risk of infection so should be discouraged.

Will they still have to wear their glasses?

Yes, if your child currently wears glasses. The surgery doesn't improve vision, so if glasses were worn prior to the operation, they will still need to wear the glasses.

When can they go back to school?

Most children have a few days off school to recover from the surgery and the anaesthetic.

When can they play sport again?

They can start playing sport when they return to school. They shouldn't swim until the redness has gone; which is likely to take between 3 and 4 weeks.

Smoke Free Policy

Bradford Teaching Hospitals NHS Foundation Trust is a smoke-free organisation. You are not permitted to smoke or use e-cigarettes in any of the hospital buildings or grounds.

Any extra questions

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Contact Information

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People with hearing and speech difficulties

You can contact us using the Relay UK app. Textphone users will need to dial 18001 01274 364175.

If you need this information in another format or language, please ask a member of staff to arrange this for you.

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