

## **Squint Surgery for children**

### **Patient Information Leaflet**

This leaflet aims to provide you with information about squint surgery. It will include the aims, risks, and benefits of having squint surgery.

#### **What is a squint (strabismus)?**

- When the eyes are not correctly aligned, one eye looks directly at an object while the other eye looks in a different direction.
- The misaligned eye may turn outwards (exotropia), inwards (esotropia), or it may turn up or down.
- A squint may be constant or intermittent, small, or large and may vary when looking at different distances or directions.

#### **Benefits of the surgery**

- The operation aims to improve (but not necessarily completely resolve) the appearance of the misaligned eye and can sometimes restore 3D vision.
- In some patients, the aim is to improve double vision.
- Occasionally, the surgery can correct an abnormal position of the head.

#### **The operation**

- The operation is performed under a general anaesthetic (asleep). You should expect your child to be in theatre for about 60 to 90 minutes, including preparations, surgical time and recovery.
- Each eye has six muscles on the outside which allow it to look in different directions and move together with the other eye. The operation typically involves tightening or moving one or more of the muscles. The eye is never removed from its socket during the surgery.
- Fine self-absorbable stitches are used that do not require removal.
- The operation may be done on either or both eyes. That choice depends on the surgeon's recommendation and agreement with the family, as it not a matter of right or left eye as much as having both eyes balanced and aiming to the same direction.

#### **Potential complications of squint surgery:**

Squint surgery is generally a safe procedure. However, as with any operation, complications can and do occur.

### Common complications:

- **Second procedure/repeat surgery:** muscles in different people heal differently, leading to over or under correction. Generally, out of 100 cases 95 will have a successful alignment. 5 will still have significant residual misalignment and require a second operation to achieve the desired outcome. More than one operation might be needed if the original squint is very large.
- **Double vision:** patients might experience double vision that can last for days, weeks or rarely months. Some might continue to experience double vision when looking to the side. Rarely, permanent double vision can occur when looking straight ahead, necessitating further treatment like glasses with prisms, surgery, or even an eye patch.
- **Allergy:** Allergic reactions to stitches or medications might lead to itching, irritation, redness, and eyelid puffiness.
- **Redness:** Redness post-surgery might last up to three months, especially after repeated operations.
- **Scarring:** Most scarring is unnoticeable after three months, but visible scars might remain, especially with repeated surgeries.
- **Conjunctivitis:** About 1 in 150 children might get a mild eye infection called conjunctivitis. This is inflammation or infection of the transparent membrane that lines your eyelid and covers the eyeball. Conjunctivitis is usually treatable with antibiotic eye drops.
- **Anaesthetic risks:** While severe harm during an elective general anaesthetic for your child is extremely rare (about 1 in 200,000), transient issues like sore throats, intravenous (IV) site bruises, nausea, or emotional distress are more common. These risks can alter if your child has other significant medical conditions, needing further discussions with the anaesthetist.

**Serious and rare complications which can lead to permanent worsening of the squint, severe or complete loss of vision or even loss of the eyeball have been reported. These include:**

- **Lost muscle:** During the operation muscle might be lost deep in the bony socket making it impossible to find and retrieve. This leaves the patients with permanently and significantly worse squint. This risk is about 1 in 2,000.
- **Anterior Segment Ischemia:** Reduced blood circulation to the front of the eye might lead to a permanently dilated pupil and blurred vision. This is a rare complication, with a risk of about 1 in 13,000 cases.

- **Serious infection** of the inside of the eye (endophthalmitis) may occur in 1 in 3000 cases.
- **Serious bleeding from adjacent blood vessels.**
- **Retinal detachment due to incidental damage to the inside of the eye.**

#### **After squint surgery.**

- **Immediate recovery:** Most children are restless when they first wake up after squint surgery. The child may be disoriented and crying for some time. This occurs because there is some discomfort and confusion with reluctance to open the eyes. The anaesthetist will advise you on what pain relief your child can take after their operation. It is advisable to take this regularly for at least 48 hours.
- **Sickness and vomiting** are common following squint surgery. This may last intermittently for a few days after the operation, but it should slowly resolve.
- **Pain:** We usually give every child a local anaesthetic around the eye at the end of the procedure to help reduce the initial discomfort. Over the counter oral painkillers (e.g. paracetamol/ibuprofen - follow instructions on label) are recommended the first few days after the surgery.
- **Eye patch:** a patch is not usually required.
- **Cleaning:** There may be slightly blood-stained tears, dried blood, or sticky discharge after the operation. This can be washed off with cool boiled water, bathing it from the inside corner of the eye outwards.
- **Redness:** it is expected for the eyes to look bloodshot and appear "bruised" over the site of the operated muscle(s). This will increase over the first two days after the operation before it slowly starts to subside over 6 to 12 weeks.
- **Alignment:** The eyes might look turning in or out initially, but they are expected to be better aligned than before the operation. It might take a few weeks, however, for the eyes to reach their final position.
- **Vision:** Some blurred vision, photophobia (increased sensitivity to light), and short-living double vision are common after squint surgery. A small number of older children will experience more troublesome double vision.
- **Activities:** avoid swimming, contact sports, and football for about four weeks after the operation, to prevent injuries to the eye, and allow it to heal.

**Showering:** In order to prevent water entering the eye, We recommend your child has a bath instead of showering in the first week following the surgery.

**School/Nursery:** Your child can return to normal activities as soon as they feel up to it, but we normally recommend a week off school or nursery.

**Eye drops:** Commonly the surgeon will prescribe eye drops usually a few times per day for a few weeks.

**Rubbing:** Touching or rubbing the eye does not normally cause any issues but please encourage your child to avoid it.

**Glasses:** The decision to wear, continue wearing, or stop wearing glasses is an individualised case by case decision, if you have any concerns in this regard consult your doctor.

**Contact lenses:** should be avoided for 4 weeks post-surgery and only worn if the eye has returned to normal.

A follow up appointment will be arranged with the Paediatric Ophthalmology Team within few weeks after the surgery.

**When to get in touch. If your child has any of the following:**

- Unexpected position of their eye with significant misalignment.
- Persistent worsening copious green or yellow-grey discharge from their eye(s).
- Persistent bleeding that soaks several tissues.
- Persistent severe pain that is not relieved by ordinary painkillers.
- Marked reduction in vision in one or both of their eyes.

If you have any concerns please contact the Orthoptic Department: **01603 288046** (Monday to Thursday: 9.00am-5.00pm, Friday: 9.00am-2.00pm).

At weekends and out of hours, please contact the NNUH Eye clinic: **01603 288064**.

We aim to provide the best care for every patient. So, we would like your feedback on the quality of the care you have received from the Hospital. Please visit: <http://ratenhs.uk/IQu9vx> Or scan QR code:

