

Squint surgery for children and adults

Information for patients from the Orthoptic Department

This information leaflet is for patients or parents of children who have been referred to the hospital for squint surgery. It is hoped that it will help answer any questions that you may have but it is always best to discuss any queries with your ophthalmic surgeon/orthoptist before your operation.

We are always keen to hear your views on the information that we provide, so please let us know if you feel we should have included any additional information.

What is squint surgery?

Squint surgery involves adjusting the position of the eyes by moving the muscles on the outside of the eyeball (this does not involve removing the eye). Usually two muscles are adjusted, this may be in one or both eyes but occasionally just one or more muscles will give the best result.

Surgery may be necessary to:

- make the eyes appear straighter; or
- to allow the eyes to be used as a pair.

Your orthoptist and/or ophthalmologist (eye doctor) will discuss this with you. You should be clear as to your expected outcome.

Are there risks to having this surgery?

Your surgeon will discuss the risks of surgery with you at your preassessment appointment, before you give consent for treatment.

What are the benefits/alternatives to having surgery?

The benefits of surgery or alternatives to surgical correction will depend on your type of squint and can be discussed with your orthoptist/ophthalmologist at any stage.



How long will it be before I have my surgery?

You should wait no longer than 18 weeks from the time your consultant lists you for surgery to having your operation. However, in certain circumstances, waiting times may change. You/your child may continue to be monitored by the orthoptist whilst on the waiting list. You will be told in writing when a date is set and a preassessment appointment will be arranged for you up to four weeks before your operation.

What will happen at my preassessment appointment?

Your orthoptist will repeat all the measurements and discuss these with your consultant. You will also see the consultant ophthalmologist who will explain the procedure to you, and ask for your informed consent for the operation. **This is the time to discuss any worries or concerns that you may have.** Remember you can withdraw your consent for treatment at any time.

Where possible you will also visit the day case unit or children's ward on this day. You will be given a date to return to see the orthoptist within one to two weeks of your operation. You will not have an appointment to see your consultant on this visit, but a doctor will be available if necessary. The nurses on the Ophthalmology Suite or children's ward will explain what will happen when you come into hospital on the day of the operation.

What will happen when I arrive at the hospital?

Refer to your appointment letter to see when and where you should report to on the day of your surgery. You will be met by a member of nursing staff who will explain the procedure for the day. You will also meet the anaesthetist.

Your child will have already visited the children's ward at their preassessment appointment and be familiar with the procedure for the day. The preassessment visit would be the time to ask any questions you have regarding your child's care on the day of surgery.

Will I need a general anaesthetic?

Squint surgery is performed under general anaesthetic (you/your child will be asleep for the operation). The anaesthetist will visit you in the day case unit on the day of the operation. General anaesthetics cannot be given to patients that are unwell, so please tell the unit if you are/your child is ill.

What if I have adjustable sutures?

Some adult patients (over the age of 15 years) may have an adjustable suture procedure. When an adjustable suture is advised, the main part of the operation is performed under general anaesthesia but the stitches are not completely fixed.

Later in the day the orthoptist will take further measurements of the angle of squint. Using local anaesthetic eye drops to numb the eye, the surgeon will make minor adjustments, as necessary. This will make sure the best possible results from the operation.

How long does the operation last?

Usually surgery lasts about 60 to 80 minutes. This will depend on how many muscles are being operated on and whether the operation involves both eyes.

When will I be discharged from hospital?

Adults will remain in the Ophthalmology Suite until it is time to go home, which is usually by 6pm that day. Arrange to have someone drive you to and from the hospital. You may start driving after a day or so, when you are comfortable and can see without double or blurred vision. Please speak to your orthoptist if you are unsure about driving.

Children will be transferred to the children's ward following recovery, before going home later that day, if all is well. Rarely a child may need to have an overnight stay, if so parents are welcome to stay with their child in hospital.

After their operation, your child may vomit as a result of the surgery or the anaesthetic; do not be concerned. However, if this continues for longer than 12 hours, contact your GP or telephone the children's ward for advice.

How should I look after my eye(s) at home?

- **Eye pad:** children are not usually given eye pads following their squint surgery. Adults may be given an eye pad and this can be removed the day after surgery.
- **Drops:** eye drops will need to be instilled four times a day for two weeks following surgery. The nurses on the ward will show you how to do this before you leave hospital. These drops will prevent infection and help your eye to heal more quickly. They may sting on instillation but this effect quickly settles.
- **Redness and stitches:** your eye will remain red for several weeks after surgery. The stitches used are dissolvable and do not need to be removed. You may see them as white or blue bits on the white of your eye. These can feel quite itchy for one to two weeks after your operation.

To begin with your eye may be sticky, especially when you wake up; the antibiotic drops will help this. Cooled boiled water and a moistened cotton wool bud can be used to remove stubborn dried discharge from your eye.

- **Pain:** if you experience any pain after surgery (especially adults undergoing adjustable stitches once the numbing effect of the drops wears off), take your usual pain relief, for example paracetamol or Calpol for children. This should calm down within 24 hours, but if it continues contact the Orthoptic Department, children's ward, or your GP.
- **Occlusion patch:** if your child normally wears a patch to help improve their vision, they will not be expected to wear this for the first week after their operation. The patch may be used again after speaking to your orthoptist at your child's follow-up appointment.
- **Glasses:** continue wearing the glasses you wore before your operation unless advised otherwise by your ophthalmologist or orthoptist.
- **Time off work or school:** usually one to two weeks is necessary. This is mainly due to the effects of the general anaesthetic. The redness of the eye does not prevent you working/going to school and your vision (although slightly blurry at first) is unaffected.

When can I resume my normal activities?

Due to the risk of infection, usually a month or more is needed before you can start swimming again. Other non contact sports can be resumed as soon as you have recovered from the anaesthetic. You must not take part in any contact sports for at least a month following surgery.

To avoid infection, take care when washing your hair. Try to avoid rubbing your eye after your operation.

Will I have follow-up appointments?

After your one week follow-up appointment, your appointments will generally be at one month and three months. It has been proved recently that the severe redness has usually gone by one month and after three months the eye generally looks normal. The best results were seen three months following surgery.

Will further surgery be needed?

Your expected outcomes will have been discussed with you at the time you were listed for surgery and again at your preassessment appointment. If during the first week after your surgery your outcome is not as you expected, please contact the Orthoptic Department on 01227 86 86 15. Please remember though, that it may not be until your first or second follow-up appointment that you see the outcome you expected.

Some squints need more than one operation. This may be a planned second procedure or decided upon at a later stage.

How long will I be monitored after surgery?

Children are usually kept under orthoptic review until visual maturity is reached at approximately eight years. Adults may be discharged within one year of their surgery, if the outcome is satisfactory to all concerned.

Contact details

- **Orthoptic Department, Kent and Canterbury Hospital, Canterbury**
Telephone: 01227 86 86 15
- **Dolphin Ward, Kent and Canterbury Hospital, Canterbury**
Telephone: 01227 86 40 52

References

- **Pediatric Ophthalmic Consultants**
Web: www.pedseye.com
- **Squint Clinic**
Web: www.squintclinic.com

This leaflet has been produced with and for patients

If you would like this information in **another language, audio, Braille, Easy Read, or large print** please ask a member of staff. You can ask someone to contact us on your behalf.

Any complaints, comments, concerns, or compliments please speak to your doctor or nurse, or contact the Patient Advice and Liaison Service (PALS) on 01227 78 31 45, or email ekh-tr.pals@nhs.net

Patients should not bring in large sums of money or valuables into hospital. Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property had been handed in to Trust staff for safe-keeping.

Further patient leaflets are available via the East Kent Hospitals web site www.ekhufft.nhs.uk/patientinformation