

# Strabismus (squint) explained

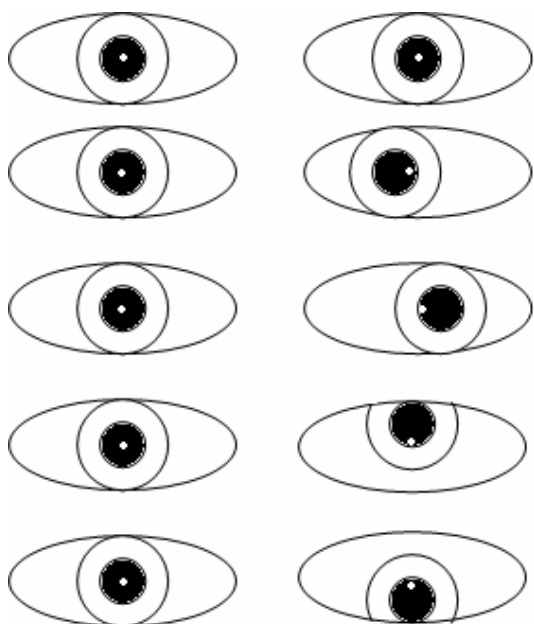
## Information for patients from the Orthoptic Department

You have been given this leaflet because you or your child has a squint (strabismus).

### What is a squint (strabismus)?

Strabismus – or squint – is the word used to describe when the two eyes do not both look straight ahead at the same time. While one eye looks straight ahead the other may be turned in, out, up, or down.

### What types of squint are there?



**Non-squinting eyes** – both eyes look straight.

**Convergent squint (esotropia)** – one eye is straight, the other is turned inwards.

**Divergent squint (exotropia)** – one eye is straight, the other is turned outwards.

**Vertical squint (hypertropia)** – one eye is straight, the other is turned upwards.

**Vertical squint (hypotropia)** – one eye is straight, the other is turned downwards.

The white dots on the diagrams above represent light reflections.

- In a **straight eye** the white dot is in the centre of your pupil (inner black circle of your eye).
- If you have a squint this is displaced up, down, inwards, or outwards on your pupil.
- In some cases it can be displaced entirely from the pupil and onto your iris (coloured part of the eye).



## Will both eyes be affected by a squint?

A squint can affect one or both eyes.

- You/your child may have an alternating squint, where sometimes your right eye looks straight and sometimes your left eye.
- Or it may always be the same eye that is turned out, in, up, or down. If this is the case there could be a risk of developing amblyopia, which is reduced vision caused by a lazy eye. For more information, please ask a member of staff for a copy of the Trust's **Amblyopia (lazy eye)** leaflet, or download a copy from the Trust web site [www.ekhufft.nhs.uk/patientinformation](http://www.ekhufft.nhs.uk/patientinformation)

## Will the squint always be there?

A squint can be **intermittent** or **constant**.

- A **constant** squint is present all the time, one eye will always be turned away from the other eye.
- **Intermittent** squints are present only some of the time, at other times the two eyes are straight. For example, a squint that is only there when glasses are removed or when looking into the distance.

Sometimes it may appear that you or your child has a squint. It can look as though one eye is turning inwards, outwards, up, or down but in fact both eyes are straight. This is known as a pseudostrabismus. For more information, please ask a member of staff for a copy of the Trust's **Pseudostrabismus explained** leaflet, or download a copy from the Trust's web site [www.ekhufft.nhs.uk/patientinformation](http://www.ekhufft.nhs.uk/patientinformation)

## Will I/my child have double vision?

The brain sees an image from each eye. When no squint is present both eyes are directed towards the same point and these two images are interpreted as one by the brain. This process is known as fusion. If you have a squint, the two eyes are not directed towards the same point and your brain will see them as two separate images, called double vision. In children the brain recognises this as inappropriate and ignores the image from one eye. This is known as suppression and double vision is not seen. If a squint does not develop until later childhood or adulthood it is harder for your brain to learn to ignore the inappropriate image, and you may have double vision.

Double vision is treated on an individual basis and sometimes needs no treatment. Please discuss with your orthoptist if you have any concerns.

## Will my/my child's eyes still work together?

It is possible for your eyes to still work together if you have a squint, but this depends on many things. Most constant squints prevent the two eyes from working as a pair. Your orthoptist will explain to you or your child if your eyes are working as a pair or have the potential to do so.

## How do you treat a squint?

The aim of treatment can differ from patient to patient, and will depend on whether or not your eyes can work together. Your treatment may be designed to reduce the size of an obvious squint, to help your eyes work as a pair, or to help with symptoms of double vision. This may be done with glasses, Occlusion (patches or drops) to improve the vision of the lazy eye, Botulinum toxin injection, or squint surgery.

For further information on these treatment options, please read the leaflets available at [www.ekhuft.nhs.uk/eye-patient-leaflets](http://www.ekhuft.nhs.uk/eye-patient-leaflets)

Your orthoptist will discuss the options suitable for you or your child in more detail.

## Further information

If you have any further questions, please discuss them with your orthoptist or call the Orthoptic Department on 01227 86 86 15.

**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](mailto: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.ekhuft.nhs.uk/patientinformation](http://www.ekhuft.nhs.uk/patientinformation)