Patient information factsheet

Squint in adults

This leaflet tries to answer the most common questions about squint and surgery to correct squint. Please ask your orthoptist or eye doctor if you have any other questions.

What is a squint?

A squint is when one eye wanders or turns, so that it does not work with the other eye. The eye may turn inwards or outwards, or more rarely upwards or downwards. The eye may turn all of the time or only sometimes, for example when tired or concentrating. The technical term for squint is strabismus.

What causes a squint?

There are many causes for squints, and you should talk to your orthoptist or eye doctor about the cause in your case. Some of the most common causes are as follows:

- Some people had a squint which was treated as a child but which has come back over time.
- Some people have had a tendency to squint for a long time, which they have been able to control. Over time it may get more difficult to control the eyes so that a squint develops.
- Some squints develop as the result of an accident or illness that has affected the muscles which move the eyes.

Why does a squint need to be treated?

Squints can be treated to improve the appearance of the eyes and/or to help double vision or eyestrain caused by the squint.

How are squints treated?

- Eye exercises to improve the control of the eyes can help some squints.
- In some cases glasses may improve the squint. In particular glasses for long-sight can correct some inward turning squints.
- Prism glasses can help to control double vision and eyestrain.
- Surgery to change the position of the muscles which move the eyes can improve or correct some squints.
- Injections of botulinum (Botox) into an eye muscle can improve some squints but the effect is usually only temporary. (Please see separate leaflet on botulinum toxin injections).
For some people there is a choice of treatment. In others the orthoptist’s tests may show that only one of the above treatments is likely to be helpful. Your orthoptist and eye doctor will discuss the options with you and you will decide together on the best treatment for you.

The rest of this leaflet covers squint surgery, as many patients have questions about this.

**Squint surgery**

**What happens during an operation for squint?**

There are six muscles that move each eye. The muscles are attached to the surface of each eye, under the white of the eye. By moving the position of a muscle, it can be weakened or strengthened to straighten the eye. The muscle is reattached to the eye using stitches which dissolve in about six to eight weeks and which do not usually need to be removed. Stitches may also be needed in the clear layer which covers the surface of the eye (the conjunctiva). These usually fall out in the first four to six weeks after the operation but occasionally need to be removed. The operation is on surface of the eye and the eye is **not** taken out.

Often two eye muscles need to be operated on to correct a squint and the operation may need to be on one or both eyes. Your eye doctor will advise you on the best option for you.

The operation is done under a general anaesthetic. This means that you are not aware of anything during the operation.

Your eye doctor may recommend an ‘adjustable operation’. This means that the muscle is operated on as usual under a general anaesthetic but instead of fully re-attaching the muscle to the eye at the end of the operation, the muscle is loosely re-attached. When you wake up after the operation, the position of the muscle can be adjusted slightly to straighten the eye as much as possible and the muscle is then fully re-attached. Local anaesthetic drops are put into the eye first so that the adjustment is not painful. Not everyone will benefit from an adjustable operation but if the doctor thinks that you would they will explain this fully to you. Once you have all the information you can decide whether you wish to go ahead with an adjustable operation.

**How long would I be in hospital for?**

In most cases, squint surgery is a day-case operation so that you are in hospital for the day only and not overnight. Occasionally patients need to stay in hospital for the night after the operation.

We advise that you have a responsible adult with you for the first 24 hours after the operation.

**Will an operation cure the squint?**

The success rates of surgery depend on the type of squint that you have and your eye doctor will discuss this with you. The operation can only help the squint, it will not improve the level of your eyesight.
What are the risks of the operation?

- Squint surgery is done under a general anaesthetic. Any risks from this are very small if your health is good.

- The operation is on the surface of the eye so any risk of damage to the eye or to the vision is very small, provided your eyes are healthy.

- The eye will be quite uncomfortable for a few days after the operation, but should not be really painful. The discomfort is often greater if you have had a previous squint operation on the same eye muscle.

- The white area of the eye where the operation was done will look red after the operation. This will improve in the first couple of weeks after the operation but may take a few months to settle. Rarely some redness may be permanent.

- As with any operation, squint surgery carries a small risk of infection. This is usually easily treated, but there is a very small risk (1 in 50,000) of infection, which could permanently affect the vision.

- Sometimes more than one operation is needed to correct a squint or double vision. In most cases this is because the first operation helped but did not fully correct the squint. Occasionally, a second operation is needed because the first operation made the eye turn in the opposite direction.

- In some people, the operation straightens the eye well but the squint comes back later on. This may take a long time to happen, and may mean that another operation is needed eventually.

- Some people who did not have double vision before the operation notice double vision after the operation. This usually goes away in the first few days, but can occasionally last longer and, very occasionally, it can be permanent.

How long before I can get back to normal after a squint operation?

- On average people need one week off work/full activities after a squint operation, however this does vary. People who do heavy manual work may need two weeks off work after the operation.

- You will be given eye drops to use every day for two weeks after the operation, to help the eye(s) to heal.

- You should avoid sports and strenuous activity for two weeks after the operation, and you should not swim for four weeks.
You can start driving again as soon as you feel safe and confident to do so. However, you should not drive home after the operation and most people prefer not to drive for the first few days. If you have double vision after the operation you should not drive until you have seen the orthoptist and the eye doctor and have been advised that it is safe to drive.

Contact lenses should not be worn in the operated eye(s) for at least one week after the operation so you will need to make sure that you have glasses available to use until the eye(s) have healed.

We hope we have answered most of your questions about squints and surgery. Please do not hesitate to contact us if you have any further questions. If you decide to go ahead with a squint operation, we have another leaflet, which tells you more about what happens once you are on our waiting list.

### Useful Phone Numbers

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<th>Orthoptic Department:</th>
<th>023 8079 4789</th>
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For a translation of this document, an interpreter or a version in large print, Braille or on audio tape, please telephone 023 8079 4688.

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