

## Patient information factsheet

# Atropine occlusion (eye drops)

We have given you this factsheet because your child has been diagnosed with a lazy eye, and you have been given atropine eye drops to help improve the vision. It explains what atropine eye drops are, how to use them, and any side effects that your child may experience. We hope that it answers some of the questions you may have. If you or your child have any further questions or concerns, please speak to a member of our team or contact us using the details at the end of the factsheet.

It is important that you tell us if your child:

- is allergic to any medication
- has high blood pressure
- has a heart condition
- has seizures

Atropine eye drops may not be suitable for your child.

### What are atropine eye drops?

Atropine eye drops are used to improve the vision in a lazy eye. They temporarily dilate (widen) the pupil and blur the vision in the better eye so that your child is encouraged to use the weaker eye.

### When should I use the drops?

You should only use the drops on weekends. Put one drop into your child's better eye once on Saturdays and once on Sundays.

### How do I get the drops?

The drops come in small, single-use plastic bottles called minims. You should have two minims bottles (one for Saturday and one for Sunday) for each weekend that you are using the drops. We will either give you eight minims bottles to use over the first four weekends or the eye doctor will write a prescription for the first four weekends' supply. We will write to your child's general practitioner (GP) and ask them to give you further prescriptions for atropine.

Please contact us using the details at the end of the factsheet if you have any problems getting the drops.

### How long should my child use the drops for?

It usually takes several months of using the drops at weekends to treat the vision in the lazy eye. The orthoptist will monitor your child's vision carefully and discuss when you should stop using the drops. Even if the treatment is not complete, we usually stop the drops after six months for a month to give the eye a rest.

## How long do the effects last?

It can take up to two weeks for the effects of the drops to wear off completely. Your child will have blurred vision in one eye and will be sensitive to light in one eye while using the drops.

## How often will my child be seen in hospital?

The orthoptist will review your child one month after they start the drops, and then every two months after this. You can contact us between appointments if you have any concerns.

## Can my child continue normal activities while using the drops?

Yes, but they will have blurred vision. You should inform your child's school, nursery and other carers about these effects. Detailed visual activities (such as reading, writing, using a computer, or watching TV) help stimulate use of the lazy eye.

You will need to take extra care to avoid accidents. Each child is different, but it is usually best to avoid sports while the vision is blurred. Your child may find it helpful to wear a hat or sunglasses outside in bright weather.

## How to use atropine eye drops

Do not give your child atropine eye drops if they have a fever (a temperature of 38°C or above) or are allergic to atropine sulphate.

You should only use the drops on weekends. Put one drop into the better eye once on Saturdays and once on Sundays, following the steps below.

1. Before you start, double check which eye you should be putting the drop into.
2. Wash your hands.
3. Ask your child to lie down, or to sit on another adult's lap with their head tilted back onto the adult's arm.
4. Take the cap off the minim bottle.
5. Gently open the eyelids of your child's better eye and put one drop in the centre of the inside of the lower eyelid. Do not let the bottle touch the eye.
6. If it is difficult to open the eye, you can leave the lids closed and place the drop where the upper and lower eyelids meet in the centre of the eye. Keep your child lying down. When they open their eye, the drop should trickle into the eye.
7. Close the eye and gently press your finger against the inner corner of the eye for at least one minute. This blocks the duct that runs from the eye into the nose and helps to keep the drop in the eye.
8. Wipe away any excess liquid from your child's face with a clean tissue.
9. Wash your hands afterwards.
10. Replace the lid on the minim bottle and throw away the minim, even if you have not used all the drops in it. Dispose of it in the outside rubbish bin, so that children cannot get hold of it. Do not throw the drops in the rubbish bin in the house or down the toilet.
11. Wash your hands again.

Once you have finished the course of atropine eye drops, please return any unused minims bottles to a pharmacy.

**Please note that atropine is poisonous if swallowed. Make sure that you only use the eye drops as prescribed and keep them out of the reach of children.**

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## Storing the drops

You should store the drops:

- safely out of the reach of children
- at a temperature less than 25°C (room temperature)
- in a dry place away from strong light

Do **not** place the drops near food or drink.

## Side effects

### Side effects commonly seen in practice include:

- a stinging sensation when the drops are put in (this usually wears off after a couple of minutes)
- blurred vision (especially for close work such as reading)
- a sensitivity to bright light while the pupil is large (wearing a hat or sunglasses may help)

Please let us know if you are concerned about any of these side effects.

### Side effects rarely seen in practice include:

- |  |   |
|--|---|
| • itchy or swollen eyelids             | • a high temperature (38°C or above)                          |
| • red, watering eyes                   | • flushing of the face  |
| • fewer tears                          | • restlessness, excitement or irritability                    |
| • a feeling of pressure inside the eye | • an irregular heartbeat                                      |
| • dryness of the skin or mouth         | • difficulty passing urine (weeing)                           |
| • skin rashes                          | • gastrointestinal upset (for example, diarrhoea or vomiting) |
| • difficulty swallowing                |   |

Please stop using the drops and contact us immediately if your child experiences any of the rare side effects.

As with all medicines, there is a very small risk of having a severe, life-threatening allergic reaction (anaphylaxis).

In the very unlikely event that a severe side effect occurs, please seek urgent medical help. Call **999** for an ambulance or take your child to your nearest emergency department.

Some additional extremely rare side effects have been reported. For a full list of the potential side effects, please visit: [www.medicines.org.uk/emc/product/3738/pil#about-medicine](http://www.medicines.org.uk/emc/product/3738/pil#about-medicine)

## Contact us

### Orthoptic department

Telephone: **023 8120 4789** (Monday to Friday, 8am to 5pm)

### Eye emergency department

Telephone triage line: **023 8120 6592** (Monday to Friday, 8am to 7.30pm, weekends and bank holidays, 8am to 6pm)

If your child needs to see a doctor while their pupil is still large, for example if they have an accident, you should let the doctor know that they have had dilating eye drops.

## Useful links

[www.squintclinic.com](http://www.squintclinic.com)

If you are a patient at one of our hospitals and need this document translated, or in another format such as easy read, large print, Braille or audio, please telephone **0800 484 0135** or email **patientsupporthub@uhs.nhs.uk**

For help preparing for your visit, arranging an interpreter or accessing the hospital, please visit **[www.uhs.nhs.uk/additionalsupport](http://www.uhs.nhs.uk/additionalsupport)**

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