

Squint Surgery for Adults



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Who to contact and how: _____

Notes: _____

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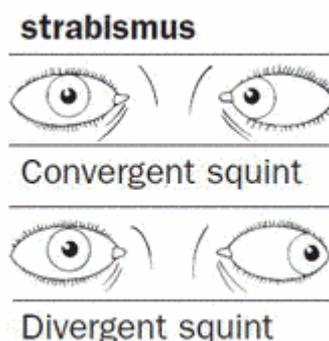


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Introduction

A squint (strabismus) is a condition where the eyes are misaligned and point in different directions. Adults may have squints from a residual childhood squint or may develop one in adulthood. The image below depicts 2 of the common types of squint seen – convergent and divergent, although vertical squints also occur in which the eye is deviated up or down.



What is the aim of squint surgery?

The aim of squint surgery is to:

- Improve the alignment and cosmetic appearance of the eyes – termed a rehabilitative case*
- To try and restore the ability of the two eyes to work together as a pair and allow stereoscopic vision (depth perception) – termed a functional case
- In some patients surgery is undertaken to eliminate double vision
- Your ophthalmologist (eye doctor) will discuss your case with you. It should be clear to you what the purpose of the surgery is
- If glasses are worn, they are usually still needed after the surgery

*Misaligned eyes can negatively affect social interaction, self-confidence and employment opportunities. Numerous studies on the impact of squint surgery have shown improvements to the quality of life post-operatively.

How is squint surgery done?

Squint surgery is a common operation performed under general anaesthetic which involves tightening or weakening one or more of the six muscles that move the eyes. The muscles are attached quite close to the front of the eye underneath the conjunctiva (the surface layer).

A muscle that is working too hard can be weakened and a muscle that is not working hard enough can be strengthened. This can be done in different combinations, depending on the type of the squint. For example, convergent squints (those where the eye points inwards towards the nose) often have one muscle weakened and the opposite muscle of the same eye

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strengthened. Sometimes, however, one muscle of both eyes are weakened (for what appears to be the same type of squint).

The tightening or weakening procedure is carried out on the muscles using stitches that dissolve in about 6 - 8 weeks. The eye is never taken out of its socket during surgery.

The operation usually takes around 60 minutes but may sometimes take less or longer than this depending on how many eye muscles are being operated on.

In some cases, further adjustments will be made to the eye muscles after you've woken up. Local anaesthetic drops are used for this to numb your eye/s.

A second operation may be needed for very large or complex squints.

The Ophthalmologist will explain what procedure is planned for you.

What are the risks associated with squint surgery?

Any risk from the general anaesthetic is very small.

The operation is on the surface of the eye so any risk of damage to the eye or to the vision is very small, however, as with any operation, squint surgery does carry a small risk of complications. Usually these are easily treated and serious complications resulting in loss of vision are very rare.

Squint surgery results are not completely predictable – the amount of surgery that is correct for one patient may be too much or too little for another patient with exactly the same size squint and so further surgery may be needed to fully correct it, particularly if it is a very large squint.

Although your eyes may be straight after surgery, the squint may return at some point in the future either in the same or opposite direction. Many patients require more than one operation in their lifetime.

You may notice some double vision after the operation. This usually goes away after a few days but can last longer and occasionally can be permanent. If it does not clear up on its own, the Orthoptist (an eye care professional who specialises in how the eyes move and work together) will assess you and advise on the options available to manage the double vision.

The vast majority of patients have no significant problems following squint surgery and feel some improvement in their squint after surgery.

How do I prepare for squint surgery?

If you and your ophthalmologist decide to go ahead with squint surgery, your name will be placed on the waiting list. It is important that you inform us as soon as possible of any holiday arrangements that you have whilst on the waiting list. It is also important that you inform us of any change in your address or telephone number.

You will be asked to attend appointments before the surgery:

- A pre-operative assessment where you will see the Orthoptist and Ophthalmologist for the details of surgery to be confirmed

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- A pre-operative visit to the ward where you will have a general health check to ensure you are fit for surgery

What happens on the day of the Operation?

Squint surgery is nearly always a day case procedure. Please ensure that you have not had anything to eat or drink in accordance with the information in your letter.

You will be asked to change into a hospital gown before going to the operating theatre. After the surgery has been performed you will be taken to a recovery room until you are awake and you will usually leave the hospital 2-4 hours later.

Please arrange your own transport to and from the hospital. You should not drive yourself or use public transport.

What to Expect after the Operation?

You may experience some discomfort in the eye/s for a few days after the operation, this often feels like grit or sand in the eye. Simple painkillers like paracetamol or ibuprofen may help.

There may be some blurring of the vision. Eye drops / ointment may have been prescribed for you to help the eye to heal, if so the nurse will explain how to instil them before you leave the hospital. You will also be advised how to store them correctly and safely.

The white area (sclera) of the eye/s where the operation was done will look red after the surgery. This should improve after the first couple of weeks, but may take a few months to fully settle. Most scarring of the conjunctiva is not noticeable by 3 months after the surgery but occasionally visible scars will remain.

You may notice some discharge from the eye/s and that the eyelids are sticky on waking for the first few days after the operation. You will be given advice on how to clean your eyelids before you leave the hospital.

General anaesthetics can affect your memory, concentration and reflexes for a day or so afterwards so it is advisable for a responsible adult to stay with you for at least 24 hours after your operation. It is generally advised to stay off work for around one week.

Post-operative outpatient appointments will be made for you to see the eye doctor 1-2 weeks after the operation to check on the eye position and scar healing. You will see the Orthoptist 6 weeks after the surgery for a detailed assessment of the alignment of the eyes.

Things to Avoid after the Operation

- Sports and strenuous activities – for 2 weeks
- Swimming and contact sports – for 4 weeks
- Driving – cars, motorbikes or mobility scooters for 1-2 days to allow the effects of the anaesthetic to fully wear off, or longer if you are experiencing double vision
- Getting water or shampoo in the eyes – 2 days

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- Do not rub your eye(s) as this may loosen the stitches
- Make up close to the eyes – for 4 weeks
- Contact lenses – for 1-2 weeks or as advised by your doctor (if you wear glasses you should wear these as soon as you feel able to after the surgery)

You can read or watch TV as soon as you feel able to.

Is surgery the only option?

Not all squints need surgery but a squint should always be assessed. The Orthoptist and Ophthalmologist will give you advice on what is the most appropriate treatment for you dependent on what type of squint you have. Other treatment options may include the use of glasses, prisms, surgery or a combination of these. Botulinum toxin injections into the eye muscles may be used as an alternative to surgery in some cases.

Is it ever too late to have squint surgery?

No – squint surgery can be performed at any age if it is likely to have a beneficial effect.

Reference Section

NHS Choices: Squint www.nhs.uk/conditions/squint/surgery/

NHS Choices: General Anaesthesia www.nhs.uk/conditions/general-anaesthesia/

Patient Information – Strabismus service, Squint surgery in adults, Moorfields Eye Hospital. www.moorfields.nhs.uk

Adult Strabismus, American Association for Pediatric Ophthalmology and Strabismus (AAPOS). www.aapos.org

Royal College of Ophthalmology www.rcophth.ac.uk/2016/09/squint-surgical-intervention-is-not-a-cosmetic-procedure/

Strabismus image courtesy of www.thefreedictionary.com/strabismus

Contact Details for Further Information

Orthoptists at Diana, Princess of Wales Hospital
Tel: 03033 304569 Monday-Friday 08:15 – 17:00

Orthoptists at Scunthorpe General Hospital
Tel: 03033 302431 Monday-Thursday 08:30 – 16:30 Friday 09:00 – 15:00

Orthoptists at Goole District Hospital
Tel: 03033 304013 Monday-Tuesday 09:00-16:30 (Wednesday-Friday contact Scunthorpe Orthoptists)

Information for patients

Any Comments, Compliments, Concerns or Complaints

If you have any other concerns please talk to your nurse, therapist or doctor. Our Patient Advice and Liaison Service (PALS) are available on 03033 306518 (Grimsby, Scunthorpe and Goole). You can also contact nlg-tr.PALS@nhs.net

As a Trust we value equality of access to our information and services, therefore alternative formats available on request at nlg-tr.interpreters@nhs.net

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