

Ophthalmology department

Adult Squint Surgery

Information for patients, relatives and carers

Introduction

This leaflet has been designed to give you information about **squint surgery** and answer some of the questions that you or those who care for you may have. It is not meant to replace the discussion between you and your medical team but aims to help you understand more about what is discussed. If you have any questions about the information below, please contact us.

What is a squint?

A squint is a manifest or latent ocular deviation. If the squint is manifest, the eyes are not correctly aligned constantly. One eye looks directly at an object while the other eye looks in a different direction. The squinting eye may be **divergent** (turning outwards), **convergent** (turning inwards) or it may have a **vertical** squint and is turned up or down.

A squint may be constant or intermittent and it may vary when looking at objects at different distances. A latent squint is one which is controlled by the brain and the eye muscles but may cause symptoms at times.

When would an adult have squint surgery?

Adults who require squint surgery may have had a squint since childhood or may have a squint that has developed during adult life following an accident or disease. Those with a childhood squint that has worsened during adult life may wish to have an operation to improve the cosmetic appearance of their eyes. A previous squint operation in childhood is usually no bar to further surgery as an adult.

A latent squint that is becoming difficult to control may cause symptoms such as headache, blurred or double vision. Surgery may be advised to improve the control of the eye muscles.

Adults who have developed a squint as a result of head or facial injury, stroke or other illness such as Thyroid Eye Disease, may suffer from double vision and/or limitation of eye movements. If the condition does not recover over the course of a few months a squint operation may be advised to restore the correct position of the eyes and to eliminate the symptoms. Some patients may require a Botulinum Toxin injection in one muscle as a diagnostic procedure before a decision to carry out squint surgery is made and this will have worn off before the squint surgery is carried out.

A full Orthoptic assessment will be carried out before the decision to operate is made to ensure that there is no risk of having double vision after the operation. The operation will be performed under a general anaesthetic by an ophthalmic surgeon.

Pre-assessment clinic

You will be asked to attend this clinic one or two weeks before the operation. At this appointment you will have an assessment by an ophthalmic nurse who will ask you about your general health. Please bring any medication that you are taking with you. You will also have an up-to-date Orthoptic assessment.

What happens during a squint operation?

The operation involves re-positioning one or two ocular muscles on one eye making one muscle stronger and one muscle weaker in order to move the squinting eye into the correct position. In a few cases muscles on both eyes may need to be operated on. The operated muscles are re-attached to the eyeball with very fine suture material which will later dissolve and does not have to be removed.

Some squint operations on adults requires a small adjustment to the sutures after you have recovered from the anaesthetic, on the day of the operation. This is done after some anaesthetic drops have been put in your eye the position of your eyes is checked and the surgeon can adjust the position of the eyes by altering the tightness of the stitch. This is a small bit of 'fine tuning' to get an improved eye position, once you are awake after the operation as the eyes can be in a different position when you are anaesthetised.

The white of the eye will look red and may feel sore for a few days, antibiotic and anti-inflammatory drops will be prescribed by the surgeon for you to take home.

Some double vision after the operation is quite normal but if you are worried, please contact the orthoptist for an appointment by emailing ICHC-tr.Orthoptics@nhs.net

You should continue to wear the same glasses as before the squint operation, however, if you have had a prism on the glasses to correct double vision this should be removed.

Advice following squint surgery

- **Do not touch or rub the operated eye**
- **Keep soap and water away from the eye**
- **Use boiled water and tissues to clean the eye as instructed by the nurse**
- **Avoid smoky, gritty or dusty atmospheres**
- **Do not swim for 10 days**

Important information

If you have any pain, increased redness or loss of vision you should attend the eye casualty department at the Western Eye Hospital, this is open 24 hours a day. Please ring before you come to the hospital.

Who can I contact for more information?

If you have questions before your appointment, please contact the pre-assessment nurse on **020 3312 3230/3240** at Western Eye Hospital or **020 3311 0137** at Charing Cross Hospital between 09.00 and 17.00, Monday to Friday.

If your eye becomes red or painful, or your vision gets worse, please contact:

Western Eye Hospital emergency department:

020 3312 3245

Western Eye Hospital eye clinic:

020 3312 3236

Alex Cross ward at the Western Eye Hospital:

020 3312 3227

Charing Cross Hospital eye clinic:

020 3311 0137 or 020 3311 1126

Mrs Ferguson

veronica.ferguson1@nhs.net

Orthoptist appointment

ICHC-tr.Orthoptics@nhs.net

Charing Cross Hospital –Riverside Daycare unit:

020 3311 1460

If you have not received a post-surgery appointment, please contact **020 3312 3275 option 2**

How do I make a comment about my visit?

We aim to provide the best possible service and staff will be happy to answer any of the questions you may have. If you have any **suggestions** or **comments** about your visit, please either speak to a member of staff or contact the patient advice and liaison service (**PALS**) on **020 3313 0088** (Charing Cross, Hammersmith and Queen Charlotte's & Chelsea hospitals), or **020 3312 7777** (St Mary's and Western Eye hospitals). You can also email PALS at imperial.pals@nhs.net The PALS team will listen to your concerns, suggestions or queries and is often able to help solve problems on your behalf.

Alternatively, you may wish to complain by contacting our complaints department:

Complaints department, fourth floor, Salton House, St Mary's Hospital, Praed Street
London W2 1NY

Email: ICHC-tr.Complaints@nhs.net

Telephone: **020 3312 1337 / 1349**

Alternative formats

This leaflet can be provided on request in large print or easy read, as a sound recording, in Braille or in alternative languages. Please email the communications team:

imperial.communications@nhs.net

Wi-fi

Wi-fi is available at our Trust. For more information visit our website: www.imperial.nhs.uk

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