

Adjustable stitches?

In some adults who have squint surgery it may be more accurate to use adjustable stitches. The doctor will tell you if this is necessary. The operation is performed while you are asleep and the stitch is tied in a bow at the end of the operation. You are then woken up and the eye position measured. If the eyes are not straight we can tighten up the muscle position after using some drops to numb the eye. This makes the operation more accurate especially for people who have already had a squint operation.

What happens after surgery?

You can go home once you have fully woken up; this is usually two to four hours after the operation. The eye will feel gritty for around three to five days following surgery. The eye may well look pink after surgery for up to two to three weeks and you will be asked to use eye drops for this length of time. A clinic appointment will have been made for a few weeks after the operation to check things are healing well. The exact position of the eye will be fully assessed at three months after the operation.

Any Problems?

Contact the acute referral clinic on **0300 019 4181**

Adult squint surgery



The Eye Unit

This is a leaflet to explain about squint surgery in adults.




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Review date: **December 2023** Ref: **033/21**

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What is a squint?

Squint is the term used when the eyes are not pointing in the same direction. Most commonly one eye either turns in or out. Occasionally one eye may be higher than the other.

If the eyes are not looking in the same direction then they are sending different signals to the brain and this can cause double vision.

The amount of squint can be measured and this is done by people who are trained in assessment of squints and their non-surgical treatment. They are called Orthoptists.

Why do squints happen?

A squint can occur for a number of different reasons these include:

- Damage to the muscles controlling the eye
- Damage to the nerves controlling the muscles
- Poor development or damage to the eye muscle control centres in the brain
- Poor vision in the eye can stop the brain being able to keep the eyes working together.

Why is it important?

A large squint can be a cosmetic problem. It can also cause double vision which can be very disabling. Double vision may also mean that you cannot drive.

Can squints be treated?

A full assessment of your eye and vision is performed and the cause of the squint is assessed.

- Sometimes it is possible to treat the squint with glasses.
- If the squint comes and goes then it may be best to watch and see if it gets any worse.
- If these options do not work then we may need to consider an operation to improve the position of the eyes.

I need an operation so what happens next?

The angle of the squint needs to be carefully measured and the movement of each affected muscle needs to be assessed.

The way the eyes work together is also assessed. Your general health is discussed with one of our specially trained nurses and the details of the operation are discussed with one of the doctors.

You will then be asked to sign a form to say that you understand the type of operation which is going to be performed.

Are there any risks?

Although most squint operations improve the appearance of the eyes all surgery carries risks and squint surgery is no different. There will be some bruising on the eye which can make it look red for up to six to eight weeks.

- Under or overcorrection of the squint can occur which may lead to double vision, if persistent this may require further surgery. Adjustable sutures reduce the risk of double vision and over or undercorrection.
- loss of vision - very rare, the vision in the operated eye can be made worse. This may be caused by bleeding inside the eye or infection.

If the eye is not quite straight after the operation it may settle by the three month appointment. If it does not then we may need to do a further operation to fine tune the first outcome.

What happens on the day of surgery?

You will be seen by the anaesthetist who will discuss the anaesthetic. This is a general anaesthetic so you will be asleep.

One or both eyes are operated on and the muscles will be either shortened or moved to a new position to straighten the eyes. It may not be exactly right after one operation and sometimes a second operation is needed.