

Does patching correct a squint?

No. Patching will not affect the amount the eye turns; it is done to improve the vision of the squinting eye.

If your child requires squint surgery, the result is better with good vision in the squinting eye. Patching is done before surgery is considered.

More questions?

Your child is an individual and each case is different, so please discuss any queries or difficulties with your orthoptist. She is there to help and advise you.

For further information and advice please contact:

Orthoptic Department **01202 704422**

Monday - Friday 8:30am - 5:00pm

Our Vision

Putting patients first while striving to deliver the best quality healthcare.

Orthoptic Department - The Eye Unit,
The Royal Bournemouth Hospital,
Castle Lane East, Bournemouth,
Dorset, BH7 7DW

Author: **Henrietta Holmes-Smith, Orthoptist** Date: **September 2012**

Version: **Three** Review date: **September 2015** Ref: **008/06**

Website: www.rbch.nhs.uk ■ Tel: 01202 303626

Putting patients first

The Royal Bournemouth and
Christchurch Hospitals **NHS**
NHS Foundation Trust

Amblyopia and Patching (Lazy Eye)



The Eye Unit

Information and advice for parents and
carers about treatment for a lazy eye

Website: www.rbch.nhs.uk ■ Tel: 01202 303626

What is Amblyopia?

This is reduced vision in an eye that has not developed normally during the developmental stage of childhood. It is often called a lazy eye. Visual development occurs in the early years of life and continues until approximately 7 years of age. If the eye and brain do not receive a clear focused image during this time of visual development, the child's vision will be reduced, hence the term 'lazy'.

What causes Amblyopia?

There are a number of causes of Amblyopia, but the most common are as follows:

Squint (Strabismus)

This is when an eye turns. If this occurs in childhood, the eye 'switches off' to avoid double vision. As a result the eye is not stimulated and the vision in that eye becomes lazy.

Unequal Focus

When your child requires significantly different prescriptions in each eye, he or she will use the eye that is easier to focus and the other eye will receive an unfocused (blurred) picture.

The unfocused eye will become lazy. This condition is called Anisometropia and is one of the most difficult types of Amblyopia to detect.

How do you know my child has Amblyopia?

An Orthoptist who has been specially trained in the visual assessment of children has seen your child. She will have detected a difference in the vision between the two eyes or found a problem that is known to cause Amblyopia.

An Ophthalmologist (eye doctor) will examine your child's eyes to find out if he/she needs glasses and if there is a reason for the reduced vision. If the eye appears healthy but lazy, a diagnosis of Amblyopia is made.

How can Amblyopia be treated?

Patching the good eye treats a lazy eye; as a result the weaker eye is encouraged to work harder. Glasses must be worn all the time if prescribed along with the patch.

How successful is patching?

Patching will only work if your child wears it as instructed. Patching may be more effective the earlier it is started after the onset of a squint or the discovery that your child needs glasses. A lazy eye cannot normally be treated after the age of 7 years.

How should the patch be worn?

The patch should be worn over the eye, stuck on the face with the glasses on top, if worn. A patch stuck over the glasses is not very helpful as the child tends to find a peephole and continues to look with the good eye.

Things to watch when your child is wearing a patch:

Be patient with your child as they may find some tasks more difficult than usual. They may be less co-ordinated and need extra supervision. It is not advisable to let your child play outside, riding their bicycle etc, when wearing their patch.

What should my child do when wearing the patch?

Visual activities such as colouring, drawing, reading and computer games are helpful while the patch is being worn.

How much patching will my child need?

The treatment of Amblyopia is an individual process that can last years rather than months. Your orthoptist will advise you how long your child needs to wear the patch each day and when your child needs to return for a follow up appointment.

How does wearing a patch affect my child?

Patching may be upsetting for your child and yourself. Initially he/she may not like being forced to look with their weaker eye, however it is the only way to ensure that your child will have two useful eyes as an adult. Enlist the help of family/friends, try to stick to a routine and make it feel like a game. Reward charts using stickers can also be helpful.

Vision can improve with patching but may reduce once treatment has stopped. In these circumstances patching will be restarted at your next appointment. You should try not to promise your child that he/she would never need the patch again.