

Patient Information

Squint Surgery (Adults)

You are considering having surgery for a squint (sometimes called a 'turn' or 'lazy eye'). This is where the eyes are not well aligned. There are two main reasons for having this surgery, one is sometimes described as 'cosmetic' (or more accurately, 'reconstructive', to restore a more usual appearance to the eyes) and the other is to treat double vision caused by the eyes being out of alignment.

Squint surgery does not improve the vision in either eye or remove the need for glasses, though glasses may need alteration after the surgery.

If you have been placed on the waiting list for squint surgery, you will be notified of the admission date before the operation. This is normally within three to four months of being placed on the waiting list. You may be asked to come to clinic for a pre-operative visit, so please bring any glasses or contact lenses you wear with you. **Please keep this appointment, as failure to attend may result in your operation being deferred.**

On the admission date, you should attend the Day Case Surgery Unit at Russells Hall Hospital at the time stated on the admission letter.

The surgery is done as a day case. You will need to bring slippers, a dressing gown and any medications that you are using.

The operation

The operation will be done under a general anaesthetic – i.e. you will be asleep.

The operation is done on the muscles of one or both eyes. The eye muscles are just under the white (conjunctiva) of the eye. The surgeon either strengthens or weakens the muscle according to the type of squint.

You may have a pad over your eye when you wake up after the operation. The eye will usually look red, and you will usually be given an ointment to use while the eye heals. The stitches may be visible and can take four to six weeks to dissolve after surgery.

Follow up care

On leaving the hospital, you will be given an appointment to attend the Eye Clinic three to four weeks after the surgery. You will usually see the orthoptist and possibly the doctor at this visit.

After squint surgery, most patients will need a week away from work. This may be affected by the type of work you do, and it may be worth discussing this in further detail when you are placed on the waiting list.

Swimming should be avoided for the first month after surgery.

Adjustable squint surgery

In some adult squint operations (and occasionally in teenagers) it is useful to be able to modify the surgical outcome after the patient has woken from their anaesthetic following an early assessment of the initial surgical result. This is called 'adjustable' surgery. The surgeon will discuss this with you prior to the surgery if this may be required for your operation. Where adjustable surgery is performed, the surgeon operates on the eye muscles as for standard squint surgery, but does not tie permanent knots in the sutures at the end of the operation. Instead, temporary knots are tied that allow adjustment later.

Where such surgery is performed, the adjustment process is carried out with the patient awake, but with a local/topical anaesthetic (multiple drops are administered to the eyes(s) to achieve this). This is usually uncomfortable but not painful. The adjustment is performed on the same day as the operation, and generally this is still a 'day case' procedure.

A number of adjustments may be required after the operation.

In some cases, but most commonly, two or less are required (frequently, none are required, though the sutures still need a final knot tied by the surgeon in such cases). Adjustable surgery is not suitable for all patients or all squint operations, even if it is planned pre-operatively.

Risks of squint surgery

Every operation has risks, and these are the main ones for squint surgery:

- Around one in five operations may result in less of an effect being achieved than expected. Less commonly, the eye drifts the opposite way. In either case, there may be a need for further surgery to re-align the eye. If further surgery is needed, it may be done from soon after the initial surgery to many years later.
- Occasionally, a patient may experience double vision after squint surgery. This is often temporary. In some cases, this can be persistent and can be a significant problem. In extreme cases, further surgery or other treatments may be required to minimise the effects of the double vision.
- Rarely, the white of the eye is left permanently slightly pink or scarring on the white of the eye may be visible, though this usually resolves over time.
- Extremely rarely, the vision in the operated eye may be permanently damaged after surgery. Infection (where a germ gets into the eye) can cause this.

What if I have any problems or questions after reading this leaflet?

If there is anything you do not understand, or you are concerned or worried about any part of the treatment, contact:

The **Urgent Referral Clinic** team at Russells Hall Hospital Eye Clinic on **01384 456111 ext. 3633**.

Eye emergency, out of hours

In case of an eye emergency after the closing hours of the Eye Clinic at Russells Hall Hospital (including weekends and bank holidays), please contact:

Birmingham and Midland Eye Centre on 0121 507 4440

The doctor on call is usually based at the Eye Centre, City Hospital, Dudley Road, Birmingham. They may need to call you back, and if necessary, they will arrange for you to visit them.

Note: the information in this booklet is provided for information only. The information found is **not** a substitute for professional medical advice or care by a qualified doctor or other health care professional. **Always** check with your doctor if you have any concerns about your condition or treatment. This is only indicative and general information for the procedure. Individual experiences may vary and all the points may not apply to all patients at all times. Please discuss your individual circumstances with you eye doctor.

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<http://dgft.uk/services-and-wards/ophthalmology/>

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