

WHAT IS AMBLYOPIA?

AMBLYOPIA TREATMENT FOR:

CHILD'S NAME: _____ PATCH THE _____ EYE FOR _____ HOURS PER DAY.

WHAT IS AMBLYOPIA?

Amblyopia is an early childhood condition, where the vision does not develop properly. It usually occurs in one eye, but it can occur in both. Sometimes referred to as lazy eye, amblyopia affects about 1 in 25 children.

Amblyopia is not due to a disease of the eye but is the name given to describe poor vision which does not improve by wearing glasses. It occurs when normal visual development is prevented or disrupted in early childhood.

WHAT CAUSES IT?

A squint is the most common reason for one eye to be amblyopic, but it can also occur when one eye is more long or short sighted than the other, or more rarely if an obstacle blocks the vision such as a cataract or droopy eyelid.

WILL IT GET BETTER ON ITS OWN?

No – if left untreated, your child may have permanently damaged sight which cannot be corrected when he/she is older.

HOW IS IT TREATED?

Occlusion (patching) is used to treat amblyopia. The sight will improve if your child uses the eye more, as it is the lack of proper use, that has caused it to become lazy. A patch worn over the good eye will stimulate the vision in the weaker eye. If your child has glasses it is essential that these are worn as usual, including the time during which the patch is worn. To achieve the best results, treatment should be carried out before seven years of age. Treatment may be less effective after the age of eight.

ARE THERE ANY ALTERNATIVES?

- Fabric patches, which go over the glasses can be given if child is uncomfortable with patches on skin.
- Atropine eye drops may be prescribed for use in the stronger eye. Atropine is a cycloplegic drug that dilates the pupil and blurs the image in the non-amblyopic eye. Your Orthoptist will discuss and decide with you, which method of amblyopia treatment is most suitable for your child.

WHAT SHOULD YOUR CHILD DO WHEN WEARING A PATCH?

Drawing, reading, colouring, computer games or any other detailed activity which will encourage the eye to work hard. If your child's sight is very poor, it is best for him/her to play with things that are big and bright, so they can be seen more easily at first. Page 2 of 3

HOW MUCH PATCHING WILL YOUR CHILD NEED?

This varies from child to child. The length of time a patch will need to be worn depends on the age of your child and the level of vision in the amblyopic eye. The patch should be worn under the glasses. The Orthoptist will see your child regularly to monitor progress.

DOES PATCHING REALLY WORK?

Patching will only work, if your child wears the patch as instructed. If started at an early age, patching is usually successful.

Patching will only help your child's amblyopia (lazy eye) and **will not** improve the squint or lessen the need for glasses. Squints are treated with glasses and/or surgery.

DIFFERENT KINDS OF PATCHES

Various kinds of patches are available, and your child may need to try a few to see which one suits your child best. Your Orthoptist will advise you on this.

A QUICK SUMMARY

- Check you are certain which eye to patch
- Use a clean patch every day.
- Should you run out of patches, contact the Orthoptist for some more, please do not wait until your child's next appointment.
- Do make sure that your child cannot peep around the patch.
- If your child wears glasses, then these must still be worn. Usually the patch is worn directly on the face with the glasses on top.
- To encourage the vision to improve, it helps if your child does close work such as reading writing or colouring.
- The patch should be worn as directed, unless your child is ill or has an eye infection.

SOURCES OF INFORMATION

For more useful information on squints.

www.squintclinic.com

IMPORTANT INFORMATION

The information in this leaflet is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Your comments!

We are always interested to hear your views and feedback. If you have any comments about our leaflets or service, please scan QR code below.



Please ask your nurse or doctor if you have any further questions.

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