

# Squint Surgery for Children

An information guide



# Squint Surgery for Children

Your child has been put on the waiting list for surgery for correction of squint. This leaflet aims to answer any questions you may have in relation to the operation.

## **Why does my child need surgery?**

Your child has a muscle imbalance that has resulted in one of the eyes turning in, out, up or down. The consultant has now decided that he/she would benefit from an operation to correct the imbalance.

Other treatment may also be carried out in conjunction with surgery as follows.

**Patching** – The outcome of surgery is generally better if there is a good level of vision in the squinting eye. This involves covering the good eye with a pad to encourage the other eye to work.

**Glasses** – If your child wears glasses, these should be worn as directed by your consultant as the operation will correct the amount that the eye turns when he/she is wearing them.

In a few cases, neither of the above treatments are necessary and surgery is offered to you and your child once we are happy that the vision development is satisfactory and that the squint is not getting any worse.

## **When will my child have the operation?**

He/she has been put on the waiting list. The waiting time for this surgery varies between consultants and you should have been given an approximate waiting time when they were added to the waiting list.

## **How long will he/she be in hospital for?**

Most squint surgery is done as a day case. If your child's general health changes before the operation, you must visit your GP. If your GP thinks that your child is not fit for surgery or you have any queries, you must contact the eye unit immediately.

## **Can I stay with my child?**

We encourage you to stay with your child. Please make arrangements for the care of any other children for the whole day.

## **What type of anaesthetic will it be?**

All squint surgery is done under a general anaesthetic. This means that your child will be put to sleep throughout the entire operation.

As your child will be having an anaesthetic, your child cannot eat for 6 hours before the operation and may be offered clear fluids only until 2 hours before the operation. You will be sent details of this prior to admission.

## **What do I need to bring?**

Admission papers, current medication, a note of any drug allergies, their pyjamas and/or comforter ie. teddy bear.

## **What does the operation involve?**

Squint surgery is the repositioning of the eye muscles. This involves making a small incision in the tissue covering the eye, which allows the surgeon to get to the underlying muscles.

## **Possible risks from surgery**

- Under/over correction - possible
- Infection - rare
- Bleeding - rare
- Further surgery may be required - possible.

## **Will he/she have an eye pad on?**

Your child may have an eye pad on after the operation for a short period of time. If so, it will be removed as soon as possible by your child's named nurse, as eye pads can be distressing for your child. Initially, you should try to stop him/her rubbing the eye.

## **After the operation**

Your child will normally bounce back to normal life quite quickly. He/she should be fit enough to return to school after a week.

You should avoid situations where there is a risk of getting something in their eye, e.g. sand pit at school. Avoid getting the eye wet, bathe rather than shower and be careful when washing hair. Swimming should be avoided for 4 weeks after the operation.

You will be given drops/ointment to put in the eye for two weeks after the operation to help reduce the risk of infection and inflammation.

He/she will be sent an appointment to be seen in the clinic by the doctor or the orthoptist. This will be approximately two weeks after your child's operation.

If you have any queries, please do not hesitate to telephone.

## **Contact Numbers**

### **The Royal Oldham Hospital, Oldham**

**A&E Department - 0161 627 8933**

Friday 5pm until Monday 9am

**Oldham Integrated Care Centre Eye Clinic -0161 621 3721**

Monday to Friday 9am until 4:30pm

### **Rochdale Infirmary, Rochdale**

**Eye Clinic - 01706 901757**

Monday to Friday 9am until 5:00pm

**Eye Ward - 01706 901765**

Monday to Friday 8am until 8pm (answer machine after 8pm)

**Urgent Care Centre - 01706 517005**

Monday - Friday after 8pm. Friday 8pm until Monday 9am

**Fairfield General, Bury**

**A&E Department - 0161 778 2600**

Monday - Friday after 8pm. Friday 8pm until Monday 8am

**Eye Ward and Clinic - same contact details as Rochdale Infirmary**

**Tameside Hospital Foundation Trust**

**A&E Department - 0161 922 6000**

Available 24 hours

**Eye secretary - 0161 331 6388**

**Notes:**

**If English is not your first language and you need help, please contact the Interpretation and Translation Service**

Jeśli angielski nie jest twoim pierwszym językiem i potrzebujesz pomocy, skontaktuj się z działem tłumaczeń ustnych i pisemnych

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Dacă engleza nu este prima ta limbă și ai nevoie de ajutor, te rugăm să contactezi Serviciul de interpretare și traducere

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For advice on stopping smoking contact the Specialist Stop Smoking Service on 01706 517 522

**For general enquiries please contact the Patient Advice and Liaison Service (PALS) on 0161 604 5897**

**For enquiries regarding clinic appointments, clinical care and treatment please contact 0161 624 0420 and the Switchboard Operator will put you through to the correct department / service**

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The NCA brings together Salford Royal NHS Foundation Trust and the hospitals and community services of The Royal Oldham Hospital, Fairfield General Hospital in Bury, and Rochdale Infirmary (currently part of The Pennine Acute Hospitals NHS Trust).

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