

SQUINT

What is squint?

Squint is misalignment of the eyes where the two eyes are pointed in different directions. Though it is a common condition, which affects 4 percent of children, it may also appear later in life. The misalignment may be permanent, noticeable always or it may be temporary occurring occasionally., The deviation could be in any direction inward, outward, upward or downward.

In majority of cases, the squint presents alternately in either eye, while in others it is always present only in one eye. If left untreated, it leads to permanent visual loss, a condition called amblyopia or lazy eye.

Causes

Squint may be caused by any of the following;

- Weakened muscles or abnormal nerve impulses to the eye muscles.
- Heredity
- Blurred or poor vision
- Conditions inside the eye such as cataract, macular diseases

Symptoms

The primary symptom of squint is an eye that is not straight. Sometimes, youngsters will squint or close one eye in bright sunlight. Faulty depth perception may be present. Some children turn their face or tilt their head in a specific direction in order to use their eyes together.

Treatment

Parents often get the false impression that a child may “outgrow” the problem. If a child has the two eyes pointed in different directions, examination by an ophthalmologist is necessary to determine the cause and to begin the treatment.

The goals of treatment are to preserve vision, straighten the eyes and to restore binocular vision. Treatment of squint depends upon the exact cause of the misaligned eyes. It can be directed towards unbalanced muscles or other conditions, which are causing the eyes to point in two different directions. After a complete eye examination, including a detailed study of the inner parts of the eye, an ophthalmologist can recommend appropriate optical, medical or surgical therapy.

Non Surgical treatment

Some squints are caused because of retractive errors. In such cases, squint can be corrected by prescribing proper spectacles.

Surgical Treatment

Most of the patients require surgical correction. Surgery is done under general anaesthesia, in children and under local anaesthesia in cooperating adults. For general anaesthesia the child should be free from acute illness. Parents should inform the doctor if the child is having any systemic problems like cardiac disease or epilepsy.

- Routine investigations before surgery include blood test and X ray of the chest.
- Surgery is done either on both eyes simultaneously or on one at a time.
- Surgery is done on eye muscles situated outside the eyeball. The actual principle of surgery is to weaken the stronger muscle and strengthen the weaker muscle. Either one or more than one muscle is operated depending on the type and severity of squint.
- Eye is bandaged for one day after surgery.
- After surgery, eye drops are to be used for one month.
- Oral medication is not required except for a few cases.
- Hospital stay is only for two days.
- First follow up is after one month.
- If amblyopia is present frequent follow up for longer duration is required.
- There is no necessity to restrain the normal activity of the child

Important facts

Loss of vision is preventable if squint is detected and treated before two years of age. As the child grows older, it becomes more difficult to treat squint and establish binocularity. However, cosmetically straightening the eyes is possible at any age. There are no known preventive measures for squint, but misaligned eyes can be straightened and loss of vision from amblyopia can be prevented if treatment is begun early.