

Squint surgery or eye muscle surgery to adjust eye position (adults)

Ophthalmology

Produced: April 2022

Information for Patients

Review: April 2025

Leaflet number: 1288 Version: 1

This leaflet aims to provide you with more information about your squint operation. The leaflet does not cover everything, as every patient is different. Your consultant and the orthoptist will discuss your particular case with you.

What is a squint?

A squint is when one eye is not pointing in the same direction as the other one. The eye may turn in any direction, but most often turns inwards (towards the nose), or outwards (towards the ear). This can happen all of the time, or it may come and go.

What does squint surgery aim to do?

- The most common aim of surgery is to make your eyes straighter (improve the alignment). This is done by operating on the muscles that control the movement of the eyes.
- In some cases surgery may be done to reduce symptoms of double vision, or to improve the way in which the 2 eyes work together.
- Occasionally surgery may be done to improve your head position, when you are having to hold your head at a particular angle, usually because of abnormal eye movements or wobbly eyes (nystagmus).

**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals
To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk

- Occasionally surgery will involve using stitches that need to be adjusted once you are awake. If this is the case then it will have already been discussed with you.

The aim in your specific case will be discussed with you in more detail before the operation.

Please note, squint surgery **does not**

- improve how clearly you see.
- restore the vision in a lazy (amblyopic) eye. A lazy eye is usually treated with patching therapy, which only works in childhood.
- change your glasses prescription.

What are the risks involved in squint surgery?

As with any operation, there is a risk of complications during or after squint surgery. The likelihood of the various complications depends largely on the type of squint you have. Your surgeon and/or your orthoptist will discuss your particular case with you in more detail before the operation.

The risk of damage to your vision is very low, as the operation is done on muscles which are on the surface of the eye. Squint surgery is not done inside the eye.

In most cases the position (alignment) of the eyes will improve after surgery. However, there may still be a small squint or the eye could turn in the opposite direction.

The most common complications are:

- Need for further surgery - for some people, more than 1 operation may be needed to get the best result.
- Double vision - this usually goes away by itself after a few days to a few weeks. If it continues then further treatment may be necessary.
- Persistent redness or visible scarring. It is normal for the eye to be red after surgery, but occasionally this can last longer than expected, especially if this is not the first squint operation you have had.
- Infection - this is uncommon, but if it occurs it may need treating with antibiotics.

More serious complications are very rare, but include:

- Damage to the eye-ball (which can cause varying degrees of loss of sight).

- A slipped or lost muscle, which happens if the very elastic eye muscle moves from its new position or springs back in the eye socket (which then needs more surgery).
- Reactions to the general anaesthetic.

What happens before the surgery?

Before your surgery date you will be asked to come for a pre-operative assessment.

At this visit you will be assessed by a nurse, who will ask about your general health and your medical history, and make sure that you are fit for a general anaesthetic. They will also give you information about what to expect on the day, what to bring with you, and advise you about the latest time you can eat and drink and when to take any regular medication that you may be on.

If necessary, you will also see an orthoptist. Along with other tests, the orthoptist will be measuring your size of your squint, to make sure your condition is stable.

This appointment will also be an opportunity for you to ask any questions you may have and for us to explain anything that you are not sure about.

What will happen on the day of my operation?

When you arrive you will be made comfortable in the Ophthalmic Suite.

A **nurse** will explain to you what is going to happen and may check your temperature, pulse and breathing.

The **anaesthetist** will check your health and will explain about the anaesthetic. Squint surgery is done under a general anaesthetic, meaning that you will be asleep during the procedure. The anaesthetic is given either by an injection into the back of the hand or by placing a mask over the nose and mouth. The anaesthetist will choose the best method for you.

You will see the **eye surgeon**, who will answer any questions you may have, make sure that you understand what is going to be done and confirm your consent to the operation.

Shortly before going to the operating theatre, the nurse will give you a theatre gown for you to change into. Then you will be taken to theatre and given the anaesthetic.

You will be cared for by a surgical team: the surgeon, the anaesthetist, nurses, theatre staff and ward staff. As we are a teaching hospital there may also be trainees and medical students present.

The operation usually takes between 1 and 2 hours (including anaesthetic time) depending on the procedure being done. The surgeon will be able to tell you approximately how long it will take.

Please note, your eye is NOT taken out during surgery.

When the operation is finished, you will be taken to the recovery room to be monitored as you wake up from the anaesthetic.

When can I go home?

You will be able to go home once you feel well and are eating and drinking. The nurses will monitor your progress and let you know when you are ready to go. Most people can go home between 4 and 6 hours after the operation. However if you are feeling unwell or are not able to keep fluids down then you may need to stay overnight, so it is a good idea to come prepared for this possibility. The nurse will have discussed this with at your pre-operative assessment.

You will need to arrange your own transport to and from the hospital, but must not use public transport to go home after the operation. **Do not drive.**

Because of the general anaesthetic you should have another adult in the house with you for 24 hours after your surgery.

Once home you can eat and drink as normal.

What should I expect after the operation?

It is normal for the eye(s) to be very red after surgery. This will gradually improve and is generally a lot better after a few weeks, though it can take several months for the eye(s) to fully recover.

Some pain after surgery is normal. Please make sure that you have some suitable pain relief medication (such as paracetamol and ibuprofen) ready to use when you get home. It is usual for the eye(s) to feel gritty and uncomfortable, and it is common to have a headache. You may feel quite tired for a day or so.

The eyelids can become sticky and crusted around the lashes, in which case they will need bathing. Use clean cotton wool soaked in cooled, boiled water, to gently clean the eyelids.

You will have some eye drops or ointment to use after the surgery, usually for about 4 weeks. These are to reduce the inflammation and the risk of infection. You will be shown how to use these before you leave the hospital.

There is no harm in watching television or reading, although it is best to vary activities rather than spend long periods of time doing the same thing. You may experience blurred or double vision initially. This should settle down in the first few days. If it does not, please contact the eye clinic for advice.

You will be seen again in the out-patient clinic usually within about 2 weeks of the surgery, depending on the consultant and when the surgery was. This will be arranged for you before you leave the ward.

Do I need to avoid anything after surgery?

Swimming, contact sports, windy, sandy or dusty environment, eye make-up and contact lenses should all be avoided for 4 to 6 weeks.

Strenuous activities (including the gym) should be avoided for 2 weeks. However, please keep active and mobile from the time you are sent home from the hospital.

Your hair should not be washed for 2 days. If possible wash your hair with your head tilted backwards and try to ensure that no soap or shampoo enters the eye for the first 2 weeks.

When can I go back to work?

Most people find that they need 1 week off after the surgery, although if you feel ready then you can go back sooner, unless your eye doctor has advised otherwise. If you work in a particularly dry, dusty or smoky environment then you may need longer.

Please remember to ask for a sick note, if needed, when you see the doctor on the day of surgery.

Contact Us

Although problems after squint surgery are uncommon, if you are concerned about anything after your operation then you can discuss this with your GP.

You can also contact:-

The Orthoptic Department: 0116 258 5277 (Monday to Friday, 8.30 am to 4.45 pm)

The Emergency Eye Department: 0116 2586273 (Monday to Friday 8.00am to 4.30pm, Saturday and Sunday 8.30am to 12.00midday)

Out of these hours you can contact the main Emergency department through the hospital switchboard: 0300 3031573 or call 111

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
على هذه المعلومات بلغةٍ أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل

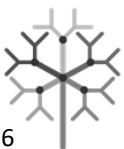
જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ।

Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

Previous reference:

If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email equality@uhl-tr.nhs.uk



LEICESTER'S
RESEARCH*

Leicester's Hospitals is a research active trust so you may find research happening on your ward or in your clinic. To find out about the benefits of research and become involved yourself, speak to your clinician or nurse, call 0116 258 8351 or visit www.leicestersresearch.nhs.uk/patient-and-public-involvement