

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

Ophthalmology

Information for Patients

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This leaflet will give you information about your squint operation. It does not cover everything. This is because every patients needs are different. Your consultant and the orthoptist will talk about your 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. Most often it 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. We do this by operating on the muscles that controls how the eye moves.
- In some cases we may do surgery to reduce symptoms of double vision. Or to improve the way the 2 eyes work together.
- Sometimes we do surgery to improve your head position. This is for when you are having to hold your head at a certain angle because of abnormal eye movements or wobbly eyes (nystagmus).

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- Sometimes we do surgery using stitches that need to be adjusted once you are awake. If this is the case then we would have already spoken about it to you before.

We will talk to you about the reason for your surgery.

Squint surgery does not:

- It does not improve how clearly you see.
- It does not restore the vision in a lazy (amblyopic) eye. A lazy eye is often treated with patching therapy. This only works in childhood.
- It does not change your glasses prescription.

What are the risks involved in squint surgery?

As with any surgery, there is a risk of complications during and after. Your complications depend on the type of squint you have. Your surgeon and/or your orthoptist will talk about your case with you in more detail before the surgery.

The risk of damage to your vision is very low. This is because the surgery 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 may turn in the opposite direction.

The most common complications are:

- **Need for more surgery:** More than 1 surgery may be needed to get the best result.
- **Double vision:** This often goes away by itself after a few days or a few weeks. If it does not go away then more treatment may be needed.
- **Lasting redness or visible scarring.** It is normal for the eye to be red after surgery. Sometimes this can last longer than expected. This can be the case if this is not the first squint operation you have had.
- **Infection:** This is uncommon. If it does happen we will give you antibiotics to treat it.

More serious complications are very rare, but include:

- **Damage to the eye-ball.** This can cause different degrees of loss of sight.
- **A slipped or lost muscle.** This happens if the very elastic eye muscle moves from its new position or springs back in the eye socket. You would need more surgery to treat this.
- **Having a reaction to general anaesthetic.**

What happens before the surgery?

Before your surgery date we will ask you to come for a pre-operative assessment.

A nurse will assess you. They will ask about your general health, your medical history, and make sure you are fit for general anaesthetic. They tell you about what to expect on the day, what to bring with you, and about the latest time you can eat and drink. They will tell you when to take any regular medication that you may be on.

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

You can also ask any questions. We can explain anything that you are not sure about.

What will happen on the day of my surgery?

- You will need to come to the Ophthalmic Suite, Balmoral Level 6.
- A **nurse** will tell you what is going to happen. They may check your temperature, pulse and breathing.
- The **anaesthetist** will check your health. They will tell you about the anaesthetic. We do squint surgery under general anaesthetic. This means you will be asleep during the surgery. We give the anaesthetic 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.
- The **eye surgeon** will see you. You can ask them any questions you have. Make sure that you understand what is going to happen. You will need to give your consent for the surgery.

- We will then take you to the operating theatre. The nurse will give you a theatre gown for you to change into. We will then take you to theatre and give you the anaesthetic.
- The surgical team is made of the surgeon, the anaesthetist, nurses, theatre staff and ward staff. They will all take care of you. As we are a teaching hospital there may also be trainees and medical students present.
- The surgery often takes between 1 and 2 hours. This includes when we give you anaesthetic. The surgeon will be able to tell you how long it may take.
- **Please note, your eye is not taken out during surgery.**
- When the surgery is finished, we will take you to the recovery room. We will monitor you until 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 surgery. However if you are feeling unwell or are not able to keep fluids down then you may need to stay overnight. It is a good idea to come prepared for this possibility. The nurse will have talked to you about this with you at your pre-operative assessment.

You will need to arrange your own transport to and from the hospital. **You cannot use public transport to go home after the surgery. You cannot drive after the surgery.**

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 surgery?

- It is normal for the eye(s) to be very red after surgery. This will slowly improve. It will get a lot better after a few weeks. It can take several months for the eye(s) to fully recover.
- Some pain after surgery is normal. Have some suitable pain relief medicine ready to use when you get home. This can be paracetamol or ibuprofen. It is usual for the eye(s) to feel gritty and uncomfortable.

- 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. You will need to clean this. Use clean cotton wool soaked in cooled boiled water, to gently clean the eyelids.
- We will give you eye drops or ointment to use after the surgery. This is often for about 4 weeks. They help to reduce inflammation and the risk of infection. We will show you how to use these before you leave the hospital.
- You can watch TV and read. It is best to do different activities rather than spend long amounts of time doing the same thing. You may experience blurred or double vision at the start. This should settle down in the first few days. If it does not, please contact the eye clinic for advice.
- We will see you again in the out-patient clinic. This is often within 2 weeks of the surgery. This will depend on the consultant and when the surgery was. We will arrange this for you before you leave the ward.

What must I avoid after surgery?

For 4 to 6 weeks after surgery you must avoid:

- swimming
- contact sports
- windy, sandy or dusty environment
- eye make-up
- contact lenses

You should avoid strenuous activities like the gym for 2 weeks. However, please keep active and move around from the time you are sent home from the hospital.

You should not wash your hair for 2 days. If possible wash your hair with your head tilted backwards. Try to make sure that no soap or shampoo goes into 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. If you feel ready then you can go back sooner, unless your eye doctor has advised otherwise. If you work in a dry, dusty or smoky environment then you may need longer time off.

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



Contact Us

If you are concerned about anything after your operation you can talk with your GP. You can also contact:

The Orthoptic Department: **0116 258 5277**

Monday to Friday, 8.30 am to 4.45pm

The Emergency Eye Department: **0116 258 6273**

Monday to Friday 8.00am to 4.30pm

Saturday and Sunday 8.30am to 12.00pm (midday)

Out of these hours you can contact the main Emergency department through the hospital switchboard: **0300 303 1573** or **call 111**

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