

Strabismus or squinting eyes

About strabismus

Ocular deviation (strabismus) is not a trivial aesthetic anomaly. In most cases, it is indicative of a disorder of vision, which may be severe.

In Cameroon, 1-2% of children have strabismus. It can be hereditary, congenital, or appear during childhood.

A baby does not see well at birth and learns to see with time. For vision to develop normally, the retina of both eyes must be stimulated by light and both eyes must look straight. If an eye deviates constantly, the brain will delete the image that comes from this eye and vision does not develop normally. It is said that there is amblyopia.

Past the age of five, the visual acuity of this eye cannot be regained. The patient with strabismus thus becomes a true functionally one-eyed person.

What to do?

It is therefore necessary that a child with strabismus be seen and managed by the specialist. Management should start from birth if possible and in any case before the age of five.

The first step in treating strabismus is the prescription of a pair of eye glasses (total optical correction), which must be worn constantly. In some types of strabismus (accommodative strabismus), these glasses correct the deviation and there is no need for any further form of treatment. In addition, one must look for and treat amblyopia until visual acuity is achieved between the two eyes. If the deviation persists at this stage despite the constant wearing of the full optical correction, surgery is performed to align the eyes. This surgery is done under general anesthesia and it may take more than one operation to achieve a good result (straight eyes).

It is important to note that surgery is not done inside the eyeball, but rather on the muscles that insert on the surface of the eyeball. Surgery consists of strengthening the weak muscles (underacting) and weakening the tight (overacting) muscles. When these conditions are respected, the results of the surgery are excellent both aesthetically and functionally.

What Next?

In the days following surgery, the patient may have red eyes and may complain of foreign body sensation, tearing, discomfort and double vision.

These signs usually regress with local treatment. (Eye drops and ointments)

Complete healing of the conjunctiva occurs over several weeks.

Early and prolonged follow up by the ophthalmologist and orthoptist is essential. The close collaboration of parents is fundamental for the child to accept treatment especially the constant wearing of the eyeglasses, occlusion therapy or rehabilitation glasses.

Poor monitoring of treatment always results to partial or complete failure. Even after a successful medical or surgical treatment, monitoring is essential until adulthood because of the risk of recurrence of strabismus and the persistence of visual disturbances.

Surgery does not exempt one from subsequent wearing of eye glasses but allows the best possible vision for the patient.

Specific case of an adult

Strabismus in adults is often a neglected childhood strabismus, or a relapse of treated childhood strabismus favored by various conditions such as the discontinuation of eyeglasses, the onset of presbyopia and visual fatigue.

Strabismus in adults may also indicate acquired eye muscle paralysis.

Surgery may be necessary to correct the ocular deviation and the surgery obeys the same principles as in childhood strabismus surgery. However, some peculiarities must be underlined:

- The patient must be willing and compliant.
- Both eyes must be functional without severe amblyopia.
- Improvement in aesthetic appearance is assured.
- Double vision is more common than in children and may require additional treatment if it persists.

Your ophthalmologist is ready to answer any additional questions you would like to ask her/him.