

Eye Movement Problems following Stroke

Double Vision and Eye Movement problems following Stroke

You have been diagnosed with an eye movement defect and require further assessment in the Orthoptic [eye specialist] department.

1. What is an eye movement defect?

Normally, the two eyes move together as a pair. However, if an eye muscle or the nerve supplying an eye muscle is damaged, this can stop that eye from moving properly. If only one eye is affected, meaning one eye can move but the other cannot, this can result in double vision.

If both eyes are affected, double vision may not be experienced, but the eyes will not be able to move in a certain direction of gaze.

An eye movement defect following stroke is usually the result of damage to the nerve as it travels from the brain to the eye muscle.

2. Will this get better?

Eye movement defects following stroke often improve quickly without intervention. For eye defects which persist, treatment may be possible with special glasses or prisms .

3. What happens next?

You will be assessed in the Orthoptic department. An Orthoptist is an eye professional specially trained to diagnose and treat eye movement defects. The Orthoptist will examine your eye movements and give treatment and advice as necessary.

This appointment will be sent to you when you have been discharged from the stroke unit.

For further advice please contact:

Mrs. Fiona Beckett or Dr Eve Panesar
Orthoptic Department
Outpatients
Harrogate District Hospital

Tel 01423 553452

If you require this information in an alternative language or format (such as Braille, audiotape or large print), please ask the staff who are looking after you.