

# Amblyopia 'Lazy eye'

*The purpose of this leaflet is to explain the treatment options available for Amblyopia*

## What is Amblyopia?

A 'lazy eye', also known by its medical term amblyopia, is a vision condition that occurs in childhood. A lazy eye in children can develop between birth and the age of around seven years old, when one eye is used less than the other. As a result, the affected eye is not able to build a strong link with the brain and will have reduced vision. The signs of amblyopia are not always obvious because the child is functioning using their dominant eye.

Typically, amblyopia only affects one eye, although in some instances, both eyes may be affected.

## What causes Amblyopia?

**Strabismic (turning of the eye/squint) amblyopia-** This is the most common being a muscle imbalance, resulting in the eyes being unable to work together as a pair.

**Refractive amblyopia** –This is where one eye has a significantly reduced sharpness of vision due to differences in glasses prescriptions between the eyes such as: long-sightedness, short-sightedness or astigmatism.

**Stimulus deprivation amblyopia-** This is caused by something blocking the pathway of light into the eye, such as a cataract, and is typically the most severe of the amblyopia types.

## How is Amblyopia treated?

### Glasses

The first step in treating a lazy eye is to check if your child needs glasses. In some cases wearing the glasses will improve the vision in the weaker eye and this may be the only treatment needed.

If the vision in the lazy eye is not improved by wearing glasses full time alone for a period of usually around 18 weeks, or if glasses are not needed, the orthoptist will advise if further treatment is required.

### Patching (Occlusion Therapy)

This involves covering the eye with the better vision in order to encourage use of the lazy eye. The orthoptist will prescribe how many hours the patch is to be worn for a day. A sticky patch worn on the face, underneath the glasses, is the most effective type of patch- this avoids peeping around the patch. They come in various patterns and colours to encourage the child to keep it on.

### Atropine Sulphate 1% Eye Drops

Atropine eye drops are long-acting and blur vision in the better seeing eye and cause a dilation (widening) of the pupil, encouraging your child to use their lazy eye. This treatment is usually done on weekends for 6 months followed by a 1 month break, it is then recommenced as appropriate. Evidence suggest both patching and Atropine are equally as effective to treat Amblyopia. Not everyone will be suitable for this treatment the orthoptist will advise you.

### Will my child's Lazy eye improve?

If the amblyopia is picked up before the age of around seven the prognosis is better. In most cases the lazy eye will show signs of improvement if treatment is carried out as prescribed. Your child will have regular appointments in the eye clinic to check the progress and it is vital you attend them all. If treatment is not carried out there may be a risk of permanent reduced vision.

### How can I help my child with treatment?

- If they are old enough explain to them the reason
- Incentives such as sticker reward charts
- Distract them with tasks puzzles/reading/drawing/computer games
- If your child attends nursery or school – they can wear the patch during those hours.
- Encourage a routine

### Will the eye become lazy again once the treatment is stopped?

The orthoptist will monitor the vision after stopping treatment to ensure good vision is maintained. Your child will not be discharged until the vision is stable.



If you have any questions about Amblyopia please ask your Orthoptist or contact the Orthoptic Department on **01423 553452**