

## What will the eyes look like after squint surgery? CONT.

This can be washed off with saline or cool boiled water. The eyes will be blood-shot and appear "bruised" over the muscle(s) that were operated on and this will increase over the first two days after the operation.

The redness will go over 1 - 2 weeks though there may be a persisting pink area on the white of the eye for weeks to months after a squint operation, especially if a muscle was tightened (resected).

The eyes may appear much better aligned as soon as they are opened after the operation. Often there will be noticeable variation in the alignment with the eyes moving in and out a bit as the brain "learns" to control the eyes following the surgery. This variation usually settles in days to a week or so.

## What are needed after the operation?

Eye drops are occasionally prescribed following squint surgery.

Pain relief and eating after the operation are discussed above.

The only activity that your child should avoid for about two weeks after the operation is swimming. Chlorine can be quite irritating during this time.

Care should be taken with hair washing as soap and shampoo can also cause significant discomfort.

It is common for the eye(s) to be a little sticky after sleeping for a few days following the surgery. This does not mean that there is an infection. This discharge can be cleaned away with boiled water that has been allowed to cool and a cotton ball or clean face washer.

Your child can return to normal activities as soon as s/he feels up to it. It is common for children to have a quiet day or so after any operation.

## When will we know if the operation has been a success?

The best time to judge longer term success is at one month for convergent squints and six months after surgery for divergent squints. Unfortunately no matter how successful an operation has been for a turned eye there is always a small chance of the eye turning again at some time after the surgery, even many years later.

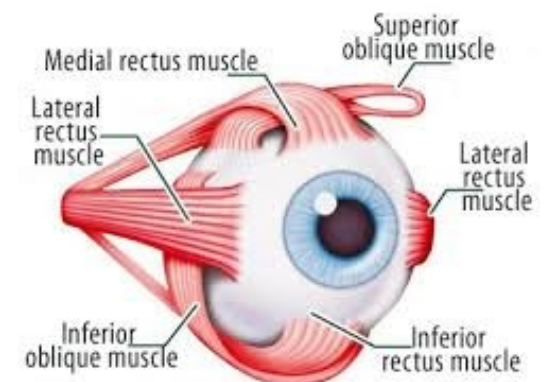


**UNIVERSITY  
OF MALAYA**  
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# SQUINT Surgery



## ANATOMY



## DEFINITION

A squint, also called strabismus, is where the eyes point in different directions. It's particularly common in young children, but can occur at any age.

One of the eyes may turn in, out, up or down while the other eye looks ahead.

This may happen all the time or it may come and go.

Treatment is usually recommended to correct a squint, as it's unlikely to get better on its own and it could cause further problems if not treated early on.

## SIGNS & SYMPTOM

The most obvious sign of crossed eyes is when the eyes appear to be pointed in different directions. There are, however, more signs of crossed eyes that can most often be observed in children, including:

- Eyes that do not move together
- Unsymmetrical points of reflection in each eye
- Tilting the head to one side
- Inability to gauge depth
- Squinting with only one eye

## CAUSES

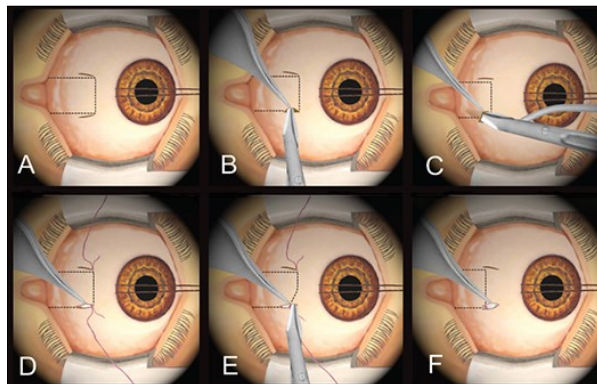
The exact cause of a squint isn't always known.

Some people are born with a squint and others develop one later in life. Sometimes they run in families.

In children, a squint is often caused by the eye attempting to overcome a vision problem, such as:

- short-sightedness – difficulty seeing things that are far away
- long-sightedness – difficulty seeing nearby objects
- astigmatism – where the front of the eye is unevenly curved, causing blurred vision

## STEPS OF SURGERY



A. Limbal traction suture is used to rotate the eyeball away from the field of surgery. Two small cuts are made at the upper and lower muscle margins. Size of cuts depends on amount of muscle to be displaced.

- B. With the two cuts as access points, the episcleral tissue is separated from the muscle sheath and the sclera with a blunt Wescott scissors.
- C. After the muscle borders have been identified, the muscle is hooked, and the check ligaments and intramuscular membrane are dissected 6 to 7 mm behind the insertion. The resulting tunnel allows a recession or plication to be easily performed.

## RECESSION

- D. For a recession, two sutures are applied to the superior and inferior borders of the muscle tendon as close as possible to the insertion.
- E. The tendon is detached using a Wescott scissors.
- F. After the amount of recession is measured, the tendon is reattached with two sutures to the sclera. The tendon must be stretched to keep the central part of the muscle from bowing backward.

## What will the eyes look like after squint surgery?

Most often no patch is required. There may be slightly blood stained tears for a few minutes after the operation and a little dried blood on the eyelids.