

Patient Advice and Liaison Service (PALS)

Please contact us if you need general information or advice about Trust services: www.bartshealth.nhs.uk/pals

Large print and other languages

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Na żądanie te informacje mogą zostać udostępnione w innych formatach, takich jak zapis większą czcionką lub łatwą do czytania, a także w innych językach. Aby uzyskać więcej informacji, porozmawiaj ze swoim zespołem specjalistów.

Macluumaadkaan waxaa loo heli karaa qaab kale, sida ugu akhrinta ugu fudud, ama far waa weyn, waxana laga yabaa in lagu heli luuqaado Kale, haddii la codsado. Wixii macluumaad dheeraad ah, kala hadal kooxda xarunta caafimaadka.

Bu bilgi, kolay okunurluk veya büyük baskılar gibi alternatif biçimlerde sunulabilir, ve talep üzerine Alternatif Dillerde sunulabilir. Daha fazla bilgi için klinik ekibinizle irtibata geçin.

یہ معلومات کے لیے، اپنی کلینیکل ٹیم سے بات کریں۔
ٹرنرپ اڑب ای ناس آ اور درخواست پر متبادل زبانوں میں بھی دستیاب ہو سکتی ہیں۔ مزید
یہ معلومات کے لیے، ایک بائیٹس ڈی سٹیم راف لداہتم نامول عم ہ

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Patient information

Children's vision and eye health

Orthoptics and Paediatric Ophthalmology

An overview of children's vision and common eye problems from babies to school age.



Babies' eyes – the first few months..

Visual behaviour

Babies can see when they are born but their focusing develops gradually. Your child will start to reliably fix and follow by the age of 2-3 months. An easy test you can do at home is to see if your baby's eyes follow your face or a bright colourful toy around the room or responds to a smile.

Squint / strabismus

A squint is when an eye turns and does not work with the other eye - this can be a turn towards the nose, outwards and less commonly upwards and downwards. In the first few months, when their focusing is developing a baby's eyes may squint sometimes, however if their eyes appear to squint all the time then this should be investigated with your health visitor or GP.

Babies eye checks

Your GP will perform an eye examination at the 6 week check. Here they will carefully inspect the eyes for any observed abnormality in appearance, lids or eye position, and will check for clear retinal reflex. If there are concerns or there is family history of serious eye problems then they will refer you in to our paediatric eye clinics.

Your health visitor will then perform a further eye examination at your child's health review, around the age of 1 year. They again will inspect for any abnormalities, observe visual behaviour and check reflections to indicate if any possible squint. They will also ask regarding any concerns you have and can refer into our paediatric eye clinics if necessary.

Family history of eye problems

Many eye conditions can be hereditary / 'run in the family', which is

Hospital Eye Clinics

Paediatric Ophthalmology is based in Eye Treatment Centre, Whipps Cross University Hospital, and within Barts Health Trust also runs from Newham University Hospital and Royal London Hospital. A GP or local optician can refer you into this service, as can other hospital specialties.

For all enquiries please contact:

Optical Services (Paediatric Ophthalmology, Optometry and Orthoptics), Eye Treatment Centre, Whipps Cross University Hospital.

- Tel: 0208 535 6710
- Email: whippscrossopticalservices@bartshealth.nhs.uk

Children's Eye Clinics (local contacts)

Community clinics are held at the following Health Centre's:

Waltham Forest

- **Silverthorn Medical Centre- E4 6UN**
2 Friars Close Tel. 020 8430 7210
- **Langthorne Health Centre- E11 4HX**
13 Langthorne Rd Tel. 020 8430 7510
- **Comely Bank Clinic – E17 9LY**
46 Ravenswood Rd Tel. 020 8430 7105
- **Wood Street Child Development Centre (CDC patients only) – E17 3LA**
6 Linford Rd Tel. 020 8430 7777

Redbridge

- **Wanstead Place Clinic – E11 2SW**
35 Wanstead Place Tel. 020 8926 1450
- **Loxford Polyclinic – 1G1 1EE**
45-49 Cleveland Road Tel. 020 8822 3880
- **Grovelands Child Development Centre (CDC patients only) – RM6 4XH**
Grove Road, Chadwell Heath Tel. 020 8822 3200

Your health visitor or GP will need to refer you into these clinics.

why your GP and health visitor will ask you about any family history. This refers to close family e.g parents and siblings.

Serious eye conditions that are congenital or occurred in childhood such as cataracts, glaucoma, retinoblastoma are requested to be referred by 6-8weeks of age.

Common childhood eye conditions such as squint, "lazy eye", refractive errors (glasses) including astigmatism are requested to be referred in around the age of 12 months.

Watery eyes

One in five babies are born with a tear duct that is not yet open in one or both eyes. This can cause watery or sticky eyes. You may see some sticky stuff in the corner of the eyes or eyelashes may be stuck together in newborns.

What is the tear duct?

The tear duct (nasolacrimal duct) is a tiny passage running from the inner corner of the eyelids to the inside of the nose. It drains away the tears and mucus that the eye constantly produces.

Is it serious?

No. The problem does not damage the eyes or the vision and is harmless. In most babies, the condition clears by itself before they are one or two years old.

Possible problems

The eyelid skin may become sore because of the constant wetness. The eye may sometimes be slightly pink, but no treatment is needed for this. Occasionally, there may be conjunctivitis (red, inflamed eye) which may require antibiotic drops, prescribed by your GP. Very rarely, the tear sac can become swollen and infected (dacryocystitis).

What treatment is needed?

It will help to massage the tear duct 5 or 6 times a day. Apply firm

pressure to the inner corner of the eyelids, moving towards the nose and then downwards. Eye drops are not required, even if the discharge is mucky, unless there is conjunctivitis. If the skin becomes sore due to wetness, apply Vaseline to protect it.

If a blocked tear duct does not improve after the age of one year, and the symptoms are bad enough, probing of the tear duct can be performed under general anaesthesia. Your GP will refer you in to Whipps Cross Hospital to be examined.

Chalazions

What is a chalazion?

A chalazion is a harmless cyst caused by a blocked meibomian gland in the eyelid. Meibomian glands in the eyelid produce an oil which helps keep the eye moist. If the gland becomes blocked, the oil builds up into a cyst which looks like a small lump in the eyelid. The lump can become irritated and red and, occasionally, infected.

What causes them?

Lid cysts are common, especially in children. If children develop cysts repeatedly, they could have blepharitis, a long-term mild irritation of the edge of the eyelids, which is usually harmless.

Treatment of chalazion

Most cysts disappear with time, but can take many months to go. Hot compresses treatment twice daily might speed up the disappearance of the cyst. Use a clean flannel soaked in hot water (be sure it's not hot enough to burn). Squeeze out excess water and place on the eyelids over the cyst for at least two minutes, followed by a gentle massage from side to side. This should be performed for at least 2-3 months or until the chalazion disappears.

Surgical treatment

If there is a large cyst which remains after a long time (6 months+), even with hot compress treatment, it is sometimes possible to

perform surgery to remove it. Your GP can refer you into the Eye Department at Whipps Cross to have this assessed.

Vision and Eye Health

Children's eye checks

All children in the Waltham Forest borough will have a vision screening check during their first year at school, around the age of 4-5. A school nurse will record their vision and if this is not normal levels will refer either to a paediatric eye clinic or ask you to attend a local optician.

If you have concerns about your child's eyes before then, you could take your child to a local optician for an eye test. These sight tests are free (under the NHS) for children up to the age of 16. (Note: not all local opticians will see children under the age of 5.) If the opticians are unable to test your child or have concerns, they can refer you into the hospital / community paediatric eye clinics.

Signs to look out for in children:

- sit very close to the TV or hold books / objects close to their face
- they are clumsy / have poor hand and eye co-ordination
- you notice a squint
- rub their eyes a lot (except when they are tired, this is normal)
- complain about blurred or double vision
- vision concerns from nursery / school
- struggle to notice objects from far away

If your child has special needs, it is likely they will be referred for an eye examination by the health professionals already involved (paediatricians, child development team). This is because there is a higher incidence of squints, need for glasses and other eye problems in these children.