

## Links

Additional information can be found at:

<https://www.nhs.uk/conditions/Lazy-eye/>

## Further information

If you need any further assistance, please contact the Orthoptic Services Department on 01744 646 816

# Patching for Amblyopia (Lazy Eye)

If you need this leaflet in a different language or accessible format please speak to a member of staff who can arrange it for you.

اگر به این بروشور به زبان دیگر یا در قالب دسترس پذیر نیاز دارید، لطفاً با یکی از کارکنان صحبت کنید تا آن را برای شما تهیه کند.

Jeśli niniejsza ulotka ma być dostępna w innym języku lub formacie, proszę skontaktować się z członkiem personelu, który ją dla Państwa przygotuje.

Dacă aveți nevoie de această broșură într-o altă limbă sau într-un format accesibil, vă rog să discutați cu un membru al personalului să se ocupe de acest lucru pentru dumneavoastră

如果您需要本传单的其他语言版本或无障碍格式，请联系工作人员为您安排。

إذا احتجت إلى هذه النشرة بلغة أخرى، أو بتنسيق سهل الوصول إليه، يرجى التحدث إلى أحد الموظفين لترتيب ذلك لك.

Whiston Hospital  
Warrington Road,  
Prescot, Merseyside, L35 5DR  
Telephone: 0151 426 1600

St Helens Hospital  
Marshalls Cross Road,  
St Helens, Merseyside, WA9 3DA  
Telephone: 01744 26633

## What is a lazy eye?

Lazy Eye (Amblyopia) means the level of vision is reduced in one eye, and cannot be improved with glasses alone.

It is caused by one eye not developing properly, which can be for many different reasons.

Your orthoptist will explain what is causing your child's lazy eye.

Many children with lazy eye wear glasses. If your child has glasses they should be worn full time.

## What is the treatment procedure?

Treatment of lazy eye involves blurring the vision in the 'good' eye to encourage the child to use their lazy eye more.

This is most commonly carried out using an eye patch.

## My child's patching treatment

Name:

Date of Birth:

Please were the patch on your

Right Eye \_\_\_\_\_

Left Eye \_\_\_\_\_

Eye for \_\_\_\_\_ hours per day

## Additional Information

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## What are the risks of amblyopia treatment?

Some children do not like having one eye covered with a sticky patch. Others may have an allergic reaction to the patches. In these cases we can explore other treatment options.

Covering one eye reduces your child's peripheral vision. It is important that they are monitored to ensure that they do not bump into things on the patched side. They may have reduced depth perception, meaning they may struggle with activities such as catching a ball. We recommend that patches are not worn during sporting activities.

If your child struggles with their patch due to social issues, such as difficulties with other children in school, please discuss this with your orthoptist. We can consider other ways of treating your child's lazy eye to help this.

If your child has very poor vision we can work with the school to advise on how well your child can see and any adaptations that may be required. Please discuss this with your orthoptist.

In rare cases patching can lead to double vision. You will be advised if this is a possibility in your child's case. If your child complains of double vision when the patch is taken off please contact the orthoptic department for

## What are the benefits of treatment?

We treat lazy eyes to ensure that your child grows up with two 'good' eyes.

The aim is to improve the level of vision in your child's eye to the best that it can be. This can also improve your child's 3D vision and contrast sensitivity. All of these things impact how well your child sees on a day-to-day basis.

Patching is not prescribed to treat a squint (turn in the eye). If your child has a squint this will generally not be affected by the use of patching.

## What will happen if the lazy eye remains untreated?

Without treatment the vision in the lazy eye will remain reduced and may further reduce.

Adults with lazy eyes are restricted from entering some careers, and are at risk of sight impairment if something happened to their 'good' eye.

Having a lazy eye does not qualify a child for visual impairment registration.

## What does patching involve?

Your child will be given sticky patches to wear over their good eye for a set number of hours per day. The length of time varies for each child. This will be discussed with you at your orthoptic appointment.

Research suggests that treatment is most effective at a younger age. Treatment is generally carried out before your child reaches 7 years old. However, if your child is older than this treatment can be attempted. It can be more challenging to improve vision in older children.

## Is there an alternative to using the patch?

If your child cannot tolerate sticky patches please speak to the Orthoptist. Alternative brands of patches are available, as well as patches that fit onto the glasses.

For some children, an eye drop (Atropine) can be used to blur the vision in the good eye instead of using a patch.

If this is something that you would like to pursue please ask your Orthoptist or pick up the Atropine for lazy eye leaflet available in clinic.

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

It is important that your child keeps their patch on for the suggested number of hours. You can help with this through positive praise and rewarding success with the patch. Your Orthoptist can provide you with a reward chart.

Close work activities such as colouring, writing and hand held games have been shown to help with patching. Some children have more success with patches at school or nursery rather than at home.

## How long will the treatment take?

Treatment continues until your child's vision has stabilised at its optimum level. The amount of time this takes varies between children.

Once stability is achieved, patching is reduced initially and then ceased. The orthoptist will advise on this.

Sometimes vision reduces again after patching is stopped. This is unpredictable. In this case further treatment may be recommended.