

Eye squint in children: Why early care counts

The condition can be linked to existing vision problems or weak eye muscles, says Mount Alvernia consultant ophthalmologist Cheryl Ngo



If left untreated, an eye squint can lead to complications like lazy eye and poor 3D vision. PHOTO: GETTY IMAGES

Do your child's eyes sometimes point in different directions? This could be a sign of strabismus, or eye squint, a condition where the eyes are misaligned. It can occur all the time or only intermittently, such as when your child is tired, unwell or day-dreaming.

While only 2 to 4 per cent of children develop an eye squint, early detection and treatment are crucial to prevent long-term vision problems, says Mount Alvernia Hospital consultant ophthalmologist Cheryl Ngo. Here, she shares more about the causes and treatment options.

Q What causes an eye squint, and how can I spot the early signs in my child?

An eye squint can be caused by several reasons, including weak eye muscles, refractive errors like far or near-sightedness and astigmatism, cataract or other eye conditions that cause poor vision. It can also run in the family or stem from irregularities in the nerves controlling eye movements. Certain brain disorders can also be potential triggers, and they are first assessed given their gravity.

An eye squint can cause your child's eyes to turn inward, outward, upward, downwards or at an angle. You might also notice that light reflects differently in each eye – in normal vision, the reflection would appear in the same spot in both eyes when your child looks straight ahead.

Q Can my child outgrow an eye squint, and what happens if it is left untreated?

An eye squint does not resolve on its own. Some children may gain better control over an intermittent squint as they grow older, making the misalignment less noticeable. If left untreated, an eye squint can lead to amblyopia, commonly referred to as lazy eye. This occurs when the brain begins to ignore signals from the misaligned eye, preventing it from

developing normal vision and causing your child's eyesight to weaken over time.

The condition can also affect stereopsis, or 3D vision, as the eyes struggle to work together to perceive depth. This can make tasks such as catching a ball, climbing down the stairs or judging distances more difficult. Over time, your child may also develop an unusual head position, such as tilting their head or turning their face to one side. This is often a subconscious way for them to see better and compensate for the misalignment.

Q What are the potential treatment options and is there a need for surgery?

The treatment for eye squint focuses on managing the underlying conditions that cause it, with the approach varying based on its severity.

If refractive errors are contributing factors, doctors may prescribe glasses to correct your child's vision. For cases involving lazy eye, eye patching is often recommended. These approaches can be combined with eye exercises to help strengthen the eye muscles and improve coordination. Surgery is usually required for a constant squint that develops early in childhood or if the condition leads to double vision, abnormal head posture or a decline in 3D vision.

The sooner the treatment begins, the more likely your child's eyes can be realigned and eliminate the risk of developing amblyopia or other complicated conditions.



Dr Cheryl Ngo

Consultant ophthalmologist
 Adult & Child Eye (ACE) Clinic
 St Anne Mother & Child
 Centre #02-82
 Mount Alvernia Hospital