

ST. THOMAS EYE HOSPITAL, ACCRA

Patient Information and Agreement to Undergo Squint Surgery

Modified from the:

North Cheshire Hospitals 
NHS Trust

Warrington Hospital, United Kingdom

What is Squint?

A squint is a general term used to describe eyes that are not aligned together. i.e. do not point in the same direction. It is caused by an eye muscle imbalance. A weak eye muscle can cause one eye to turn in, out, up or down.

Aims of Surgery

To improve the cosmetic appearance of the eyes by making the squint less obvious.

Why Use Adjustable Sutures?

Using adjustable sutures during a squint operation gives the ophthalmologist and the patient more control over the final outcome of squint surgery. Adjustable sutures mean that the position of the eye can be modified or improved once the operation has been done. This is usually done on the following day.

The operation takes place while the eye is under anesthesia but instead of tying the sutures up completely they are effectively tied in a bow. On the following day, if the eyes are aligned well and the patient is happy, the sutures are tied permanently. If the position of the eye is not satisfactory, the muscle can be adjusted accordingly before being tied permanently.

What are Risks of the Operation?

All operated eye will look red for several weeks following surgery. An infection can occur (1 in 500) and shows itself as an excessive discharge. These infections respond well to antibiotic treatment.

On rare occasions the globe might be punctured during surgery and this can cause bleed into the gel of the eye or cause the retina to detach. This would call for further surgeries elsewhere or within the hospital to try fix the problem. One may also rarely develop anterior segment ischemic syndrome and all these carry some risk that the sight can be permanently affected.

What Is the Chance Of Success For Surgery?

The chance of success depends on the aim of surgery and the type of squint, but the ophthalmologist will discuss this fully with you prior to your operation. Sometimes a squint surgery may not perfectly align the eyes and this is not considered a failure.

A successful operation is said to be one that adequately straightens or reduces the misalignments of the eye. Occasionally however, there may be over-correction and the patient may develop a consecutive squint.

Normally, the Ophthalmologist will operate on the muscles of the eye that squints most of the time. However, because a squint means that there is an imbalance between the two eyes, sometimes it may be necessary to do part of the operation on each eye to achieve a symmetrical result.

It is also possible to operate, for example, on the right eye to correct a squint in the left eye, especially if the left eye has been previously operated on.

A few patients may develop double vision after squint surgery, despite all attempts to identify this in the pre-op assessment. Also in rare cases, a successfully corrected squint may develop squint again after some months or years.

What type of Anesthesia is used? What are its Major Risks?

A Squint surgery is commonly performed under local (injection) anesthesia, with or without sedation. General anesthesia may be used instead in some cases. It is typically performed as an outpatient procedure. There are some risks associated with anesthesia, whether general or local. Complications of anesthesia injections around the eye may include: perforation of the eyeball, injury to the optic nerve resulting in loss of vision, hemorrhage, retinal detachment, interference with retinal circulation resulting in possible vision loss, drooping of the upper eyelid, hypotension or lowering of the blood pressure, and respiratory depression. General anesthesia can result in heart and breathing problems, and in very unusual and rare instances, death or diminished brain function can occur.

Patient's Acceptance of Risks:

I have read the above information (or it was read to me) and have discussed it with my physician. I understand that it is impossible for the physician to inform me of every possible complication that may occur. My physician has told me that results cannot be guaranteed and that more treatment or surgery may be necessary. By signing below, I agree that my physician has answered all of my questions and that I understand and accept the risks and benefits of the surgical procedure. I have been offered a copy of this document.

Patient's Undertaking:

Iwish to have a Squint Operation on my.....(state "right" or "left" eye).

Patient's Signature or Right Thumb Print:

Name and Signature/RTP of patient's witness:

Date:

Counter-signed by Surgeon: