



York and Scarborough  
Teaching Hospitals  
NHS Foundation Trust

# Amblyopia Treatment

Information for patients, relatives and carers

① For more information, please contact:

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# **My child has been diagnosed with amblyopia. What is it?**

Children are not born with good vision; it is something that develops with age and use of the eyes.

Amblyopia or 'lazy eye' as it sometimes known is a condition where the vision fails to develop properly. It usually occurs in one eye but can occur in both eyes. It occurs when normal visual development is prevented or disrupted in early childhood.

## **What are the causes of amblyopia?**

Anything that interferes with your child's vision during their early years of development can cause amblyopia.

The most common causes of amblyopia are:

- Constant turning of the eye, known as strabismus or 'squint'
- A need for glasses; especially if one eye requires a stronger lens than the other

# **How can amblyopia be treated?**

## **Occlusion therapy**

Occlusion (patching) is used to treat amblyopia. Your child's 'good eye' will be covered up in this treatment. This encourages your child's brain to use the lazy eye and in turn, vision in this eye should improve.

**Please note that occlusion therapy (patching) will not correct a squint or straighten an eye. It is done to correct defective vision only.**

## **Will my child's amblyopia get better on its own?**

Your child's amblyopia will not get better on its own. The earlier that amblyopia is diagnosed and treated, the better the outcome. If left untreated, your child may have permanently reduced sight, which cannot be corrected when they are older.

## **Can we leave my child's amblyopia treatment until they are older?**

It is not advisable to leave your child's treatment until they are older. Patching is more successful if it is done when younger. The older your child is, the harder the vision is to improve, and the results are often not as good as they are in younger children.

## **How will my child's eye be patched?**

The patch will be put over your child's good eye for a certain period of time each day. Your child's Orthoptist will tell you how long they need to wear it for each day. If your child has glasses, it is vital that the glasses and the patch are worn together. It is better to stick the patch directly onto the face rather than on the glasses as this prevents the temptation to 'cheat' by peering over the top of the glasses.

## **How long will my child have to wear a patch for?**

The amount of time per day and the length of time that your child will need to wear a patch for will depend on factors such as the level of vision and the age of your child. Sadly, it is not possible to predict at the start of the treatment how long the treatment will last. The rate of improvement depends on each individual patient.

## **Does patching really work?**

Patching is a successful form of treatment, but it is only as successful as your child will allow. Patching only works if your child wears the patch as instructed. If they will not wear their patch, the vision will not improve.

## **What should my child do whilst wearing the patch?**

Patching is more effective if your child is encouraged to do close up work while wearing their patch. Activities such as reading, writing, colouring, watching TV, playing on a computer or any other detailed activity will all help to improve their vision. Do not worry if your child is too young to do such activities, they are using their eyes all of the time so the patch will still be effective.

In school age children, it can often be a good idea for your child to wear the patch at school as long as your child and their teachers are willing, as this is when they do their most concentrated work.

## **Are there any alternative treatments to improve my child's sight?**

No, unfortunately there are no other proven effective forms of treatment for amblyopia. To improve vision in a lazy eye you have to make the brain 'use it' and the only way to do this is to occlude the good eye. This is primarily done with a sticky patch or in some cases where a child will not tolerate a patch it can be done by blurring the vision to the good eye with dilating drops. Your Orthoptist would discuss this form of treatment with you if she felt it would be beneficial to your child and would provide you with the 'Atropine Occlusion' leaflet.

## **Summary:**

### **Important points to remember**

- Check you are certain which eye to put the patch on.
- Use a clean patch every day. Should you run out of patches, please contact the Orthoptic Department for more. Please do not simply wait until your next appointment.
- If your child wears glasses, these must still be worn. The patch is usually worn on the face with the glasses on top.
- Please make sure that your child cannot peep around their patch.
- To encourage the vision to improve, it helps if your child does close work. Examples of this include reading, writing or colouring.

### **Top Tips**

Persevere with your child's patching, encourage them, and enlist help and support from others. Keep your child busy, reward good behaviour, and make it fun!



# **Safety**

When your child is wearing a patch, they will not be able to see things to the side of the patch. As they are using their lazy eye, at first their vision may not be good.

Therefore, please remember to make sure that your child is properly supervised to ensure their safety and that all necessary people are informed of this e.g. teachers, playgroup and nursery staff, school staff and other family members.

## **What do I do if my child won't wear the patch?**

We fully understand the difficulties you may encounter in getting your child to wear the patch, but unfortunately, there are no easy answers. It is often just a case of perseverance.

If your child is allergic to the eye patches given, please contact your Orthoptist for advice.

If you encounter any problems or have any concerns, please remember that you can always ring your Orthoptist for advice or reassurance.

# Additional advice and contact details

Whatever the age of your child, patching must always be regularly monitored by your Orthoptist. It is therefore important that if you are unable to attend your appointment you contact the Orthoptic Department as soon as possible to let them know and to make another one.

Patch to be put over \_\_\_\_\_ eye

Length of time \_\_\_\_\_

If you have any questions about your child's patching treatment, please do not hesitate to ask your Orthoptist.

## Contact Details: York

Patricia McCready	01904 726749
Sian Jones	01904 726747
Gemma Kane	01904 726751
Lucy Ridgeon	01904 726751

To change your appointment, in York, please call:  
01904 726750

## Contact details: Scarborough, Whitby, Malton & Bridlington

Chris Alletson:	01723 342057
Jayne Mills:	01723 342057
Andrew Emmerson	01723 342057

## **Tell us what you think of this leaflet**

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact:  
Patricia McCready, Orthoptic and Optical Service Manager, Head and Neck Department, The York Hospital, Wigginton Road, York, YO31 8HE or telephone 01904 726749.

## **Teaching, training and research**

Our Trust is committed to teaching, training and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

## **Patient Advice and Liaison Service (PALS)**

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email [pals@york.nhs.uk](mailto:pals@york.nhs.uk).

An answer phone is available out of hours.

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