

Children's eye health



Professional Excellence in Eye Health



THE COLLEGE OF
OPTOMETRISTS

Overview

Being able to see clearly is important for a child's overall development. Most children have excellent sight and do not need to wear glasses, but if there are problems and they are not picked up at an early age, a child may have permanently reduced vision in one or both eyes.

Some children may have vision screening done at school (between the ages of four and five). However, the earlier any problems are picked up the better, so if you have any concerns about your child's eyes, or if there is a history of needing strong glasses at a young age, or squint or lazy eye in the family, do not wait for the vision screening at school. Take your child to a local optometrist for a sight test.

Children do not have to be able to read or talk to have their eyes examined. It is possible to see whether a child has healthy eyes or needs glasses without asking them any questions. Eye examinations for children under 16 are paid for by the NHS.



If you have any concerns about the health of your eyes, please visit your local optometrist. Optometrists are the eye health specialists in the community.

Which children should be tested?

You should make sure your child has a full eye examination if:

- they have special needs – children with special needs often have eye problems;
- there is a history of a squint or lazy eye in their family; or
- people in the family needed to wear strong glasses when they were young children.

Which signs should I look out for?

It is particularly important that a child has an eye examination if you notice that:

- one eye turns in or out – this may be easier to spot when the child is tired;
- they rub their eyes a lot (except when they are tired, which is normal);
- they have watery eyes;
- they are clumsy or have poor hand to eye co-ordination;
- they avoid reading, writing or drawing;
- they screw up their eyes or frown when they read or watch TV;
- they sit very close to the TV, or hold books or objects close to their face;
- they have behaviour or concentration problems at school;
- they don't do as well as they should at school; or
- they complain about blurred or double vision, or they have unexplained headaches.

Children do not have to be able to read or talk to have their eyes examined. It is possible to see whether a child has healthy eyes or needs glasses without asking them any questions.

Simple treatments like wearing glasses or wearing a patch for a while could be all that your child needs. The earlier that eye problems are picked up, the better the outcome will be.

If flash photographs of your child show a white colour in their pupil, or red eye in only one eye, not both, when they are looking straight at the camera, you should ask your optometrist for more information. These could be signs of a very rare but serious condition.

Babies

Babies can see when they are born, but their eyes don't always focus accurately. A baby's eyes may squint sometimes (they may not always line up with each other), but if their eyes always seem to squint, this should be investigated. Babies' eyes develop gradually, and after about six weeks they should be able to follow something colourful or interesting with their eyes, or smile back at someone who is not using sound to get their attention.

An easy test you can do at home when a baby is over six weeks old is to see if your baby's eyes follow you around a room. If they don't seem to be able to focus on you properly – for example, if they can't follow you and recognise your facial gestures, or if their eyes wander when they are looking at you – it could suggest a problem.

An easy test you can do at home when a baby is over six weeks old is to see if your baby's eyes follow you around a room.

You can also try covering each of the baby's eyes in turn. If they object to having one eye covered more than the other, they may have problems seeing out of one eye. As they get older, you can start to point out objects both close up and far away. If they struggle to see the objects, contact an optometrist for advice.

Long-sightedness (hyperopia)

To see clearly, the light coming into your eye needs to be focused on the retina at the back of your eye. If your eyeball is too short, light focuses behind the retina and you are long-sighted. People who are long-sighted have to focus more than they would do if they had perfect sight, particularly on things that are close up, but they are still able to see clearly. As children's eyes are smaller than adults' eyes, it is normal for children to be long-sighted, and this does not mean that they need glasses. However, if a child is very long-sighted, one eye may turn in as the child tries to focus on things. The child will need glasses to correct this and stop the eye that is turning from becoming lazy (see later). Children who are long-sighted do not normally complain that they can't see things, but you may notice that they are having problems focusing or concentrating on things, particularly if they are close up.

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Because children who are long-sighted are used to focusing too much to see clearly, your optometrist may need to put some cycloplegic drops in your child's eyes to find out how long-sighted they are. These drops temporarily reduce the natural focusing (accommodation) of the eye, so that your optometrist is able to get a more accurate measurement of your child's glasses prescription. The drops will make the child's pupils larger. They will also make their vision blurry for a few hours, but this will return to normal after that.

Short-sightedness (myopia)

If your eyeball is too long, light focuses in front of the retina and you are short-sighted. People who are short-sighted have difficulty seeing things that are far away, such as the TV or the board at school. Children often become short-sighted when their eyes grow too much. A recent study, which we funded (the NICER study) has found that short-sightedness is twice as common in the UK now compared with 50 years ago, and children are becoming short-sighted at a younger age than we previously thought. Children with parents who are short-sighted are more at risk of developing the condition, so we recommend that these children have their eyes examined regularly throughout primary school (even if the school vision screening at age four or five years didn't find any problems). This is because children's eyes change as they grow. Both long and short sight run in families and are easily treated with glasses.

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Scientific studies appear to show that children who spend time outdoors are less likely to be short-sighted, so encourage your child to spend time outdoors, but make sure you protect their eyes from the sun (see later).

Astigmatism

If your eye is shaped more like a rugby ball than a football, light rays are focused on more than one place in the eye, so you don't have one clear image. This may make it hard to tell 'N' from 'H', for instance. Glasses which correct this may make a child feel strange at first, although their vision with the glasses will be clear. Astigmatism often happens alongside either long or short sight and glasses are used to make the focus clear.

Lazy eye and squint

About 2 or 3% of all children have a lazy eye, clinically known as amblyopia. This may be because they have one eye that is much more short- or long-sighted than the other, or because they may have a squint (where the eyes are not looking in the same direction). If you notice your child appears to have a squint after they are six weeks old, you should have their eyes examined by an optometrist as soon as possible.

The NHS recommends that all children should have vision screening during their first year at school.

The sooner the child is treated, the more likely they are to have good vision. It is more difficult to treat a lazy eye if the eyesight has finished developing (usually around the age of seven). However, it may still be possible to significantly improve the vision in the weaker eye.

The NHS recommends that all children should have vision screening during their first year at school. This is not a full eye examination but is an important way to identify reduced vision at an early age. The screening test is done in school, usually by a school nurse, and is important because many children will not realise that they have a lazy eye, and parents may not be able to see it. If your child misses the school screening for any reason, you should take them to your local optometrist for a sight test (paid for by the NHS).

Don't expect your child to tell you if there is a problem. Children assume that the way they see is normal – they will not have known anything different.

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The treatment will depend on what is causing the lazy eye.

- If it is simply because the child needs glasses, the optometrist will prescribe glasses to correct sight problems.
- If the child has a squint, this may be fully or partially corrected with glasses. However, some children may need an operation to straighten the eyes. This can be done as early as a few months of age.
- If the child has a lazy eye, patching or using eye drops in the other eye can help to encourage them to use the lazy eye to make it see better.

Whether a child needs glasses or not depends on the shape and size of their eyes. Wearing glasses will not change their eye shape, and will not make your child's eyes worse. If your child has a lazy eye, wearing glasses may improve their sight permanently. Your optometrist will tell you how often and when your child should wear their glasses.

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Colour blindness

Around one in 12 men and one in 200 women has some sort of problem with their colour vision. If you suspect that your child has a colour-vision problem, or if there is a family history of colour-vision problems, ask your optometrist about it. There is no treatment or cure, but you can tell your child's teachers, so that they use colours appropriately.

Spending time outside

An active lifestyle, particularly involving spending time outdoors, does appear to be helpful in preventing myopia.

You can also protect your child's eyes by making sure they wear a hat with a brim or a sun visor in bright sunlight.

Protect your child's eyes from the sun

Some studies suggest that prolonged exposure to ultraviolet (UV) light may increase your risk of developing cataracts and AMD (age-related macular degeneration), although this has not been proven for AMD. Because children tend to spend a lot of time outside, it's important to protect your child's eyes in the sun. Make sure your child's sunglasses have UV protection and carry the British Standard (BS EN ISO 12312-1:2013) or CE mark. You can also protect your child's eyes by making sure they wear a hat with a brim or a sun visor in bright sunlight.

How much do eye examinations cost?

In England, Wales and Northern Ireland, the NHS pays for sight tests for children under 16 years of age, and those aged 16 to 18 in full-time education. In Scotland the NHS pays for eye examinations for everyone. If your child needs glasses, the NHS will give you a voucher, which may cover the full cost of glasses, or you can put it towards the cost if you want more expensive glasses. You can take the voucher to any dispensing optician (person who sells prescription glasses).

Children under 16 can only have their glasses dispensed by, or under the supervision of, a registered optometrist, dispensing optician or a doctor. You can check if your optometrist or dispensing optician is registered with the General Optical Council by visiting optical.org.

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The College of Optometrists is the professional body for optometry. We provide qualifications, guidance and development opportunities for the profession to make sure optometrists provide the best possible care. Our members use MCOptom or FCOptom after their name. Membership of the College shows their commitment to the very highest clinical, ethical and professional standards. Look for the letters MCOptom or FCOptom to see if your optometrist is a member.

Letters after your optometrist's name may mean they have received further training. Prof Cert Paed Eye Care means they have a Professional Certificate in Paediatric Eye Care. Higher Cert Paed Eye Care means they have a Professional Higher Certificate in Paediatric Eye Care. Dip Paed Eye Care means they have a Diploma in Paediatric Eye Care.



Please visit **lookafteryoureyes.org**
for more information.

This information should not replace advice that your optometrist
or other relevant health professional gives you.

Your local optometrist

If you would like this leaflet
in large print, please email
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