Sherwood Forest Hospitals

INFORMATION FOR PATIENTS

Occlusion (patching treatment)

This leaflet explains what occlusion is and what to expect during treatment.

Why does my child need a patch?

It has been found that your child has a lazy eye, which means they can see better with one eye than the other). There are a few reasons for this. It could be that there is a squint (where one eye turns), or a need for glasses with one lens stronger than the other. Both of these mean that the brain hasn't received the right information, and the vision has not developed properly.

How does the patch work?

The patch covers the better seeing eye which forces the brain to see with the lazy eye. This means that the vision will start to improve in this eye.

Types of patches

Adhesive patches can be used which stick to the face. If glasses are worn these are placed over the top of the lens. These patches are hypoallergenic so in most cases do not cause any skin issues.

Fabric patches can be worn over the glasses and cover one lens. As they are not stuck directly to the face, children can try to peek with this type of patch. These are useful where sticky patches can't be tolerated or the skin is sensitive.

How long is the patch worn each day?

Most children will start with two hours per day however, this is different for every child. It depends on the level of vision, how old the child is, how they respond to the treatment and how much they co-operate with the patch. Your child will need regular appointments so we can monitor their vision and adapt the treatment accordingly.

Does it work?

- Patching is often effective, but it is a gradual process and can take many months to work fully.
- Not all children with a lazy eye can be treated with occlusion; this may be because they are too old for the patch to work. There is a critical period for visual development after which vision will not improve. Usually, occlusion treatment is completed by the age of seven to eight years.
- Occasionally, children who have worn their patch well do not show an improvement in their vision.

For the vast majority of children referred to the hospital with a lazy eye, there will be some improvement in the vision, and it is usually worth trying some occlusion.

How will the patch affect my child?

At first your child may be unhappy wearing the patch. They are not used to seeing with their lazy eye and the vision can be quite poor.

This might mean that your child will need extra supervision with everyday activities such as playing outside as they will not be able to see as well as normal. If the patch is being worn at school it is important to inform their teacher as they may need more time for their schoolwork and their handwriting may be messier than normal.

What happens if my child does not wear the patch?

If your child does not comply with the treatment then there is a risk that the vision in their lazy eye will be reduced for life. After the visual system stops developing at around age eight there is no way to improve the vision. This can have an affect on their ability to drive and also affect career choices.

Are there any alternatives?

Yes, there is one alternative method which involves using an atropine eye drop into the good eye. This blurs the vision in the good eye, forcing the child to use the lazy eye in turn improving vision. This can be discussed with the orthoptist if you feel it might be a better option for your child.

Important

It is important to carry out the amount of patching instructed by the orthoptist, and no more. Please ensure your child can't peep around the patch.

It is also very important to keep all followup appointments so that the orthoptist can monitor the vision regularly and adjust the amount of patching accordingly.

Please get in touch with the Orthoptic Department if you child reports double vision after wearing the patch, or if they have an allergic reaction to the patch.

Contact details

If you have any queries about your child's treatment please contact the Orthoptic Department:

• Email: <u>Sfh-tr.orthoptics@nhs.net</u>

• Urgent orthoptic queries:

- Telephone: 07768615247, Monday to Wednesday, 8am-4pm
- Telephone: 07825866704, Thursday to Friday, 8am-4pm
- For appointment booking/ cancellation:
 - Telephone: 01623 672383.

Further sources of information

NHS Choices: <u>www.nhs.uk/conditions</u> Our website: <u>www.sfh-tr.nhs.uk</u> BIOS website: <u>www.orthoptics.org.uk</u>

Patient Experience Team (PET)

PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email <u>sfh-tr.PET@nhs.net</u>.

This document is intended for information purposes only and should not replace advice that your relevant health professional would give you.

External websites may be referred to in specific cases. Any external websites are provided for your information and convenience. We cannot accept responsibility for the information found on them.

If you require a full list of references for this leaflet, please email <u>sfh-tr.patientinformation@nhs.net</u> or telephone 01623 622515, extension 6927.

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