CHILDHOOD SPECTACLES

You have been given this information leaflet by your eyecare professional because it has been determined that your child may benefit from wearing spectacles.

If you have received this leaflet from another source you must take care to note that all the information in this leaflet may not apply in your child’s case.

Why does my child have to wear spectacles?
If a child's visual ability is not reaching normal levels for their age-group and it has been demonstrated that spectacles can help, then spectacles are prescribed and worn as directed until the child grows out of the need for spectacles or at least reaches visual maturity.
Humans develop visually from birth until 12 to 14 years of age. The majority of visual development occurs within the first eight years of life. It is very important therefore that spectacle correction be worn as prescribed by your eyecare professional until the visual system has reached full maturity at which time the risk of abnormal or slowed visual development is very low.

First Spectacle prescription?
It takes on average 7-8 weeks for a child to get accustomed to their new spectacle prescription and if the spectacles do not fit properly this will unnecessarily delay the time to visual improvement. Spectacles are a form of treatment in developing children. If this is your child’s first prescription for spectacles there are some tips that will increase the success of their adapting to spectacle wear.

Firstly, choose a large spectacle frame, preferably a design that reaches up to the child’s eyebrows rather than the small-optic designs that allow the child to easily look over the top of the lens. Secondly, children are very active and have flatter developing noses so spectacle frames that easily slip down the nose will allow the child to also look over the top. Your optician will help with adapting the spectacle frame so as to get the best fit.
Other accessories such as elastic headbands or side-arm ear retainers can be very helpful to secure the spectacle fit. If your child is very young, for example under 1 year of age, then it is well worth looking around for specialist designs that have no moving parts or hinges and are made of soft firm silicone/plastic. Again your optician can help source these specialist frames.

My child will not wear the spectacles and resists physically?
This is not uncommon with the first prescription (especially when the prescription is for positive lenses). Because most younger children tend to require positive lenses and have been accustomed to overusing their internal eye muscle to get better vision, putting the correct positive spectacle lenses on actually causes their vision to be MORE BLURRED initially. This is because of the strength of the spectacles in addition to their own internal eye muscle working ‘overtime’.
It can be very helpful to have a distraction ready for the first spectacle wear and aim for 5-10 minutes wear (more if your child will allow) the first day then 20-40 minutes the second day and so on until by 2 weeks your child should be wearing their spectacles pretty much full time. Full time spectacle wear should continue until your child is reviewed by your eyecare professional.
If you are still having ‘running battles’ and resistance after 4-5 weeks you should contact your eyecare professional for advice there may be other reasons for this experience. 

If this is NOT a first prescription and your child complains to wear their spectacles, constantly looks over them, develops or worsens a pre-existing squint (misalignment of eyes turning in or out) then you should contact your eyecare professional for advice also.

**Will my child ALWAYS have to wear spectacles?**

Not necessarily. Your child was prescribed spectacles to improve the clarity and focus of the world around them. In other words to improve their vision. This will help foster more normal visual development and reduce the likelihood of the vision from one or both eyes developing abnormally – a condition called Amblyopia (sometimes called ‘lazy eye’). This is a serious condition that becomes much harder to treat as the child gets older.

The strength of the spectacle prescription is determined by the size and shape of each child’s eye and as such needs to be changed as your child’s eyes grow. In this way the prescription may reduce or become unnecessary if the child’s eye growth makes it so.

It is impossible given our current research data, to predict very accurately which child will grow out of spectacles or when. Suffice it to say that for as long as a child is developing and their vision is better with spectacles than without them, then spectacles will be required.

**My child has a squint and wears spectacles. Will the squint surgery stop the need for spectacles?**

Your child was prescribed spectacles because it has improved their VISION. Spectacles can in some cases also reduce or help control a squint (misalignment of eyes) but this does not occur in every case.

It can take 3-4 months for spectacles to have maximum effect on a squint.

Squint surgery is done in this instance to re-align the eyes BUT only to correct the amount of squint visible during spectacle wear.

*This means that when the spectacles are removed some squint may still be visible.* There are good clinical reasons for this method of managing the squint and usually this applies to those that have convergent squints (eye turns IN, toward nose).

In some instances, especially those that have OUT-turning squints, the surgery may indeed allow spectacle wear to be discontinued BUT this is very individual and your eye surgeon will give advice specific to your child’s case.

*Please keep this leaflet for reference in future.*

*If you have any questions or suggestions about how to improve this leaflet please contact the author.*

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