Pseudo-squint (also known as pseudo-strabismus) is a common condition, in which there appears to be a squint (turn of the eye), but in fact the eyes are normal.

In pseudo-squint, one or both of your child’s eyes can look out of line (Figure 1 looks as if the left eye is turning inwards). When the eyes are tested, there is no true squint, and the eyes are in fact straight. Your child’s orthoptist is trained to test for squints.

Figure 1

Skin folds at bridge of nose

What causes a pseudo-squint?
The most common cause of this is that the facial or eyelid shape in babies and young children is different from adults.

The impression of a squint can be caused by the following:

- The shape of the face or if the eyes are set close together
- The eye lids are different in size and/or shape
- The bridge of the nose is broad and flat and there is a fold of skin covering the inner corner of the eye (epicanthic fold). This is common in babies and can cause one eye to be partially covered behind the skin fold, particularly when looking to the side. This gives the impression that one eye is turning in.

Does my child need regular check-ups?

Often, children with a pseudo-squint can be safely discharged from the orthoptist’s care. Prior to discharge, your child will have a check with the orthoptists to check if the eyes are straight and an optometrist to check that there is no current need for glasses and that the eyes are healthy.
With very young children, we sometimes need to repeat the orthoptic tests after a few months to be sure that there is no true squint. Older children may also need to be seen again because a squint which is only present some of the time is suspected (intermittent squint), or because there is a family history of squints and/or glasses in childhood.

Your orthoptist will discuss with you whether a follow up check is required.

**Can a true squint develop?**

Just because a true squint was not present at the time of examination does not mean that one will never develop. Squints can occur in children up to school age and occasionally later in life. Vision screening is offered in certain areas of the UK for children aged 4-5 years. Following discharge, if there is a change in your child’s eyes or if you are concerned in any way, please contact your GP and we will review your child again.

**Does a pseudo-squint need treating?**

No treatment is required because there is no true squint and the eyes are aligned. Usually the pseudo-squint appearance will improve with time as the child’s face grows and becomes more adult shaped.
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Information online:
www.orthoptics.org.uk
www.3M.com/uk/opticlude
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Revision number: 1
Approval date: November 2017
Review date: November 2019

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Moorfields Direct telephone helpline
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Information and advice on eye conditions and treatments from experienced ophthalmic-trained nurses.

Patient advice and liaison service (PALS)
Phone: 020 7566 2324/ 020 7566 2325
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Moorfields’ PALS team provides confidential advice and support to help you with any concerns you may have about the care we provide, guiding you through the different services available at Moorfields. The PALS team can also advise you on how to make a complaint.

Your right to treatment within 18 weeks
Under the NHS constitution, all patients have the right to begin consultant-led treatment within 18 weeks of being referred by their GP. Moorfields is committed to fulfilling this right, but if you feel that we have failed to do so, please contact our patient advice and liaison service (PALS) who will be able to advise you further (see above). For more information about your rights under the NHS constitution, visit www.nhs.uk/choiceinthenhs