

Clinical Decision-making



THE SQUINTING CHILD

The squinting child



A four year old child is brought to clinic by his mother who has noticed a 'turn' in the right eye.

Q1: What are the key parts of the assessment of such a child?

The Squinting Child



The Squinting Child

Scenario 1

Scenario 2

Scenario 3

Scenario 1



Q2: What does this show?

Scenario 1



The strabismus is of recent onset and there is a family history. Visual acuity is 6/24 right, 6/6 left. The right eye is convergent, slowly taking up fixation when the left eye is covered.

Scenario 1



The retina is easily seen and is normal. Refraction shows that both eyes are hypermetropic, the right more so than the left.

Scenario 1



Q3: What is the term used to describe the vision in the right eye?

Q4: What different types of refractive error you know and how are they corrected?

Scenario 1



Q5: What is the appropriate management?

Q6: Should surgery be performed to straighten the eyes?

Scenario 2



The strabismus has come on very suddenly, and has caused the child to become distressed. Visual acuity is right worse than 6/60 , left 6/6. There is no refractive error.

Scenario 2



Q7: What does this suggest and what should you do next?

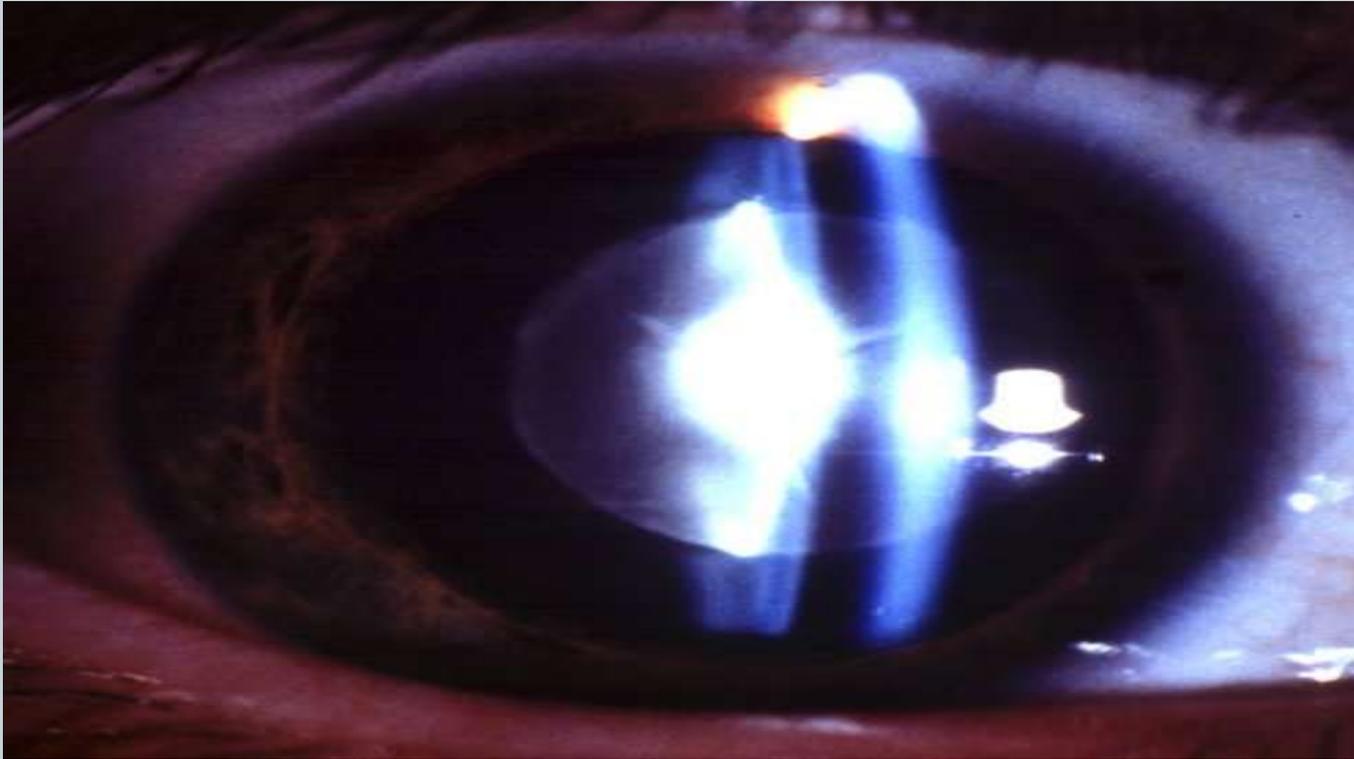
Scenario 2



Attempted ophthalmoscopy reveals a whitish lesion obstructing visualisation of the retina through the pupil.

Q8: What are the possible causes of this??

Scenario 2



Q9: What does this show??

Scenario 2



Q10: What should you do if the child shown in the figure presents to you?

Scenario 3



The child has been unwell and vomiting. He has been unsteady on his feet. Your cover test confirms there is a right convergent strabismus.

Scenario 3



Q 11 : What does this test of ocular movement show?

Q 12: What is the implication?



Thank You