

A Guide to Patching

Information for Parent or Carer

The Patient Information Leaflets page on the Trust website is available on the link:

https://www.wwl.nhs.uk/patient-information-leaflets or scan the QR code.

Orthoptic Service



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Why does your child need a patch?

The Orthoptist has found that your child sees better with one eye than the other. This is known as a lazy eye or amblyopia. This is because the brain has not received the right information, probably because of a squint or a need for glasses, and the vision has not developed normally.

How does the patch work?

The patch covers the better eye, making the brain see with the lazy eye. This will usually make the lazy eye see better.

How is the patch worn?

The patch is placed on the face, over the good eye. If your child wears glasses, these **must** be worn over the patch. The Orthoptist will give you a supply of patches that should last until your next appointment. Your orthoptist may give you a fabric patch which is worn over the glasses.

How long is it worn each day?

This is different for everyone. This depends on the age of your child and how poor the vision is. The poorer the vision, the longer the patch time each day. Your Orthoptist will suggest a suitable length of time to aim for. This may include school time. Please talk to your child's teacher about this.

How long will the treatment last for?

The aim of the patch treatment is for the two eyes to see equally. The length of time taken to achieve this is different for every child, and depends on how well the patch is worn, and how poor the vision is. Therefore, we are unable to say exactly how long the treatment will last for. Your child will attend regular appointments (usually every 6-8 weeks) whilst on treatment, and the patch will be reviewed by the Orthoptist at each visit. Once the best vision is reached, the length of patch time is gradually reduced.

How will the patch affect my child?

At first, your child may be unhappy. They are not used to using the lazy eye. As the vision gets better, this will get easier.

Your child may need extra supervision, for example when playing outside or crossing roads, as they will not be able to see as well as normal.

They may need more time for their school work. You should inform your child's teacher of any treatment.

Occasionally, a skin rash may develop around the eye. If this happens, stop the patch and contact your Orthoptist.

What can I do to help?

- Be positive!
- Praise your child when the patch is worn.
- Star/sticker charts are a good idea to encourage your child to wear the patch.
- Distract them and take their mind off the patch.
- Small, detailed tasks, e.g. computer games, reading, writing, colouring or jigsaws, can help the vision to develop quicker.
- Attend appointments

What are the long term implications of my child not wearing a patch?

If your child does not comply or complete the treatment given to them, there is a risk that the vision of the "lazy eye" will be reduced for life. Once the visual system stops developing, there is no further way to improve the vision. This can have an affect on career choice and even ability to drive. Also, should something happen to the "good" eye, your child could be left as visually impaired (if the vision of the weaker eye has not developed to a functional level).

What are the risks of patching?

Patching has been a treatment for many, many years and is backed by research and evidence. The risks of patching are rare. These risks are:

- 1) The vision of the good eye becomes reduced. This usually happens if the patch is worn too much. You should never exceed the amount of patching time prescribed to you. The older a child gets, the less of a risk this becomes.
- 2) If a child has a squint (a turn in one eye), there is a very small risk that they may start to see double vision. Should this happen, it is advised to stop the patch immediately and contact the Department

When we are patching your child, we like to see them every 6-8 weeks. By reviewing them so frequently, it helps us make sure the patch is being worn and gives us the opportunity to deal with any queries and difficulties you may be having; also, we can monitor carefully for any early onset of the risks mentioned above. It is important that we review your child at these intervals, so please where possible try to keep your appointment, or phone and rearrange at your earliest opportunity.

Are there any other alternatives to patching?

Yes. We have one other method of treatment that is available. This involves using a eye drop into the good eye (sometimes along with a blurred lens) to blur the vision lower than the weaker eye; this is carried out at intervals of twice weekly to daily. This is something we tend to use if patching doesn't work, or if a child struggles to comply with patching. However it can be used as a first line treatment as well. There are also pros and cons to this treatment. If you feel this method may be better for your child, you should discuss this with the orthoptist at your next visit.

If you run out of patches, please contact the Orthoptic department for more.

For more information about children's visual development, please see our "Visual Development" leaflet.

If you wish to speak to someone by phone, please contact the Orthoptic Department:

Wigan Health Centre Telephone 01942 822310

Outpatient Department, Leigh Infirmary Telephone 01942 264095 Please use this space to write notes or reminders.

Comments, Compliments or Complaints

The Patient Relations/Patient Advice and Liaison Service (PALS) Department provides confidential on the spot advice, information and support to patients, relatives, friends, and carers.

Contact Us

Tel: 01942 822376 (Monday to Friday 9am until 4pm)

The Patient Relations/PALS Manager Wrightington, Wigan and Leigh Teaching Hospitals NHS Foundation Trust Royal Albert Edward Infirmary Wigan Lane Wigan WN1 2NN

Ask 3 Questions

Become more involved in decisions about your healthcare. You may be asked to make choices about your treatment. To begin with, try to make sure you get the answers to three key questions:

- 1. What are my options?
- 2. What are the positives and negatives of each option for me?
- 3. How do I get support to help me make a decision that is right for me?

How We Use Your Information

For details on how we collect, use, and store the information we hold about you, please see patient information leaflet, Ref. **Corp 006** How we use your information, this can be found on the Patient Information Leaflets page on the Trust website, see details on the front cover.

This leaflet is also available in audio, large print, Braille, and other languages upon request. For more information, please ask in the department/ward.

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