



July 06, 2004

Lazy eyes need prompt action

BY LISA MELTON

Early tests are essential to tackle amblyopia. But at what age should children be tested?

DOES YOUR child see a blur with one eye? Without an eye test, it is impossible to tell.

Children with the common disorder known as “lazy eye” display no warning signs, no symptoms to alert parents or teachers to a problem. The condition can be corrected, but for treatment to be successful it must be carried out early, when the young brain’s plasticity allows reconnecting to take place. Once a child has passed the age of 7, the chances of rescuing a defective eye shrink dramatically, so timing a vision test is critical.

Three per cent of children in the UK have a lazy eye, or amblyopia. Sometimes the eye also squints, which makes the condition easy to spot; unfortunately, in two thirds of cases it looks normal.

“Parents wouldn’t spot it. This is the point of screening. You pick it up only if you test both eyes individually,” says Cathy Williams, a consultant ophthalmologist at Bristol Eye Hospital. She has been analysing data from 8,000 children born between 1991 and 1992 as part of the Avon Longitudinal Study of Parents and Children.

But national eye test programmes vary widely from area to area. A recent report recommended that children be tested by trained professionals at school entry — aged 4 and 5. Yet vision testing for children remains inconsistent and provision depends on each health district. As things stand, millions could be missing out on tests in early childhood, and their sight could remain impaired for life.

Where no local vision screening is available, parents can have the test done for free on the NHS. It is important to do this, as amblyopia can usually be corrected with a patch and glasses. Patching the “good” eye encourages the weak one to develop, thus improving vision.

Yet patching has been hotly debated. Many specialists once believed that the longer a child wore a patch during the day, the better the outcome. But this often led to teasing and bullying at school.

Today sufferers have an easier ride. Results from recent American and British studies confirm that lazy eyes can be treated by wearing a patch for two hours — rather than six, as was previously recommended. This means that children can wear the patch at home and avoid being stigmatised. Ophthalmologists point out, however, that a two-hour regimen is a good starting point, but if a child fails to improve, the time should be increased.

Some experts still feel that testing children for amblyopia at 4 and 5 years of age is too late. Those misgivings were addressed with

the recent publication in the *British Medical Journal* of the first randomised controlled clinical trial of 177 children who had no squint but who had a problem in one eye.

Michael Clarke, a reader in ophthalmology at the University of Newcastle, who led the study, says: "Our results show that delaying treatment until the age of 5 did not seem to influence the effectiveness of patches. The outcome of this study is that the age of screening has been increased to 4 and 5-year-olds."

Why not test earlier? If the younger brain is still rewiring, it makes sense to tackle the problem as early as possible. "Although between the ages of 3 and 4 is a good time to pick up amblyopia, some children were being given glasses or patches when they didn't need them," Clarke says.

Tests require a child to be co-operative and verbal, which rules out some 3-year-olds. And as the tests involve identifying shapes, younger children can struggle to do so properly, making results unreliable.

Lisa Melton is science writer at the Novartis Foundation

Copyright 2004 Times Newspapers Ltd.

This service is provided on Times Newspapers' **standard Terms and Conditions** . Please read our **Privacy Policy** . To inquire about a licence to reproduce material from The Times, visit the **Syndication website** .