

Amblyopia

What is amblyopia?

Amblyopia (am-blee-OH-pee-uh), also known as “lazy eye,” is **the most common cause of vision loss in young children**. It generally occurs when one eye doesn’t see as well as the other, even with glasses. The brain starts using the stronger eye and ignores the weaker eye.

The possibility of your child developing amblyopia is more likely if your child:

- Was born prematurely
- Has a family history of amblyopia
- Experiences a development delay

Early detection and treatment of amblyopia is critical. If untreated, or treated too late, amblyopia can lead to permanent loss of vision in one or both eyes.

What causes amblyopia?

Amblyopia can be caused by:

- A misalignment of a child’s eyes (strabismus)
- One eye may be blurrier than the other eye (difference in eyeglass prescription from one eye to the other)
- Something may block vision in one eye, such as a droopy eyelid or cataract

What are the signs of amblyopia?

When your child is young, they often do not realize they have a vision problem. You can help them by keeping these signs in mind:



Constant head tilting



Getting up close to the TV, books or other objects to see them better



Squinting



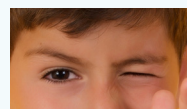
An eye that wanders or turns in or out



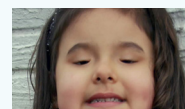
Rubbing the eyes frequently



Difficulty with hand eye coordination



Closing one eye



Droopy eyelids that block your child’s vision

If you notice your child has these signs or are unsure, take them to an eye doctor. An eye examination can help you understand what’s going on with their vision.

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Watch this video to prepare you for your child's eye exam

Preparing for the eye doctor appointment:

- Schedule your child's eye exam for a time that will not conflict with naps or meals
- Bring a list of questions for the eye doctor
- Bring snacks and a quiet favorite toy to the appointment to ensure young children remain comfortable
- Show your children videos or books with illustrations where you can explain what happens at an eye doctor appointment
- Make fun plans for after the appointment

Questions to ask your doctor

- How much can my child see?
- Can you explain the results of the eye exam in simple terms?
- What caused my child's amblyopia?
- Is one eye more affected than the other?
- How severe is my child's amblyopia?
- Are both eyes healthy aside from the amblyopia?
- What is the best treatment option for my child?
- How long will my child need this treatment?
- How often will we need eye examinations?
- When can we expect to see improvement with this treatment?
- Will my child need patching at school? If yes, when and how long?
- Are there any tips or tools to make patching or eye drops easier at home?
- If my child's vision has improved, could it get worse again?

How is amblyopia detected and diagnosed?

Vision Screenings and Eye Exams

Vision screenings are performed in schools, daycare centers, pediatric primary care offices, Head Start, and other community settings. They identify children at risk for vision problems and refer them to receive an eye exam conducted by an eye doctor (optometrist or ophthalmologist). Only an **eye doctor** can diagnose and treat a vision problem. **Note, vision screenings do not replace an eye exam performed by an eye doctor.**

How is amblyopia treated?

There are different options to help your child's brain "learn" to use both eyes equally, here are some of the most common treatments your eye doctor may recommend:

- **Eyeglasses:** If your child has a refractive error, eyeglasses can help the weaker eye see more clearly. This can improve its function and may help it "catch up" to the stronger eye—especially when treatment begins early.
- **Patching:** The better eye is patched to force the weaker eye to become stronger. Help your child understand why their eye patch is important so treatment is successful.
- **Atropine eye drops:** Eye doctors sometimes prescribe special drops to slightly blur the vision of the strong eye to push the weaker eye to work harder.
- **Digital Therapeutics:** An FDA-approved software-based treatment option in children 4–13 years old whose amblyopia is due to anisometropia and/or mild strabismus. It uses a head mounted display (such as a virtual reality headset). This treatment must be prescribed by an eye doctor.
- **Surgery:** This may be an option if there is an underlying cause that may need to be corrected, such as strabismus, cataract, or ptosis.



Learn more about amblyopia
PreventBlindness.org/amblyopia-lazy-eye