

Patient information

Atropine Occlusion for children

Child's Name _____ Put 1 drop in the _____ eye 2 times per week

What is it?

Atropine 1% eye drops and Minims are a sterile solution of atropine sulphate BP 1% w/v for the treatment of amblyopia (weaker vision in one eye, sometimes known as a lazy eye) in children.

Atropine has two effects when instilled in the eyes:

It dilates the pupil (makes the black part of the eye bigger)

It stops the eye from focusing at near (close up) – blurring the child's vision temporarily.

Atropine is a long acting eye drop that blurs near vision in the eye with better vision by preventing the lens inside the eye from focussing. This encourages use of the eye with poorer vision for any near tasks such as reading, writing, drawing and computer work. Over a period of time vision in the weaker eye often improves.

Your child can lie on their back or sit with their head tipped back. Gently hold the eyelids open and put one drop anywhere between the lids. If your child struggles, it may be easier to put the drop in while they are asleep. Press the inner corner of the lower lid with a finger to block the tear duct for a minute after putting the drops in. This helps to prevent any drops from running into the nose.

Why would this be needed?

Atropine drops may be used as an alternative to patching treatment. The main aim of atropine occlusion is to temporarily blur the vision in the good eye (when viewing close objects) to promote vision in the weaker one.

What are the symptoms that have led to this procedure?

The reason for this treatment being required is due to having one eye that cannot see as well as the other eye.

What are the alternatives?

Wearing an eye patch.

What are the potential risks and side effects?

Do not use Atropine if your child suffers from heart problems or has a high fever.

- It will make the dilated eye sensitive to light – so give your child a peaked hat to wear on very sunny days.
- The eye often stings for a short time after the drop is instilled.
- Tell your ophthalmologist or orthoptist if your child is taking any other medication before using atropine for the first time
- If your child becomes hot, irritable and complains of a sore throat or develops any of the following symptoms: a rash, headaches or nausea/vomiting **stop using the Atropine and seek medical advice immediately.**

What are the expected benefits of treatment?

The aim of the treatment is to improve the vision in the weaker eye.

What should I do before coming into hospital?

Ensure any treatment for the eye is adhered to. This includes wearing glasses if needed as discussed with your orthoptist, optometrist or ophthalmologist.

Where will the procedure take place?

The drops will be administered at home by a parent / guardian. One drop should be given twice per week in the dominant good eye: The drops should be instilled on a Sunday and Wednesday of each week until advised otherwise.

Will there be a need for an anaesthetic?

This will not be required

How will my child feel afterwards?

Atropine will cause blurred vision which may last up to seven days or more after each drop. The pupil may also remain dilated for up to 14 days after the last dose.

What should I do when I go home?

If your child is at school, please inform their teacher about the Atropine treatment; your child may want to hold books closer and their handwriting may be less neat than usual. As the pupil is dilated your child may be more comfortable facing away from a window. On a sunny day your child may be more comfortable wearing a peaked cap while outside.

If your child needs to be seen by any other doctor or health professional during the treatment, it is important to inform them that Atropine drops are being used.

How soon will my child be able to resume normal activities?

Your child can continue with their normal activities, but please be aware that the vision will be more blurred than usual.

Will my child have to come back to hospital?

Your child will continue to be monitored in the Outpatients Eye Clinic department at intervals set out by the Orthoptist.

Consent

Although you verbally consent for this treatment, you may at any time after that withdraw such consent. Please discuss this with your medical team.

How to store Atropine safely

- Store the Atropine out of reach of children and at room temperature.
- Do not use the Atropine beyond the expiry date.
- If your child accidentally swallows Atropine, encourage them to be sick and contact the nearest casualty department or your GP.

Where to get repeat Atropine prescriptions

Atropine will be supplied for your child by one of the Orthoptists from the Eye Department.

Sources of information

British and Irish Orthoptic Society - www.orthoptics.org.uk
www.theeyefive.nhs.uk www.3m.com/uk/opticlude www.eyepatchuk.org
www.squintclinic.com

Important information

The information in this leaflet is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the Patient Experience Team – Tel: 0300 131 4731 or by email at: esh-tr.patientexperience@nhs.net

Hand hygiene

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Other formats

If you require any of the Trust leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department.

Tel: 0300 131 4500 Email: esh-tr.AccessibleInformation@nhs.net

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

Reference

The following clinicians have been consulted and agreed this patient information:

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The directorate group that have agreed this patient information leaflet:

DAS

Next review date: (leave blank)

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