

Oxford University Hospitals **NHS**  
NHS Trust

Orthoptic and Optometry Services  
Oxford Eye Hospital

# Children's glasses

Information for parents and guardians





The aim of this leaflet is to explain the types of conditions which need correcting with glasses, to improve vision and promote the development of normal eyesight in children.

When your child first visits the Eye Hospital they will see an **Orthoptist**. The Orthoptist specialises in assessing how well your child can see and how well their eyes work together.

The next assessment is with the **Optometrist** who will carry out a test called refraction. This is to see if your child will need glasses.

For the refraction test, your child will usually need to have eye drops called cyclopentolate put in each of their eyes. This is to help relax their eye muscles. The drops take 30-40 minutes to work.

Their pupils will become larger and your child will notice that their vision becomes blurred.

Darker eyed children may need additional drops to relax their eye muscles completely.

When the eye drops have had time to work, the Optometrist uses a special torch (a retinoscope) to shine a light in each eye. They will look at the reflection seen from the back of the eye through different focusing lenses. The Optometrist will be able to see how much long sight, short sight or astigmatism your child has.

Using this information and the results of the Orthoptist's vision and eye co-ordination test, the Optometrist can work out if your child will need to wear glasses. They will then make up a 'prescription' for the type of lenses needed in the glasses.

## What does long sight, short sight and astigmatism mean?

**Long sight (hypermetropia)** occurs when light entering the eye focuses too far behind the retina (the light sensitive layer at the back of the eye) instead of on the retina.

Most children are born slightly long sighted. This naturally reduces up until they are around 6 years old. In some children, the long sight remains in one or both eyes. Depending on how long sighted they are, it can blur their vision when they are trying to see things close up or far away.

In some children, uncorrected long sight may lead to them developing a squint, where one of their eyes turns inwards.

**Short sight (myopia)** occurs when light entering the eye focuses in front of the retina. This can be present from birth or may develop as your child gets older. Children with short sight may have difficulty seeing things far away and, depending on the amount of short sight, may also have to hold things very close to read.

**Astigmatism** is caused by the eye being 'rugby ball shaped' rather than 'football shaped'. Astigmatism causes blurred vision when trying to see things far away and also when things are very near. It can occur on its own or can be combined with long or short sight.

Sometimes the amount of long sight, short sight or astigmatism can be different for each eye – this is called anisometropia. In this situation, if glasses are not worn, the eye with the larger prescription may become weaker or lazy (**amblyopic**).

We have a separate leaflet about amblyopia which explains how this is treated. Please ask if you would like a copy.

## What does the information mean on my child's spectacle prescription?

Example of prescription:

	Sphere	Cyl	Axis		Sphere	Cyl	Axis	
Right Eye	+ 3.00	-0.50	90		Left Eye	+3.00	-2.00	90

Your child's glasses prescription will be written on a form which includes a table similar to the example above. This will be given to you by the Optometrist.

The '**sphere**' is the amount of long sight or short sight present. The larger the number, the stronger the prescription. The (+) lenses are used to correct long sight and minus (-) lenses are used to correct short sight.

The '**cyl**' (short for cylinder) and **axis** relate to astigmatism. The cyl is the amount of astigmatism and the axis describes the direction and angle of the cyl (between 0 - 180 degrees).

There is an additional sheet of paper attached to the back of the prescription. This is a voucher which can be used to go towards the cost of the glasses. There should be a range of frames and lenses where the voucher covers the whole cost of the glasses, but if you choose a more expensive frame/lenses, you will need to pay any difference in cost.

## Frequently asked questions

### **Should my child wear their glasses all the time?**

**Yes**, unless you have been advised otherwise by the Orthoptist or Optometrist at the hospital.

The reason for this is to make sure your child's vision develops normally. It will also help your child's eyes to fully adjust to their new glasses.

Aim for putting on their glasses to become being part of the 'getting dressed' routine in the morning. This will help them to get used to putting their glasses on at a set time every day. A star or reward chart may be useful to encourage them to keep their glasses on all day.

### **Will wearing the glasses all the time make my child's eyes weaker?**

**No**, but if your child doesn't wear their glasses all the time it makes it difficult for their eyes to adjust to the glasses and see well. The longer your child can keep their glasses on, the quicker their eyes will adjust to them and the more their vision will improve.

### **The glasses look very strong**

The strength of the lenses used in the glasses will depend on how long or short sighted your child is.

If your child is long sighted their eyes will look bigger (more magnified) the stronger their lenses are. However don't be alarmed at the amount of magnification created by your child's lenses – this can happen even if they only have slight long sightedness, as the lens acts like a magnifying glass to bring things closer.

If your child is short sighted their eyes may appear smaller through the lenses for short sight correction.

## **My child says that things are blurred with glasses on and they can see better without them**

This can sometimes be a problem at first, especially for children who are long sighted.

Before having glasses, your child had to make a lot of extra focusing effort to see clearly; the glasses are now doing some or all of this for them and this may take time to get used to. Research has shown that it can take children up to 18 weeks to adapt to their glasses and the vision to improve to its best level with glasses alone.

***Please persevere with getting your child to wear their glasses – the more they wear their glasses the clearer their vision will become.***

## **Will my child always need glasses?**

This is different for every child. It will depend on their prescription and whether they also have an associated squint.

Vision continues developing during childhood until around the age of 8. It is therefore important for your child to wear their glasses full time during these years to allow their vision to develop to full potential.

However, many children need to continue wearing glasses into their teenage years and some will need them all their life.

## Choosing suitable glasses

Please make sure your child is with you when you both decide on which style of glasses to go for. Your child needs to be happy with their glasses or they won't want to wear them.

Choosing the correct shape and size of glasses frame is essential, as we do not want your child to look over their glasses. It is important that the top of the glasses frame follows the line of your child's eyebrows; the top of the frame should not sit below this line. The Optician or Optometrist will be able to help advise you and your child on the best frames to choose.

Your child will also need to be with you when the glasses are ready to collect. This is because they will need to have them checked by either a qualified Dispensing Optician or an Optometrist.

The glasses will need regular adjustments to ensure that they are comfortable and that they do not slip down their nose.

### **What do I do if my child loses or breaks their glasses?**

Any registered Optometrist or Dispensing Optician can fill in an NHS Repair Form (**GOS 4**) on your behalf. This usually covers the cost of repair or replacement.

If you choose expensive frames or lenses you may have to contribute towards the cost of repairing the glasses.

Please make sure that you take their glasses to be repaired straight away, even if your child is due for an eye examination soon. You can show the Optometrist or Optician this leaflet so they understand the importance of repairing the glasses immediately.

An older pair of glasses can often be used as a spare pair if your child's current glasses are broken and cannot be repaired straight away.

Keep a copy of your child's prescription statement safe in case the glasses can't be repaired and a new pair needs to be made. The prescription will be valid for 3-12 months depending on the age of your child, their eye condition and their prescription.

## Is my child entitled to a voucher for a second pair of glasses?

No, the Optometrist in the hospital can only issue one voucher per child. They can also only issue a voucher if there is a clinical need to change the lenses or frame, for example, if your child's prescription has changed or their frames are not suitable.

If you want your child to have a spare pair of glasses you can purchase a second pair. Some Opticians do special offers on the second pair of glasses. It is important that you keep a copy of the latest prescription safe for this purpose.

## What do I do if my child is not happy with the fit of the glasses?

Please go back to the qualified Dispensing Optician who made up the glasses. They will be responsible for making the necessary changes to make sure the glasses fit well.

If you have any further questions relating to your child's eyesight or problems with wearing the glasses they have been prescribed, please contact the **Orthoptic Department:**

**Tel: 01865 234 742 (9.00am - 4.30pm Monday to Friday)**

If your query relates to glasses that were dispensed and issued at the Oxford Eye Hospital, please contact the **Optometry Department on:**

**Tel: 01865 234 486 (9.00am - 4.45pm Monday to Friday)**



If you have a specific requirement, need an interpreter, a document in Easy Read, another language, large print, Braille or audio version, please call **01865 221 473** or email **[PALSJR@ouh.nhs.uk](mailto:PALSJR@ouh.nhs.uk)**

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