



**University  
Hospitals Sussex**  
NHS Foundation Trust

# Atropine occlusion with atropine eye drops

Orthoptic Department

Patient information

## **What is this information about?**

This information is intended to answer some of the questions of parents or carers of children having Atropine occlusion therapy. It explains what this therapy is, how it is given to your child as eye drops, and how it works.

## **Why have I been given this information?**

You have been given this information because your child, or someone you are caring for, needs atropine eye drops. Reading this information will help you to give your child these drops safely.

It is also important to be aware of any side effects, so keep this information in a safe place to refer to when you need to. You can also share this information with your child's school.

## **What is Atropine occlusion?**

Atropine eye drops are a drug which may be used as a first treatment of amblyopia (poor vision) or when patching treatment is not successful.

Occlusion means blocking or covering.

The main aim of Atropine occlusion is to blur the vision in your child's good eye when they are looking at objects close up. This helps to make the vision in the weaker eye stronger.

## What are the effects of Atropine?

Atropine has two effects when put in the eyes:

- It stops the eye from focussing properly which blurs the child's near (or close-up) vision temporarily.
- It dilates the pupil (makes the black part of the eye larger).  
While using Atropine, the affected eye will be sensitive to light and the pupil of that eye will remain widely dilated.

## How does Atropine occlusion work?

Atropine blurs the near vision in the good eye by preventing the lens inside the eye from focussing. This means that the vision in the weaker eye usually improves over time.

You will be able to tell if the drop has been properly put into the eye, as you will see the pupil is dilated (big). If the pupil is not dilated, then you know you will need to put another drop in.

## How often should the drops be used?

The orthoptist (specialist eye doctor) will tell you how many times and when to use the drops in your child's 'good' eye.

At first, you may be advised to put them in in the morning, to watch for any side effects. After this you can put them in while your child is asleep, if this is easier.

## How long do the effects last?

Atropine will cause blurred vision that may last up to seven days or more after using it. The pupil may remain dilated for up to 14 days.

## How should I use the drops?

1. Wash your hands before and after putting the drops in. Your child can lie on their back or sit with their head tipped back.
2. Gently pull down the lower eyelid of the good eye with your finger.
3. Put one drop of Atropine into the area between the eyeball and the lower eyelid.
4. Press gently on the inner corner of the lower eyelid for one minute. This will stop the Atropine draining away down the tear duct into the nose. If this happened, it would be swallowed and then absorbed systemically.

If your child gets very distressed it may be easier to put the drop in when asleep.

Continue giving them the drops as instructed until the next appointment.

## What should I be aware of before I give my child atropine?

### Do

- ✓ Tell your ophthalmologist or orthoptist if your child is taking any other medication before using Atropine for the first time.

### Do not

- ✗ Use Atropine if your child suffers from heart problems or has a high fever.

## Are there any side effects?

- The dilated eye may be sensitive to light so avoid bright light. Wearing a sun hat may help on sunny days.
- The eye often stings for a short time after the drop is put in.

**If your child becomes hot, irritable, complains of a sore throat or develops any of the following symptoms:**

- a rash
- flushed cheeks
- headaches
- nausea or vomiting (feeling or being sick)
- irregular heartbeat

**stop using the Atropine and seek medical advice immediately.**

## How should I store the Atropine?

It is important that you keep Atropine in a dry place, away from strong light and below 25°C (room temperature). Do not continue using Atropine if you have missed an appointment as this may induce unwanted effects.

It is very important to attend your follow-up appointments to monitor the effect of Atropine occlusion on the child's vision.

### **Warning**

**Atropine can be poisonous if swallowed. Keep all medicines out of the reach of children.**

## Do I need to tell anyone that my child is using Atropine eye drops?

If your child is at school, please tell their teacher about the Atropine treatment. Your child may wish to hold books closer, their writing may be less neat, and they will be sensitive to bright lights.

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

### Instructions for the patient

Atropine to be put into the \_\_\_\_\_ eye for two days in a row.

- Daily
- Alternate days
- Twice weekly
- Weekly

## Who can I contact for further information and advice?

Please contact your orthoptist:

**St Richard's Hospital Orthoptists** 01243 831499

**Southlands Hospital Orthoptists** 01273 446077

**Sussex Eye Hospital Orthoptists** 01273 664872

**Princess Royal Hospital Orthoptists**  
01444 441881 Ext. 68305

## Useful information:

**Squintclinic**      [www.squintclinic.com](http://www.squintclinic.com)

Today's research is tomorrow's treatments.  
That's why UHSx is proud to be a research-active Trust.

Find out how you can get involved. Visit our website  
[www.uhsussex.nhs.uk/research-and-innovation/  
information-for-patients-and-public](http://www.uhsussex.nhs.uk/research-and-innovation/information-for-patients-and-public)  
or scan the QR code



Ref. number: 2211.1 ORT01  
Publication date: 04/2026  
Review date: 04/2029

© University Hospitals Sussex NHS Foundation Trust Disclaimer:  
The information in this leaflet is for guidance purposes only and is in no way  
intended to replace professional clinical advice by a qualified practitioner.

