



**University  
Hospitals Sussex**  
NHS Foundation Trust

# Exotropia

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**Patient information**

## What is this information about?

This information is about exotropia.

### It explains:

- what exotropia is
- what may cause exotropia
- how exotropia can affect people who have it
- the ways in which we may treat exotropia
- where you can find further information and support.

## Why have I been given this information?

You have been given this information because you, a family member, or someone you are a carer for, has been diagnosed with exotropia.

Reading this information will help you to know what to expect from the condition and any treatment you may have for it. Following the advice in this information can help to improve your exotropia or stop it from getting worse.

## What is exotropia?

Exotropia is when one eye turns outwards away from the nose. It is a type of 'strabismus'. This is when the eyes are not pointing in the same direction and working together.

## What causes it?

For some people we cannot tell what has caused them to have exotropia. It is more usual for people to have it if other members of their family have also had it.

Other things which may make it more likely for someone to have exotropia include:

- being born pre-term (premature)
- trauma. For example, a head-injury; a fractured eye-socket or an injury that a baby gets during birth
- other eye conditions
- other issues with their general health or development.

## How might having exotropia affect me or my child?

**Children who develop exotropia early in life may:**

- not have full 3D vision
- have reduced vision in the affected eye.

**Adults who develop exotropia may get:**

- double vision
- headaches
- eye-strain.

People with exotropia may find it hard to judge distances, which can affect everyday activities like sports, driving or walking down stairs.

Having exotropia may make people feel less confident and affect how they are with other people (their social development).

## How is it diagnosed?

Parents will usually notice if one of their child's eyes is turned aside.

An orthoptist will confirm this by doing some tests to check for exotropia. This involves a person looking at pictures or letters while the orthoptist checks the position and movement of their eyes.

Sometimes exotropia may switch between the eyes. This is usually a good thing in children. It helps their vision to develop more equally in both eyes. Sometimes this switching happens because treatment of exotropia has worked as it should.

In many people with exotropia the eyes will sometimes appear straight. How often the eye turns may depend on:

- where you are looking (near or far)
- how tired or unwell you are.

Bright sunlight may cause exotropia to become more obvious.

## What treatment might I get for exotropia?

There are various treatments that you may have. Everyone's exotropia is different, and the orthoptist will advise you which treatments may be right for you.

### Treatments include:

- **Glasses.** Some people's exotropia may be related to being short-sighted so we may use glasses in their treatment.
- **Eye exercises.** You may be asked to do exercises to try and reduce the amount of time the eye turns outwards. This can reduce symptoms such as double vision or headache.
- **An operation.** If exotropia remains a problem after treatment with glasses, exercises, or both we may offer some people an operation. This may:
  - improve their 3D vision
  - reduce double vision
  - reduce symptoms such as headache and eye strain.

For some people, the aim of the operation is only to reduce the appearance of the exotropia.

**Before we can offer you or your child an operation:**

- any vision problems that you or your child have should be treated
- you or your child will need to have an appointment with a surgeon who is a specialist in doing eye operations (consultant ophthalmologist). They will decide if an operation is right for you based on your condition.

Most children will not be offered an operation until they are 6 or 7 years old when the results are likely to be better.

An operation to correct strabismus so that the eye appears to be straighter can be done at any age.

Your orthoptist can send you (refer you) to see the consultant ophthalmologist.

If you have an operation, the surgeon will adjust the position of the eye muscles to make your eye straighter.

## **How might exotropia affect my vision?**

People with exotropia often have reduced vision. This condition is known as 'amblyopia'.

For some people, amblyopia can be treated with eye patches or by putting eye drops in the better seeing eye. This can improve vision in the weaker eye.

Amblyopia can usually be treated in children up to the age of 8. After this, treatment may not work as well. Your Orthoptist will speak with you about whether treatment is right for you or your child.

### **Be aware**

This treatment will not cure exotropia but aims to improve your vision.

## When will you stop monitoring or treating my exotropia?

- **For children** we will keep checking their exotropia and how it is affecting them until:
  - the orthoptist thinks that the condition is stable and being managed in the best way
  - you and your child are happy with the way their eyes appear and how they are working.
- **For adults** their condition will be checked and treated until we know what is causing it and have found a way to manage it if possible.

## How well might my treatment work?

Treatment usually works best to make sure that vision develops as it should if:

- exotropia is found and diagnosed as early as possible
- treatment begins as soon as it can after diagnosis.

3D vision may also improve with early diagnosis and treatment, but often it does not.

## What can I do to make sure that my treatment works as well as possible?

### Do

- ✓ Follow any advice or instructions that you are given by your orthoptist, optician or surgeon about your treatments. For example, wear glasses or an eye patch in the way that we have advised and for as long as you should.

This is very important. Not following instructions or advice could mean that your treatment does not work as it should. This can have a serious long-term impact on your condition which may not improve or may even get worse.

# I am finding it difficult to follow the advice or instructions that I have been given or to stick to my treatment. What should I do?

## Do

- ✓ Contact your orthoptist. They will be able to give you advice if you are having difficulty with a treatment. They may be able to suggest a different treatment option.

## Please use the contact numbers below:

**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**

## Where can I find further information about esotropia?

You can find further information on the [SquintClinic.com](https://www.squintclinic.com) website.

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  
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information-for-patients-and-public](http://www.uhsussex.nhs.uk/research-and-innovation/information-for-patients-and-public)  
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Ref. number: 2220.2 ORT10  
Publication date: 11/2025  
Review date: 11/2028

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