



**University
Hospitals Sussex**
NHS Foundation Trust

Duane's Retraction Syndrome (DRS)

Ophthalmology

Patient information

What is this information about?

This information is about Duane's Retraction Syndrome (DRS).

It explains:

- what Duane's Retraction Syndrome (DRS) is
- what causes DRS
- what eye movements may be affected
- how DRS can affect people who have it
- the ways in which we may treat DRS
- 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 DRS.

Reading this information will help you to know what to expect from the condition and any treatment you may have for it.

What is DRS?

DRS is a condition which means that you cannot fully move your eyes from side to side (horizontally). People are born with DRS, but it may be detected at any age.

What causes some people to have DRS?

DRS happens as a baby develops in the womb. Nerves which link the brain to the eyes do not grow and connect in the way that they should. Because of this, when a person with DRS moves their eyes the wrong eye muscles tighten-up (contract). There is no way to stop this from happening.

What types of eye movement may be affected by DRS?

There are different types of Duane's syndrome. How DRS affects eye movement is different for everyone.

DRS may affect these eye movements:

- outward movement (away from the nose)
- inward movement (towards the nose)
- both inward and outward movement.

For most people with DRS, only one eye is affected but it can affect both eyes.

How might having DRS affect me (or my child)?

This depends on how DRS affects your eye movement. People may move their head differently or hold it in a different position to make up for (compensate for) a lack of movement of their eye. For example, they may turn their head or face to one side so that they can use their eyes together.

It is usual for people with DRS to do this and there is no need for them to stop doing it.

Some people with DRS can use their eyes together in the usual way when they are looking straight ahead. Their eyes are only out of line (misaligned) when they look to the side. They may prefer to move their head rather than their eyes when they look to the side.

My eye looks smaller sometimes. Is this usual for people with DRS?

Yes. One of the main things that happens if you have DRS is 'globe (eyeball) retraction'. When your affected eye moves towards your nose, your eyeball moves backwards into your eye socket.

This makes it look smaller.

Globe retraction happens because more than one muscle tightens-up at the same time. This pulls your eye backwards. Your eye may also move quickly up or down while it is pulled back (retracted) into your eye socket.

What symptoms of DRS might I get?

Most people who have DRS are not concerned by side-effects or symptoms. Some people get double vision when they try to look to one side

Is DRS linked with any other health conditions?

There may be a link between DRS and hearing loss, but this is not usual. If you have any concerns, please ask your GP for advice.

Will I (or my child) need to wear glasses?

People with DRS are no more likely to need to wear glasses than people who do not have it.

What treatments are there for DRS?

It is not possible to cure DRS. This is because we cannot change how the nerves and muscles are connected.

Most people with DRS do not need treatment and do not have any symptoms.

Most children with DRS are likely to be referred to the Orthoptic department by their GP or health visitor at a young age. The Orthoptic service will send an appointment invitation about every 6 months. These appointments are to check that your child's vision is developing as it should.

We may give some children an eye-patch to wear over their better seeing eye for a few hours a day. This helps to correct their vision.

Will I (or my child) need an operation?

Most people with DRS do not need an operation. Some people may need an operation if they have:

- to hold their head in a difficult and uncomfortable position to be able to look to the side
- double vision which means it is very difficult for them to do everyday activities
- severe 'globe retraction'.

If you or your child have these symptoms we will talk with you about whether an operation may be right for you.

Be aware,

operations to treat DRS do not work for some people. This is because their nerves are not connected in the right way to send 'messages' to the eye muscles to make them work.

Who can I contact if I have other questions about DRS and its treatment or would like further information or support?

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

Where can I find further information about DRS?

Squintclinic

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/
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