**What is Squint and Why Does It Matter?**

Squint, also known as strabismus, is a condition where the eyes do not align properly. In a healthy visual system, both eyes work together to focus on a single point, providing clear, single vision and depth perception. With squint, one eye may turn inward (esotropia), outward (exotropia), upward (hypertropia), or downward (hypotropia). This misalignment can be constant or intermittent and affects people of all ages, though it's most commonly diagnosed in children.

**Squint can result from various factors, often a combination of genetic and environmental influences:**

Hereditary: Runs in families; if a parent or sibling has it, the risk increases.

Refractive Errors: Uncorrected farsightedness (hyperopia) strains eye muscles.

Neurological Issues: Conditions like cerebral palsy, Down syndrome, or brain injuries can disrupt eye control.

Eye Muscle Problems: Weakness or paralysis in the six extraocular muscles that move the eyes.

Other Triggers: Premature birth, infections, or prolonged screen time in children.

Early detection is crucial, as untreated squint can lead to amblyopia ("lazy eye"), where the brain ignores input from the misaligned eye, potentially causing permanent vision loss.

**Common indicators include:**

Visible eye misalignment, especially when focusing on near or far objects.

Frequent head tilting or turning to compensate for double vision.

Closing or covering one eye to see better.

Poor depth perception, leading to clumsiness or difficulty with tasks like catching a ball.

In children: Squinting in bright light, excessive eye rubbing, or avoidance of reading activities.

If you notice these, consult an eye care professional (optometrist or ophthalmologist) for a comprehensive exam.

Vision Therapy – A Non-Surgical Path to Better Alignment

Vision therapy is an Optometrist- supervised program of customized eye exercises designed to improve eye coordination, focus, and tracking. Unlike glasses or surgery, it retrains the brain-eye connection to enhance natural alignment and binocular function. It's evidence-based, often recommended by the American Optometric Association for non-surgical squint management, especially in mild to moderate cases.

Duration: Typically 30-45 minutes per session, 1-2 times weekly for 3-12 months, plus home exercises.

Setting: Conducted in-office with tools like prisms, filters, and computer-based programs; supported by at-home activities.

**Who Benefits**?:

Children (ages 6-18) see the highest success rates, but adults with acquired squint (e.g., from stroke) can improve too.

**How Vision Therapy Works**

Therapy targets the underlying visual skills deficits through progressive exercises:

Eye Teaming : Activities to strengthen convergence/divergence, like Brock string exercises (beads on a string to align eyes).

Tracking and Saccades: Smooth pursuit (following a moving target) and quick shifts (e.g., jumping gaze between dots on a chart) to build fluid eye movement.

Accommodation-Focus Drills: Shifting focus between near and far objects to reduce strain.

Stereopsis Enhancement: Through game based activities to develop 3D depth perception.

Anti-Suppression Techniques: Patching or filters to force the brain to use both eyes equally.

Sessions are fun and game-like for kids—think video games, trampoline jumps with visual cues, or marble mazes—to ensure compliance.

**Success Rates**

Vision therapy offers holistic improvements without invasive procedures:

70-90% of patients achieve better alignment and reduced symptoms. It can eliminate the need for surgery in 50-75% of cases of intermittent outward deviation.

It Enhances reading speed, attention span, and coordination; reduces headaches and fatigue.