

Our Ref: DM/SFD/AH1565586

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Department of Ophthalmology
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Dear Dr Tong

Gwendolyn Vials MOORE
2 Coronation Drive
Crosby, Liverpool L23 3BN

D.O.B. 22/08/2014
Hospital No. AH1565586
NHS No. 701 057 1422

Diagnosis

Accommodative right/alternating esotropia.

History/Current Symptoms

Gwendolyn attended the Eye Clinic today for a routine follow-up assessment. She currently has glasses to correct a moderate amount of long-sightedness in both eyes, but she is unable to wear the glasses consistently due to the presence of her bone-anchored hearing aids on a headband.

Examination

The orthoptist has confirmed that Gwendolyn's eyes are quite straight with the glasses on but when she removes them her eyes do turn inwards, especially the right eye. It was not possible to obtain any formal visual acuity measurements either with or without the glasses, but the alternation of Gwendolyn's squint indicates that she has relatively equal visual acuity right and left.

Cycloplegic refraction shows that Gwendolyn is slightly more long-sighted than the current glasses correct for. Ophthalmoscopy shows clear media and healthy fundi as seen.

Management Plan

I have issued a voucher for a new pair of glasses to a slightly stronger prescription:

EYE	SPHERE	CYLINDER	AXIS		EYE	SPHERE	CYLINDER	AXIS
Right	+3.50	+0.50	180		Left	+3.50	+0.50	180

This prescription is approximately +0.50 dioptries less than the full cycloplegic findings to account for ciliary body tonus. I have also referred Gwendolyn to the dispensing optician at

Manchester Royal Eye Hospital (Mr Stephen Golding) to facilitate a dispense which is conducive to wearing both the glasses and the hearing aids at the same time.

Ideally, Gwendolyn should wear her glasses full-time to correct the inward turn of her eyes and also to provide the best visual acuity possible. When Gwendolyn is not wearing her glasses both the distance and near vision detail will be blurred, which could have some impact on her navigational vision. It is not possible to quantify the level of vision Gwendolyn has, either with or without her glasses, due to her young age and limitation of testing ability at the moment. It is also possible that Gwendolyn will need a stronger prescription for close work in the future due to hypo-accommodation, which is common in Down syndrome children.

When Gwendolyn is wearing her general distance prescription more consistently, we can assess her need for a reading addition using dynamic retinoscopy.

Follow-up Arrangements

I have requested a 3 month follow-up in the Orthoptic Clinic to monitor Gwendolyn's progress with her new glasses.

Yours sincerely

Electronically checked and authorised by Derek McPhee

Derek McPhee
Specialist Optometrist

Copy to:

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