

# Nystagmus in children (involuntary eye movements)

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## What is nystagmus?

Nystagmus is an involuntary beating (wobbling) movement of either one or both eyes. The eyes may 'wobble' from side to side, up and down or rotate slightly. There are different types of nystagmus which have different causes.

It is usually non-progressive (doesn't get worse). However, it is usually a lifelong condition.

## What causes nystagmus?

There are a number of causes of nystagmus. These can be divided into two groups:

- Sensory deprivation (an obstruction to vision leading to reduced vision)
- Idiopathic (no clear cause)

The commonest cause of nystagmus is albinism (when the gene for making melanin is faulty). Nystagmus is also quite often linked to having a squint.

## What are the symptoms?

- Nystagmus in early childhood doesn't usually cause any symptoms.
- Older children may notice that their vision isn't as clear as it could be.
- Adults and older children who develop nystagmus may get oscillopsia – this is when objects that are stationary appear to move side to side or shimmer.
- You may notice that your child's nystagmus looks more noticeable if they have to wear an eye patch. Do not worry; this is temporary and will not make their nystagmus worse.
- You may notice your child's nystagmus looks more noticeable if they are unwell or overtired and their vision may also become more blurred.

## How is it diagnosed?

Nystagmus can be diagnosed by an Ophthalmologist or an Orthoptist, by observing your child's eyes as part of his/her eye examination.

Your child may be referred for eye movement recording to determine the exact type of nystagmus they have. He or she may also be referred to the paediatrician.

## How is it treated?

There is currently no specific treatment for nystagmus, however, if your child needs glasses then regular glasses updates can help improve their vision.

Contact lenses may also help to reduce the wobble of your child's eyes. However, these can only be considered once your child is old enough to put contact lenses in by themselves.

## What is the prognosis or expected outcome of treatment?

Vision is usually affected by nystagmus. The amount that vision can be affected varies widely from person to person. Some children may have good vision whilst others may have quite reduced vision.

In some cases glasses are required. If this is the case, they can help to improve the vision.

## Follow up

Children's vision develops from birth to 8 years of age.

If your child has nystagmus, it is likely that we will offer regular orthoptic appointments to monitor their vision until your child is 7 or 8 years old. In addition to this, your child will be offered a glasses test every 12 months, unless the clinician requests you have this done sooner.

## Help available

If your child's vision is significantly reduced by nystagmus, they may be suitable for sight impairment registration.

If your child's vision is significantly affected by nystagmus, it may be helpful for your child and their teacher to have support at school / nursery to understand the condition and its implications in the classroom. This support can be provided by the visual impairment/ROVIC (rehabilitation officers for visually impaired children) team.

## Further information

If you would like any further information, please contact the orthoptic department on 01271322469.

The Nystagmus Network – provides useful advice and support and can be accessed online at: <http://nystagmusnetwork.org/>

The RNIB is another organisation that can offer support and advice, and can be accessed at: <http://www.rnib.org.uk/eye-health-eye-conditions-z-eye-conditions/nystagmus>

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## **PALS**

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