

# Surgical correction or therapeutic intervention to correct Strabismus in Adults

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| **Commissioning decision** | Surgery or botox injection to correct strabismus in adults is funded by the CCG for patients who meet the following criteria. |

# Policy Statement:

Surgery or interventions to correct strabismus in adults will only be funded by the CCG for patients who meet the following criteria:

* Strabismus with no binocular potential and normal eye movements measuring more than 20 prism dioptres

**OR**

* The diagnostic use of Botulinum Toxin in adults with non-functional strabismus measuring greater than 20 prism dioptres.

**OR**

* The therapeutic repeat use of Botulinum Toxin for adults with non-functional strabismus measuring greater than 20 prism dioptres who are unable to undergo further strabismus surgery, or when general anaesthesia is contraindicated.

Revision Surgery – revision or repeat surgeries - **Criteria to Access Treatment –** **INDIVIDUAL FUNDING APPROVAL FUNDING REQUIRED**

Revision/repeat surgeries are not routinely commissioned and an Individual Funding Request must be made to the CCG for consideration prior to any treatment taking place.

# Rationale:

There is a strong evidence base for the benefits of strabismus surgery even if this does not result in an improvement or restoration of a patient’s binocular vision. The rationale behind this policy is to focus resources on those patients who are most likely to benefit from this type of surgery i.e. those with large angle squints.

# Plain English Summary:

Strabismus or squint means a misalignment of the two eyes. It may arise for a variety of reasons and may be present from birth or arise at any time in life. If strabismus arises after the visual system matures (around the age of 8), strabismus usually results in diplopia (double vision). If it arises at an earlier age, the brain adapts by suppressing the image from the squinting eye, so that diplopia is no longer a problem, but this adaptation comes at the price of loss of stereopsis (detailed depth perception) and sometimes at the price of reduced visual acuity in one eye (amblyopia or lazy eye).

If you do not meet one of the above criteria for strabismus surgery and your doctor believes that you have exceptional circumstances they can submit an Individual Funding Request application to the CCG in order to seek funding approval for your surgery. The CCG will review your case and if we agree that your circumstances are exceptional we will authorise funding.

# Evidence base:

Royal College of Ophthalmologists document on adult strabismus: surgeryhttps://www.rcophth.ac.uk/wp-content/uploads/2017/09/Strabismus-surgery-for-adults-in-the-United-Kingdom-indications-evidence-base-and-benefits.pdf

For further information please contact [GLCCG.IFR@nhs.net](mailto:GLCCG.IFR@nhs.net)

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| **Date of publication** | 23.08.2018 |
| **Policy review date** | September 2020 |

**Consultation**

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| **Consultee** | **Date** |
| GP Membership (via What’s New This Week) |  |
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| Has the consultation included patient representatives? | Yes (via ECCP membership) |

**Policy sign off**

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| **Reviewing Body** | **Date of review** |
| Effective Clinical Commissioning Policy Group | 21 June 2018 |
| Integrated Governance and Quality Committee | 23.08.2018 |

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| **Version No** | **Type of change** | **Date** | **Description of change** |
| 1.0 | Initial document | June 2018 | New Policy |
| 2.0 | Refinement of criteria & change of category to CBA from INNF | Aug 2018 |  |
| 3.0 | Date | September 2019 | Policy review date changed to September 2020 |