

Surgical correction or therapeutic intervention to correct Strabismus in Adults

Commissioning decision	Surgery or Botulinum Toxin (botox) injection to correct strabismus (or a <i>squint</i> where the eyes point in different directions) in adults is funded by the ICB for patients who meet the following criteria.
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Policy Statement:

Surgery or interventions to correct strabismus (eye squint) in adults will only be funded by the ICB for patients who meet the following criteria:

- Strabismus measuring more than 20 prism diopters (eye squint) in people who cannot use both eyes together and are not likely to in the future (have no binocular potential), or have a smaller angle of strabismus but abnormal eye movements.

OR

- The diagnostic use of Botulinum Toxin in adults who cannot use both eyes together because of strabismus (eye squint) which measures more than 20 prism dioptres.

OR

- The therapeutic repeat use of Botulinum Toxin for adults who cannot use both eyes together because of strabismus (eye squint) which measures more than 20 prism dioptres who are unable to undergo further strabismus surgery, or when general anaesthesia is contraindicated.

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

Rationale:

There is good evidence that strabismus (eye squint) surgery is beneficial to patients, even if this does not result in an improvement or restoration of their ability to see using both eyes (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. Surgery or interventions to correct a squint or eye misalignment in adults will only be funded by the ICB for patients who meet the following criteria:

- Where there are normal eye movements, but the squint (eye misalignment) is measured to be over a certain angle (20 prism dioptres) and treatment will not result problematic double vision.

OR

- Where the squint (eye misalignment) is measured to be over a certain angle (20 prism dioptres) and Botox (botulinum toxin) injection can be given which causes weakening of the muscle around the eye (reducing the squint) for up to three months, for diagnostic

Policy Category:**CBA****Who usually applies for funding?****Not Applicable**

reasons to assess whether surgery will be helpful.

OR

- Where the squint (eye misalignment) is measured to be over a certain angle (20 prism dioptres), and the repeated use of Botox (botulinum toxin) injections into the muscle around the eye is helpful for adults for whom surgery is not possible or contraindicated

If you do not meet one of the above criteria for eye misalignment surgery and your doctor believes that you have exceptional circumstances, they can submit an Individual Funding Request application to the ICB in order to seek funding approval for treatment. The ICB 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: surgery

<https://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 GLICB.IFR@nhs.net

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Policy sign off

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

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
4.0	Wording revised	June 2020	Policy wording revised to plain English summary.
5.0	Wording revised & Date	17.09.20	Plain English Summary Updated. Review date changed to Sept 2023
6.0	Date	12.09.23	Policy review date changed to September 2026