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Case Report

Bilateral Medial RECTII Recessions as a Surgical Modality in Cases of Bilateral Alternating Infantile Esotropia in 6 Months Old Make Twins

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Abstract

Squint also termed as strabismus is a common occular disorder characterised by an abnormal occular deviation with loss of normal ophthalmic paralisam and paucity of binocular vision which has following stages.

- Simultaneous perception.
- Fusion
- Stereopsis

Keywords: Squint; RECTII; Cosmetic

Introduction

Main aim of squint is not only to correct normal angle of deviation but to ensure normal visual status as much as possible for this to happen early diagnosis and prompt management by an expert in the field of squint is very important.

So it becomes very important for every parent to seek the advice of ophthalmic experts if they notice any abnormal deviation of their children.

In past squint was thought to be a stigma or Shame and was not treated in time and by the time child was brought for treatment eye was already in the state of lazy eye and treatment was only cosmetic.

Main Investigations in every case of squint is assessment of vision mydriatic refraction and fundoscopy.

Since tgeir6 are some Ophthalmic conditions which cause squint they are

- Retinoblastoma
- Coats disease
- Esotropia
- Exotropia
- Hypertropia
- Hypotropia
- Heterophoria
- Pseudo squint
- Cyclophoria
- Orthophoria
- Microtropia

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- Paralytic squint
- Non paralytic squint
- Commitment
- Incommitant
- Accommodative
- Non Accommodative

Bilateral infantile esotropia presents as crossed fixation uncrossed fixation av pattern broad angle overaction of inferior oblique covering the normal eye will make the child to cry appropriate heading abuse of using mobiles and playing games by children of age group of 5 to 7 years.

Manifestations are

- Headache
- Eye ache eye strain irritability
- Change in behaviour of children

Vomiting vertigo fainting delayed Mike stones Blued Vision Squint diplopia even epileptic attacks.

So it is very important that parents should not allow their children to overuse mobile it is better to encourage them for sports.

Case Report

Few years ago 6 months old male twins were seen by me with parents having noticed bilateral inward occular inward deviation since 3 months. Ft normally delivered make twins b from non cousin married couple no history of exposure to oxygen or jaundice. Breast fed normal mile stones on exam Bilateral alternating infantile Esotropia of 20nton25 degrees. Ocular movement full and within normal limits, Fundi normal.

Discussion and Conclusion

5 mm medial RECTII RECESSIONS was advocated as a surgical procedure. This bil 5 mm medial RECTII recessions is a very satisfactory procedure since their is not only a very good correction of angle of squint but the ophthalmic reaction this is because of the

fact that we do recessions of medial RECTII and not resection that bid cutting of muscles which ensures reaction.

Some of mild Complications

- Under correction
- Overaction of INF oblique
- Amblyopia
- Dvd dissociated Vertical deviation Accommodative element.

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