

EARLY ONSET ESOTROPIA PERSONAL VIEW

- *Mahmoud Aly Rageh , MD.
- *Research Institute of Ophthalmology.

- *Esotropia Occuring during the first 6 months of life.

*Names

- *Congenital Esotropia
- *Essential infantile Esotropia
- *Idiopathic infantile Esotropia
- *Early onset Esotropia
- *Early Acquired Esotropia
- *Ciancia's syndrome

- *Subject of much debate with regard to its naming, diagnostic features , treatment and its onset.

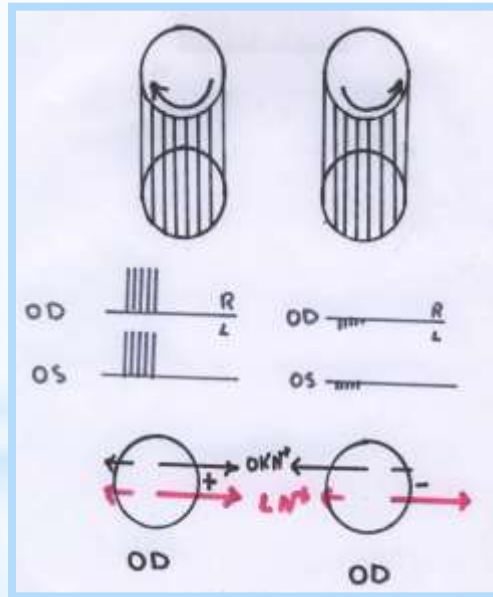
*Clinical Characteristics



- *Large size 15 degrees or more.
- *Stable
- *Variable.
- *No CNS anomalies
- *Pseudo defective abduction
- *Inferior oblique overaction
- *DVD
- *Latent and manifest latent nystagmus



Pathogenesis



* Abnormal head posture (Discordant torticollis)



*Affecting either eye or cross fixation

*Any state of refraction

*ETIOLOGY

*Unknown

*Pathogenesis

- *Accommodative in 15%
- *Hypertonic medial recti without nystagmus.
- *Hypertonic medial recti with nystagmus.
- *(Nystagmus blockage syndrome-Ciancia's Syndrome)

*Surgical Treatment

- *Botulinum toxin
- *Bimedial recession

*Onset

- *Recently between 6 and 9 months
(American School)

*Target

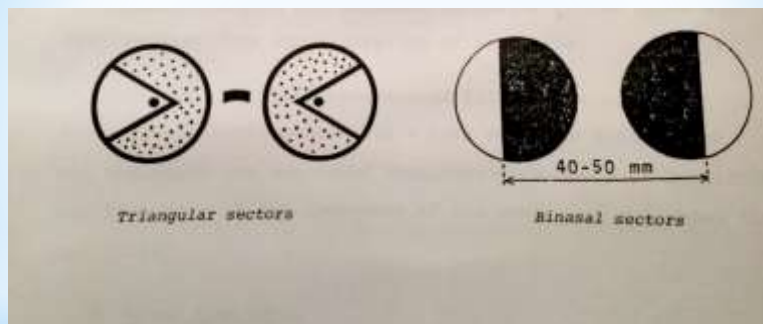
- *Microtropia of 10 prism diopters with peripheral fusion and gross stereopsis

*Personal view

*ONSET

*Between one and two years

*Binasal Sectors



- *Penalization for near if amblyopia is present

*Surgical Treatment

- *Bimedial anchored hang back recession with or without faden sutures .
- *Surgical correction of other EOMs anomalies

Faden

$$R = F \times A$$



*When to use faden sutures?

- *NBS
- *Variable angle
- *Stable large angle that disappears under G.A.

*When not to use faden sutures?

- *Partially accommodative esotropia
- *Angle not corrected under G.A

*Personal Classification

- *Premacular esotropia
- *Postmacular esotropia

*Prognosis

- *Better for postmacular esotropia

*Re-Operation

- *Residual esotropia 5-10%
- *Consecutive exotropia (late) 30%

*Time of re-operation

*Immediate

*Thank you