

Exotropia (Eyes that Drift Out)

What is exotropia?

Exotropia literally means a turning out (*exo*, out + *tropia*, turning). It is the medical term for eyes that turn out.

Can exotropia cause permanently decreased vision?

Yes. The brain may develop the habit of ignoring an eye that turns out. Vision may not develop as well in that eye. The ability to use the eyes together may also decline, resulting in poorer depth perception. Poor vision in an eye that turns out is usually permanent unless treatment is begun at an early age.

Is exotropia common?

Yes, although it is more common for kids' eyes to turn in, rather than out. 1-2% of children will have some misalignment of the eyes.

Is all exotropia the same?

No. Exotropia may be constant (present all the time). More commonly it is intermittent (present only some of the time). Typically it is worse when the patient is tired. Exotropia is usually just a problem involving the eyes, and the brain's coordination of their movements, but occasionally it can be a sign of serious underlying disease.

Is exotropia the same thing as "lazy eye"?

Yes and no. People use the term "lazy eye" for exotropia, but also for other disorders, such as poor vision or a droopy eyelid. When people ask about "lazy eye", I usually try to clarify: "Do you mean 'lazy'/not straight, or 'lazy'/not seeing well, or both?" I also emphasize that the child is not lazy. Although an eye that drifts may straighten if the child concentrates harder, it is neither right nor fair to blame the drifting on poor concentration.

Does exotropia run in families?

Yes, but not in a predictable way. Families in which eye misalignment occurs should watch more closely for misalignment in their children.

Is it ever normal for a baby's eyes to drift out?

During the first 2-3 months of life, a baby's eyes may not always be straight. Coordination of the movement of the two eyes is still developing. By 3-4 months of age, though, the child's eyes should be straight at all times. A pediatric ophthalmologist should check any child 4 months or older whose eyes aren't straight.

How is exotropia treated?

Treatment often requires surgery. Glasses may help children found to be myopic (nearsighted). Patching the better seeing eye can improve vision in an eye that turns out, and may make it turn out less often, but usually cannot straighten the eye permanently.

Is prompt treatment of exotropia important?

Prompt evaluation is always important, but prompt treatment may not be essential in all cases. If there is decreased vision in the eye that turns out, or decreased ability to use the eyes together, these problems should be addressed.

What are the characteristics of intermittent exotropia?

Parents may notice one eye turning out, or the child squinting or closing one eye. Over time this behavior becomes more frequent. Ultimately, the eye may turn out permanently. Intermittent exotropia almost never goes away on its own, yet many parents are mistakenly told their child "will grow out of it".

What are the characteristics of constant exotropia?

An eye that stays turned out all the time may be due to poor vision in that eye. Or, an eye that occasionally drifted may eventually turn out permanently. Some people alternate which eye turns out. Unlike crossing, which commonly develops in infancy, constant exotropia is rarely present from birth unless there are other neurological problems.

Is it ever too late to straighten an eye that is turned out?

No. This a common misunderstanding among patients and some doctors. Surgery can always be done to straighten an eye. If the eye has poor vision due to longstanding misalignment, though, there may be nothing that can be done to improve the vision in that eye.