

## Atropine eye drops

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Atropine eye drops help your child develop the best vision possible.

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Information for parents  
from the 3V2 Eye Clinic

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## **Why does my child need atropine eye drops?**

One of your child's eyes has better vision than the other. Atropine eye drops blur the vision in this eye. This will force your child's brain to use the eye with weaker vision, instead of ignoring it. By training the brain to use the weaker eye, vision can develop normally in that eye.

Atropine drops won't work for all children or in all situations. Your eye doctor or Orthoptist will decide if atropine is the best treatment for your child.

If atropine is not a good choice for your child, he or she can wear a patch over the eye with better vision. This will achieve the same result.

### **Atropine eye drops do not replace glasses**

If your child needs glasses, he or she must continue to wear them.

You may find your child wears his or her glasses better while on the drops.

## **How do I put in the drops?**

1. Wash your hands.
2. With your child lying down, have your child look up and pull the lower eyelid down, to make a pouch.
3. Put one drop in the pouch, inside the lower eyelid. Wipe away any excess drop with a tissue.

If the drop misses the pouch area, wipe it off with a tissue and put in another drop.

If you are not sure the drop went in (and can't see it on your child's cheek or eyelid) wait until the next day before trying again. Overdosing may cause an allergic reaction.

4. Wash your hands after giving the drops. If atropine stays on your hands and you rub your eyes, it could dilate your eyes.

The Eye Clinic staff can give you more tips on putting in the drops.

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## **How do the drops work?**

One drop opens (dilates) the black centre part of the eye (pupil).

The medication in the drop blurs the near vision in that eye for several days. It has little effect on the distance vision.

As the drop only works for a few days, you must give your child a drop 2 to 3 times a week. Continue giving the drops until your doctor tells you to stop.

## **How long does my child need the drops?**

Atropine drops, just like patching, are needed until:

- your child's vision is the same in both eyes, or
- there is no further improvement in the vision of the weaker eye

If the vision in one eye becomes weak again, the drops can be restarted.

After the last drop is put in, it may take 10 to 14 days for the pupil to return to normal size.

## **What side effects are possible?**

Atropine does not sting the eyes or hurt the coloured part of the eye (iris).

The most common side effect is a flushed face. If you notice this, call the clinic and we will adjust the dose or timing of the drops. Allergic reactions, though rare, may include swelling of the eyelids, fever, bloating, change in heart rate, agitation or confusion.

If your child is sensitive to light, he or she can wear sunglasses or a hat when outdoors.

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## **What should I remember while my child is getting these eye drops?**

There are some medications your child should not take while having atropine drops (such as cough syrups). Talk with your pharmacist to know whether atropine could interact with your child's other medications.

If your child needs surgery for any reason, tell the doctor that your child is getting atropine eye drops. The doctor will likely stop the drops before your child goes to the hospital.

Use the eye drops as directed by the doctor.

## **Can my child still go to school?**

Yes. Let the school staff know that your child is getting atropine eye drops. Tell them not to be alarmed when they see that one of your child's pupils is larger than the other.

Add atropine drops to the school's list of medications for your child.

## **Should I put a drop in the eye, on the morning of my child's visit to the Eye Clinic?**

If it is your first checkup after starting the drops, go ahead and give the drop, following your usual schedule.

For all other visits, stop the drops one week before each scheduled appointment at the Eye Clinic.

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