

# mirror of the soul

When it comes to eyes, early attention is crucial

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First smiles, first words, first steps. The first year of a baby's life is marked by many developmental and physical milestones. But there's an important aspect to a child's health which parents often overlook: vision. Like anything else regarding your child's health, his developing eyes should be carefully monitored.

Serious vision problems are often first noticed by a family member or friend. For Monique Handy of the West Bank, it was at bedtime when she began to notice something strange in her then-eight-month-old daughter Makenzy's left eye.

"I would see a white glare through her pupil in a certain light," Monique says. "Especially when I would put her to sleep in dim light, then I would see it really well."

The white glare Monique detected turned out to be a tumor. Makenzy was suffering from retinoblastoma, a rare and rapidly developing cancer that affects about one in 20,000 children. The terrifying experience ended with the removal of Makenzy's left eye a week before Christmas, and in relief with the news that the cancer had not yet spread. Now 15 months old, Makenzy continues to remain cancer-free but will need regular check ups

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to ensure the cancer does not develop in her right eye.

For parents of pre-verbal children, a story like Monique's can be truly frightening. Yet Dr. Bob Balkan, New Orleans Pediatric Ophthalmologist, assures that most visual problems have detectable signs and symptoms.

"Pediatricians do an excellent job. Very early on, they assess the red reflex, alignment, eye size and color, excessive tearing, pupil asymmetry, and they refer to a specialist when necessary,"

says Dr. Balkan. "If the baby is premature, or has a family history of tumors or childhood blindness, then an early exam is desirable. Otherwise four years old might be a good time for a first eye exam with an ophthalmologist."

According to Dr. Nora Oates, with Hales Pediatrics, the most common eye problem pediatricians see in the first year is blocked tear ducts. "Parents need not be overly concerned if their baby has watery eyes. Blocked tear ducts usually self-correct during the first year," says Dr. Oates. Within the first year, a baby's tiny tear ducts will grow as he grows and rectify the problem. If not, a pediatrician will recommend a specialist who can open the blocked duct.

While regular check ups can also help detect serious conditions such as glaucoma, retinoblastoma and cataracts, if parents notice something not quite right with their child's eyes they should definitely tell the pediatrician. Indicators that something may be wrong, for instance, include shaky eyes, a pupil that appears white, or noticing that your baby doesn't track an object with both eyes by three or four months.

"By two months of age your child should be able to smile when you are in his visual field, and by three months you should notice the eyes moving more in tandem," says Dr. Oates.

Many new parents may be concerned that their new baby's eyes look crossed. The wide bridge of the nose on your infant's developing face is generally the culprit for this variable



alignment, but rest assured, he should grow out of it during the first six weeks.

“While it is common for an infant’s eyes to look crossed during the first couple months of life, eye movement should be consistently synchronized, or aligned, by five to six month of age,” says Dr. Oates. If the eyes still cross at all beyond that age, you should call your pediatrician.

Lazy eye, also called amblyopia, is the leading cause of blindness in young people. When one eye’s reduced vision causes the brain to ignore the less-favored eye, permanent vision loss can occur in the weaker eye. Crossed-eyes, or strabismus, occur when the eyes are unable to aim at the same object. Affecting nearly one in 25 children, strabismus can generally be corrected with glasses; left untreated, it can develop into amblyopia.

Courtney Montgomery, of Uptown, was at the dinner table when she noticed her then-four-year-old daughter Ellie (now seven), began to look crossed-eyed. “It would happen whenever she would get tired at night and she wouldn’t be able to focus. Her eyes would go in and stay crossed.”

Ellie now wears glasses to help strengthen her muscles and correct the problem. Though strabismus can occur at any age, it is most common in babies and young children. Strabismus can occur part of the time, intermittent strabismus, or all of the time, constant strabismus. Intermittent strabismus may worsen when the eye muscles are tired, as in Ellie’s case, or during an illness. Caught early enough, it is correctable with the help of glasses, eye patches or other vision therapy.

By the time your child is three or four your doctor will be able to measure how well your child can see, or his visual acuity. Parents are often already clued into their child’s vision problems, maybe noticing excessive clumsiness or tripping. And sometimes even difficulty in school can be an indicator that a child is having trouble seeing.

More than anything parents need to watch for visual clues regarding their child’s eye care, because in the case of your child’s vision early detection is critical.

“The window for visual maturation is finite. Problems need to be identified and treated as early as possible or the brain may cut off signals to a disturbed eye causing permanent blindness,” says Dr. Balkan. “Secondly some eye problems suggest hidden maladies that are better treated early, like thyroid or growth hormone abnormalities.”

For those interested, a public health program called InfantSEE provides professional eye care, at no charge regardless of income, for infants nationwide. Participating optometrists give a one-time, comprehensive eye assessment to infants between six months and one year old, offering early detection of potential eye and vision problems. To find a participating optometrist, visit [www.infantsee.org](http://www.infantsee.org).

Your child’s eyes are one of the most important tools she has when it comes to managing her environment. Treat her vision development as you would her language development. Ultimately, a parent’s insight is key—trust your own eyes and intuition when looking out for your child’s vision health.

