Duane’s Retraction Syndrome

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Useful websites
http://www.mrcophth.com/eyeclipartchua/duanesyndrome.html
http://www.medic8.com/genetics/duanesyndrome.htm

If you have any other questions about Duane’s syndrome or your or your child’s treatment please speak to your Orthoptist.

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This leaflet is intended to answer some of the questions of patients or carers of patients, diagnosed with Duane’s Retraction Syndrome under the care of Western Sussex Hospitals NHS Trust.

**What is it?**
Commonly referred to as Duane’s Syndrome or Duane’s, this is a condition which means the eyes are unable to move fully in the horizontal (side to side) direction. Patients are born with the condition however, it may be diagnosed at any age.

**Are both eyes affected?**
One or both eyes may be affected.

**Why do I/my child have it?**
The condition happens when during a baby’s development in the womb there is a disruption in the growth of the nerves of the brain which control the muscles of the eyes. There is no way to prevent this.

**What does it look like?**
In most cases one eye is unable to move outwards away from the nose. There may be some movement or no movement at all. Duane’s syndrome may also mean that the eye does not move fully towards to the nose. How much the movement is affected will vary from person to person.

**The eye looks small sometimes, is this normal?**
The other main feature of Duane’s syndrome is globe retraction. This means that when the patient attempts to look towards the nose, with the affected eye, the eyeball (globe) moves backwards into the eye socket and the eye will appear smaller. This happens because the muscle which moves the eye outwards and that which moves the eye inwards contract (shrink) at the same time.

**What happens if I/my child has it?**
People with Duane’s syndrome may develop a compensatory head posture. This means that they will turn their head or face to minimise the effect of condition or to enable them to use their eyes together. This does not need to be discouraged.

**Is it the same as a squint?**
No, but some patients with Duane’s will also have a squint, most commonly meaning the eye will turn in towards to the nose, this may be more noticeable when the patient is looking at something far away (i.e. when driving or watching TV). Some patients with Duane’s syndrome will have an eye which drifts outwards; this is more noticeable when they look at something close to (i.e. when reading). For children under eight years old if there is a squint associated with Duane’s syndrome there is a risk that the vision will not develop normally and this will need to be treated, usually by patching.

**Are there any symptoms?**
Patients who have Duane’s syndrome do not normally complain of symptoms; however double vision can occur when attempting to look to one side.

**Will I/my child need to wear glasses?**
There is no evidence to suggest that people who have Duane’s syndrome are any more likely to need glasses than the rest of the population.

**Will I/my child need an operation?**
In a few cases surgery may be performed on the eye muscles. This is considered if

- You have a large squint
- You are using an uncomfortable head posture
- You have double vision
- There is severe globe retraction

You may also notice that the eye shoots up or down.