



Glasses for Children

WHY DOES A CHILD NEED GLASSES?

Children may need glasses for different reasons than adults. During a child's early years (the first 12 years of life), their visual system is still developing. Wearing glasses can be important for the normal development of their vision. The main reasons a child may need glasses are:

- Better vision: Glasses can improve a child's vision, helping them function better in their environment.
- Straightening crossed or misaligned eyes (also called [strabismus](#)): Glasses can help align the eyes in cases where they are not straight.
- Strengthening weak vision: Glasses can improve the vision of a weak eye (also called [amblyopia](#) or "lazy eye"). Amblyopia can occur when there is a difference in prescription between the two eyes (also called [anisometropia](#)).
- Protecting one eye: Glasses may be used to protect the better seeing eye when the other eye has poor vision

HOW CAN A CHILD BE TESTED FOR GLASSES, ESPECIALLY IN INFANCY OR EARLY CHILDHOOD?

An ophthalmologist (eye M.D.) can determine if a child needs glasses through a complete eye exam. This exam usually involves eye drops to dilate the pupils and relax the focusing muscles in order to get the best measurements of the eyes. A special instrument called a retinoscope helps the ophthalmologist find the correct glasses prescription. Based on the results of the eye exam, the ophthalmologist will tell parents if glasses are needed or if the eyes can be monitored.



WHAT ARE THE DIFFERENT TYPES OF REFRACTIVE ERRORS (NEEDS FOR GLASSES) THAT CAN AFFECT CHILDREN?

There are 4 basic types of [refractive errors that may require glasses for children](#):

- [Myopia](#) (near-sightedness) – Distance (far away) vision is blurred, but near vision is usually clear. Myopia often affects school-age children. The prescription for glasses will usually have a minus sign at the beginning of the prescription (for example, -2.00).
- Hyperopia (far-sightedness) – Many children are naturally far-sighted in early life and do not need treatment with glasses unless the far-sightedness is higher than normal. Children with a normal amount of far-sightedness can often use their own focusing muscles to provide clear vision for both distance and near vision without glasses. If the far-sightedness is more than normal, vision is blurred far away and close up. A prescription for hyperopia will have a plus sign at the beginning (for example, +3.00).
- [Astigmatism](#) – This occurs when the surface curve of the eye is irregular, causing blurred or distorted vision. Glasses for astigmatism have specific numbers to show the curve strength and location of curve. A prescription for astigmatism will have several numbers and will look something like this: -2.00 +2.50 X 90, though sometimes, astigmatism can be written with a minus sign in front of the second number.
- Anisometropia – This is when there is a different prescription in each eye. In children, anisometropia can lead to a condition called [amblyopia](#), where the vision in one eye does not develop normally. Glasses are needed to ensure clear vision and normal vision development in each eye.
- Ask your eye care provider if you have questions about your prescription.

HOW WILL I EVER GET MY CHILD TO WEAR GLASSES?

When glasses improve the vision, most young children will wear them easily. Confirm with your child's ophthalmologist if the glasses should be worn all



the time or only for specific activities such as during school. While some children may immediately love wearing glasses, others may take time to adjust. It's very important that parents keep a positive attitude and encourage their child to wear the glasses.

If a child continues to resist wearing glasses after a few weeks, the ophthalmologist may need to recheck the prescription or prescribe eye drops to help with the adjustment. Please reach out to your ophthalmologist if you have questions or problems getting your child to wear their glasses.

DOES MY CHILD NEED BIFOCALS?

Bifocals are sometimes necessary for children. In some cases, children with crossed eyes (also called [esotropia](#)) or those who have had [cataract](#) surgery may require bifocals or reading glasses.

WILL WEARING GLASSES MAKE MY CHILD'S EYES WORSE OR MORE DEPENDENT ON THEM?

No, wearing glasses will not worsen a child's eyesight or make them more dependent on glasses. In fact, sometimes not wearing the prescribed glasses can cause problems with normal vision development and lead to permanent visual loss ([amblyopia](#)).

WHAT CAN I DO TO HELP MY CHILD ADJUST TO GLASSES?

Getting a good fitting frame from an experienced optician is very important. The frame should be comfortable with each eye centered behind the lense. (see Figures 1 and 2). Lenses made out of polycarbonate offer the best protection as they are shatterproof.





Figures 1 and 2: These pictures show well-fitting glasses and happy children.

Adding a strap or silicone temple tips (also called ear grips or ear locks or stay puts) to glasses can help keep glasses in place on the child's face (see Figure 3). Most children will adjust to wearing glasses within two weeks. Reading books about children with glasses and observing family members wearing glasses comfortably can help in the adjustment process.



Fig. 3: Temple tips help keep glasses in proper position

WHAT ABOUT SPORTS AND SWIMMING NOW THAT MY CHILD NEEDS GLASSES?

Discuss the need for glasses during sports and swimming with ophthalmologist. There are specially designed glasses for sports that provide eye protection. Prescription swim goggles can be an affordable option for children who need glasses and enjoy swimming.

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