Outcome of Surgery in Long-Standing Infantile Esotropia With Cross Fixation

Congenital esotropia is a large-angle esodeviation that is present by 6 months of age. Once any accommodative component and amblyopia are corrected, the accepted treatment is strabismus surgery to realign the visual axes with the goals of attaining not only immediate satisfactory postoperative alignment but also stable long-term alignment with establishment of binocularity. With these goals in mind, in this issue Keskinbora et al. have elucidated the factors that may influence the outcome of treatment, including the age of surgical alignment, the duration of misalignment prior to surgery, and the development of associated features of congenital esotropia.

Although early surgery for congenital esotropia has been the mainstay of treatment, how early has remained controversial. Factors other than age of surgical alignment may influence the degree of binocularity; one factor that may be important besides age is the duration of misalignment. It seems that a shorter duration of misalignment more favorably affects the quality of stereopsis than solely the age at which alignment occurred. Further studies are needed to establish the critical factors to achieve stable, binocular vision in children with congenital esotropia.

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