

# An external pilot study to test the feasibility of a randomised controlled trial comparing eye muscle surgery against active monitoring for childhood intermittent exotropia [X(T)]

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## Plain English summary

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## Plain English summary

**S**trabismus or squint is a common childhood condition in which the eyes are misaligned. Intermittent exotropia [or X(T)] is a common type of strabismus in which one eye sometimes turns outwards. X(T) is commonly treated by surgery to the eye muscles. Our aim was to improve the treatment that children receive by evaluating the risks and benefits of surgery for X(T) in a randomised study in which some children, where it was safe to do so, had surgical treatment delayed. We could then see whether or not some children got better without surgery.

Our study was designed to show whether or not parents, doctors and children would be willing for children with X(T) to be randomised to early surgery or active monitoring, and whether or not they continued with the study to the end. We also collected information about the effect of X(T), and the treatment of it, on the child's quality of life; information about whether or not the child's X(T) was cured, either spontaneously or by treatment; reasons why parents accepted or declined participation in the study; the experience of parents and children who did participate; and costs to the UK NHS and the family.

Participants were patients at the ophthalmology departments of four NHS foundation trusts. In total, 231 children were screened, of whom 138 were eligible and 49 children were recruited.

The SamExo study (Surgery vs. Active Monitoring in Intermittent Exotropia) showed that it is possible to recruit and retain participants to a feasibility trial of early surgery compared with active monitoring.



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