

INÉS PÉREZ FLORES  
HOSPITAL POVISA  
VIGO

# ASPECTOS PSICO-SOCIALES DEL ESTRABISMO DEL ADULTO



Jackson et al. 2006 “The psychosocial benefits of corrective surgery for adults with strabismus” - HDA,DAS, WHQoL Bref

---

***Hatt et al. 2009***

“Development of a Quality-of-Life questionnaire for adults with strabismus (AS20)”

- Funcional / Psicosocial

## Psychosocial value

Preopera've Ques'onaire	Pa'ents (%)
I feel rejected because of my eyes	14 (58%)
I have working troubles because of my eyes	12 (52.1%)
Postopera've Ques'onaire	Pa'ents (%)
I feel better with my appearance	24 (100%)
I feel more confident in personal relationships	21 (87.5%)
I feel more comfortable at work	18 (78.2%)

Psychosocial and functional value of strabismus surgery in adults

Pérez et al.  
WOC2012, Abu Dhabi

## Functional value

Questionnaire	Patients % Preoperative vs postoperative
I turn my head/face to see better <sup>1</sup>	18(75%) vs 6(25%) P=0.001
I wink one eye to see better <sup>1</sup>	16(66.6%) vs 5(20.8%) P=0.003
My visual field is limited <sup>2</sup>	22(91.6%) vs 16(66.6%) P=0.013
I have difficulties calculating distance and depth <sup>3</sup>	18(75%) vs 14(58.3%) P=0.005

<sup>1</sup> Preoperatively no patient showed torticollis or diplopia

<sup>2</sup> Six (25%) patients felt that his visual field had increased after surgery

<sup>3</sup> Four(16.7%) patients believed that they could calculate distance and depth after surgery

Psychosocial and functional value of strabismus surgery in adults

Pérez et al.  
WOC2012, Abu Dhabi



Pacientes con diplopia: mayor preocupación por los aspectos funcionales  
Pacientes sin diplopia: mayor preocupación por los aspectos psicosociales  
La calidad de vida mejora hasta 18 meses después de la cirugía (*AS-20 Hatt 2012*),  
pero no todos los pacientes están contentos  
84% creen que aún no están alineados (*Satterfield 1993*) versus 98% están  
satisfechos con el alineamiento (*Nelson 2008*)

- *6% se arrepienten de haberse operado (Adams 2016)*
  - *Mujeres y jóvenes > distrés*
- Éxito clínico 95% vs QoL 60% (*Hatt 2012*)

# MCBAIN ET AL. 2014, 2015, 2016

Predisposing factors	Intervening psychosocial processes			Primary Outcomes
Demographic & clinical variables  (BLOCK 1)	Beliefs & cognitions  (BLOCK 2)	Appearance specific beliefs & cognitions  (BLOCK 3)	Social support  (BLOCK 4)	Psychosocial well-being  (DV)
Gender Age Ethnicity Affected eye Classification Disease history (incl. duration) Treatment history Visual acuity Experience of double vision Direction & size of deviation	Illness perceptions  Treatment perceptions  Fear of negative evaluation	Social anxiety & avoidance  Concern about appearance  Perceived visibility  Salience  Valence	Family Friends Significant others	Anxiety  Depression  QoL
DV – dependent variables				

**MACKENZIE ET AL. PSYCHOSOCIAL INTERVENTIONS FOR IMPROVING  
QUALITY OF LIFE OUTCOMES IN ADULTS UNDERGOING STRABISMUS  
SURGERY.**

COCHRANE DATABASE OF SYSTEMATIC REVIEWS 2016, ISSUE 5 ART  
Nº:CD10092

# CONCLUSIONES...

## ¿Cuál es nuestro papel?

- 30-60% de los pacientes **NO** están bien informados de sus opciones de tratamiento y de qué pueden conseguir con la cirugía
- Identificar pacientes con niveles de ansiedad y depresión , y que pueden presentar expectativas no realistas

## ¿Qué pueden necesitar algunos pacientes?

- Reconducir el valor que ponen en su apariencia en relación con su estrabismo

