



## Glasses Fitting for Children

### **What type of lenses should be used?**

Polycarbonate (shatter proof) lenses are the **ONLY** type of lenses that should be prescribed to children unless your physician tells you differently. Polycarbonate lenses have built in U.V. protection to block harmful rays from the sun, they are light in weight and work well with strong prescriptions and come with an anti-scratch coating.

### **Which optical shop is best?**

Optical shops that frequently work with children are preferable. If frames and lenses are not fit properly, trying to get a child to wear glasses may be even harder. These optical shops also often have a better selection of children's frames. Your local independent optician will work with your doctor to ensure proper power and continued good fit for your child.

Ask your optical shop about any frame or lens warranty that is available. If there is a warranty available, be sure to ask what it covers. Most warranties do not cover lost glasses.

### **What frame should be chosen?**

Size is very important (Figure 1 and 2). Glasses must fit well so that they are comfortable and provide clear vision. If glasses are uncomfortable, a child may be reluctant to wear them. Remember that your child will spend most waking hours wearing his or her glasses and well-fitting glasses will hold up better in the long run. The frame should be adjusted as needed for comfort and proper alignment on your child's face. In order to prevent the glasses from sliding down the nose, some children wear straps or temple tips (also called ear grips)(Figure 3).



**Fig. 1:** Glasses on top are too small. Glasses on the bottom are the correct size.

Frames should preferably not touch the cheeks or eye lashes and the eyes should be centered in the lenses. The frame and nose pads can be adjusted for optimal fit.



**Fig. 2:** Well-fitting glasses.





**Fig 3:** Glasses with temple tips.

In some cases of crossing or after cataract surgery, children's glasses will have a bifocal which means there is a reading prescription added to the bottom of the glasses. The horizontal line on bifocal lenses should go through the middle or immediately below the pupil (significantly higher than the typical bifocal position in adult glasses) and ideally the line should be visible so the child knows where to look through the bifocal.(Figure 4).



**Fig. 4:** Well-fitting bifocal.

Glasses for infants and toddlers often come with cable temples (Figure 5) This type of cable wraps around the ear. It is important that the cable not be too tight or the temple length too short. Children can grow out of cable frames very quickly, so ask about silicone temple tips (Figure 3) for glasses as they work the same way as cables but are adjustable.



**Fig. 5:** Poorly fitting cable temples on left and well-fitting cables on right

### **Do children love glasses as soon as they get them?**

Nearsighted (myopic) children often enjoy their glasses immediately. However, far-sighted (hyperopic) and astigmatic children may take several weeks to adjust to wearing spectacles. If the child does not cooperate, the doctor may prescribe eye drops in an attempt to help the child adjust to the glasses.

### **How do I care for glasses?**

When not being worn, glasses should be placed in a case and should never be placed face down on a surface for fear of scratching the lenses. The motto for children is “Glasses stay on your face or they go in your case”. Lenses may be cleaned with a soft cotton cloth or a special “lens cloth”. If the frames are bent or do not fit well, take them to your optical shop for an adjustment. Do not try to adjust the frame yourself as they may easily break.