



Retinopathy of prematurity (ROP)

What is Retinopathy of prematurity (ROP)?

Retinopathy of Prematurity (also known as ROP) is an eye condition that occurs in premature babies due to an early birth as it disrupts the growth and development of the retina and can cause unusual blood vessels to develop which can lead to scarring. The retina is the light-sensitive lining at the back of the eye. Light causes the retina to send signals to the brain. The brain interprets the signals as visual images.

There are varying degrees of this condition. The more premature the baby is, the more likely this condition will occur and the more affected the retina will be.

When babies are born premature an Ophthalmologist will routinely be called to assess their eyes and make the diagnosis. They will determine the level of the ROP and will determine if an operation is needed to prevent the retina detaching, which in turn will cause profound vision loss if the retina does detach. If the ROP is mild then an operation will not be needed.

How does this effect the way the child sees?

It depends upon the degree of the ROP.

For some children, when the ROP is mild it can over time resolve itself and there are no effects on the vision. The Ophthalmologist will discuss with the parents if this has occurred, and will often mention this on their clinical letters, using the phrase 'resolved'

For children where the degree of the ROP is more significant it may take time before the vision appears to be affected. Although if the ROP is significant and has not been treated through surgery and there is a retinal detachment then vision will be noticeably affected and will be apparent through how the child presents ie not showing visual responses to stimuli, even when close or large in size.

Children with ROP can also develop the visual conditions myopia, amblyopia, strabismus (squint). Please refer to our other leaflets on these conditions for advice.

What can be done to help?

- Regular Ophthalmology appointments when the child is a baby/young child.
- ROP can be treated with laser surgery or other procedures to stop the abnormal blood vessel growth and prevent vision damage. An Ophthalmologist will determine if this is needed; mostly likely to occur when the baby is very young.

How can parents, family, friends, and teachers make a difference?

- Parents are recommended to make sure any premature babies have their eyes tested as part of the newborn physical examination screening done in hospital by health professionals. If this is not done, parents need to follow this up with the doctor.
- Attend all allocated appointments.
- Encourage the child to wear any prescribed glasses (if prescribed).

- If the Ophthalmologist mentions that the child's vision is reduced compared to what would be expected for the child's age, or if the child is demonstrating visual difficulties a referral for support from a Teacher of Vision Impairment can be requested even when the child is very young (information in the Local Offer link below). Please note that if the child has a mild form of ROP then they will not need this support.

Please note the font used in this information leaflet is called Verdana and is used because it is one of the most visually friendly fonts for people with vision difficulties and is also Dyslexia friendly too.

Further information for support for children and young people with vision loss can be found on the Birmingham Vision Support Local Offer website:

[Birmingham Vision Support Team](#)

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