

BLEPHAROPLASTY SURGERY

Information, before and after care

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Blepharoplasty

What is Blepharoplasty?

Blepharoplasty is eyelid surgery to improve the shape and appearance of the lids. With age, or with certain medical or inherited conditions, skin may lose elasticity causing folds and excess skin in the eyelids ('dermatochalasis'). Weakening of the inner layers of the lids may result in fat protrusion and 'eyebags'. Skin in the upper lid may overhang and reduce the field of vision. Depending on your problem it may be necessary to remove excess skin, protruding fat or a combination of both.

Will surgery help?

Surgery may improve the appearance and symmetry of the eyes and be chosen for aesthetic reasons. Aesthetic surgery can make significant improvements when there is excess skin or fat, although it may not be able to correct all problems (e.g. fine lines, dark circles). Surgery may be recommended to improve the vision if the upper lid or lashes obscure the upper field of vision. Insured patients may require a visual field test to demonstrate to the insurer how much your vision is affected.

Anaesthesia

Blepharoplasty surgery is usually performed under local anaesthetic meaning you are awake during the procedure. This makes the surgery very safe in terms of risk to general health, and promotes fast recovery. Local anaesthetic is injected into the eyelid to numb it; this stings initially but then the operation should be painless. Local anaesthetic allows you to open your eyes if requested during the surgery; this is particularly important if the lid height is to be adjusted (ptosis surgery) at the same time.

Some people may opt for general anaesthetic if they are physically healthy enough, or sedation may be another option for anxious patients. Sedation or general anaesthesia may also be a good option for longer procedures, for example, if having blepharoplasty to all four lids on the same day. We can discuss these options before booking any surgery.

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What does surgery involve?

Upper lids

Measurements are taken to assess the amount of skin that can safely be removed. The incision is made along the natural skin crease of the upper lid and the excess skin removed. The amount of skin removed is limited by the need to leave enough skin to allow the eyes to close comfortably. If there are protruding fat pads these may also be removed. Internal sutures (stitches) may sometimes be placed to sharpen the skin crease, and the skin incision is closed with fine sutures. Sutures may be dissolvable or may be removed in 5-7 days. This surgery may be combined with ptosis repair if the eyelid is not opening fully.

Lower lids

Lower lid blepharoplasty aims to remove excess skin or fat from beneath the eyes. It should be noted that folds of skin extending onto the cheek (festoons) may not be possible to fully correct, and dark circles under the eyes also may not always improve. Some patients may need a combination of surgery and non-surgical aesthetic treatments to get best results.

Surgery may be done through a skin incision beneath the lashes of the lower lid, usually chosen if there is excess skin to be removed. In this case, sutures will be used to close the wound and these may need to be removed after 5-7 days. If there is just fat bulging to be corrected, an incision inside the lid may be possible so that there is no visible scar (trans-conjunctival approach) and no sutures to be removed.

Potential Risks and Complications of Blepharoplasty Surgery

Whilst the majority of patients have a good outcome, there is no absolute guarantee of success with any operation and blepharoplasty surgery is no different.

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- Infection is uncommon. Antibiotic eye drops or ointments may be advised post-op especially for those with higher risk of infection such as diabetics. In the 1-2% of people who develop a true infection, oral antibiotics usually treat the problem and a good result is usually still achieved.
- Bleeding can occur but is usually slight and can be stopped by applying pressure over the area for at least 10 minutes with a rolled up handkerchief or swab.
- Closure of the eyelids may occasionally feel difficult or tight after surgery because of the swelling. If the eyes feel dry or are gritty or red after the surgery, I can recommend appropriate artificial tear drops. This should be temporary- as an eye specialist I am careful to avoid removing too much skin as I have seen the discomfort and visual problems that can result from inability to close the eyes.
- Any incisions made on the face will produce a scar but these should fade with time. After a couple of months they are usually very difficult to see. Upper lid scars are usually well hidden in the natural lid skin fold.
- Sometimes the eyelid can feel a little numb after surgery (eg the eyelashes or lid margins may feel different.) This is due to a temporary disturbance of fine nerves and is rarely bothersome; it tends to recover within a couple of months.
- Rarely after lower lid surgery the outside corner of the lower eyelid may pull down slightly (an ectropion). This tends to settle by itself but occasionally may need further surgery.
- Changes in vision are very rare; cases of damage to vision have been reported (more likely in lower lid surgery than upper) and whilst this has never happened to one of my patients please let me know urgently if your vision gets worse after surgery. You may experience temporary blurring due to the difficulty in blinking when eyelids are swollen after surgery, or due to use of ointment.
- Lumps may occasionally appear in the scar lines (granulomas). These usually settle by themselves, but may rarely need to be excised.
- The problem may be under-corrected or may recur with time.

What to do before eyelid surgery

1. Do not take aspirin, Ibuprofen or other non-steroidal anti-inflammatory tablets for two weeks before your procedure. These medications thin the blood, interfere with normal blood clotting and increase the risk of bleeding and bruising. Instead, use medications containing paracetamol for relief of pain if possible. If you are taking aspirin, warfarin, clopidogrel or any other medication to improve your circulation or thin the blood for medical reasons, please inform discuss this with me before surgery and if necessary we can consult your physician for advice. We can then weigh up the risks versus benefits of stopping the blood thinners for a short while before surgery.

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2. Discontinue smoking for two weeks before and after surgery. Smoking constricts small blood vessels and can delay the healing process.
3. Keep alcohol to a minimum for two weeks before and after surgery.
4. Drink plenty of water to keep hydrated.
5. Ask about herbal remedies- some can worsen bleeding and bruising and may need to be stopped for 2 weeks before surgery.
6. Continue any other prescription medication as before.
7. Arrange for someone to take you home and to assist you for 24 hours after surgery; even local anaesthetic surgery can have some after-effects and your vision may be affected for a short time after the operation. **Do not plan to drive yourself home;** you may need a few days off driving after the surgery if lids are swollen and vision blurred.
8. One week before surgery, stop sun bathing (including tanning booths), facials, steaming masks, and other skin irritants, and avoid these for 1 month post operatively as they may make scars more noticeable.

What should you expect after surgery?

Blepharoplasty surgery is a daycase (home the same day) in almost all cases. You may have an eye pad on overnight; if both eyes have surgery the more swollen eye will have the patch. Have someone drive you home after surgery and help you at home for 1-2 days. Try to rest with your head above the level of your heart for a couple of days. Decreased activity may promote constipation, so drink plenty of fluids and perhaps eat fresh fruit. Vitamin C supplements may help skin to heal.

Swelling And Bruising: Keep your head elevated for two or three days following surgery and apply cold compresses or small ice packs to help reduce swelling. A packet of frozen peas wrapped in a clean pillowcase makes an excellent ice pack that can mould to the shape of your lids. Apply this for 20 minutes per hour for the first 2 days (waking hours). Maximum swelling and bruising tend to occur in the first 2 days and resolves over 7 - 14 days, although this varies from person to person. There may be a mild degree of swelling for up to 3 months in some cases.

Eye Care: Instill drops and apply ointment as advised. In most cases this is chloramphenicol ointment to the skin wounds twice a day. Clean the incision area daily with sterile gauze and warm water or sterile lid wipes.

Discomfort: Your eyes might feel tight, sore and gritty for a few days. You may experience excessive tearing, sensitivity to bright lights, or temporary changes in your sight such as blurred vision.

Pain: You may experience a dull ache for a few hours after surgery. This should settle with simple analgesics

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like paracetamol. It is extremely uncommon to experience persistent or severe pain after this type of surgery. Please notify your surgeon immediately if this happens.

Showering: You may shower on the second day following surgery; try not to rub the operated eye(s).

Work: Depending on your job you may feel well enough to return to work after a few days but we normally recommend you take about 10 - 14 days off work.

Activity & Sports: Light physical activity such as walking is encouraged from day one as it aids in recovery and prevents blood clots. Keeping in mind that everyone heals at a different rate, you may start golf after about 10 days, gym after 2 weeks, tennis and swimming after 3 weeks.

Contact Lenses: Contact lenses may be worn 2-3 weeks after surgery or when comfortable. This varies with the type of surgery performed so please ask for advice about your specific case.

Removal of stitches: Non-absorbable stitches will be removed about seven days after surgery. Small white heads may occasionally appear where the sutures have been but can be cleared by your surgeon with a very fine needle.

Make-up: You may begin wearing make-up after removal of stitches (usually 7 days after surgery).

Driving: Do not drive if on strong pain medication (narcotic). Most patients can start driving four to five days after surgery but you are the best judge of when it is safe for you to do this.

Smoking & Alcohol and dietary supplements: Do not drink alcohol for 2 weeks as it causes fluid retention. Do not smoke, as smoking delays healing and increases the risk of complications.

Recovery: Although you should be up and about following the procedure, plan on taking it easy for the first week after surgery. You should be able to read and watch television from the day after surgery, though your vision may be blurred due to the ointment. Most visible signs of the surgery should fade within three weeks (depends on procedure). You may be sensitive to sunlight and wind for several weeks. Remember to wear sunglasses when out in the sun. Healing is a gradual process and scars may remain slightly pink for a few months after surgery before healing to a nearly invisible line. Avoid direct sunlight and make sure to put on sunscreen in the following year.

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Follow up

A follow up appointment will be made 1-2 weeks after the surgery, depending on whether sutures need to be removed.