

SPRINGFIELD ENT & FACIAL PLASTIC SURGERY

3555 South Culpepper Circle
Springfield, Missouri 65804
(417) 887-3855

BLEPHAROPLASTY

Age and gravity may cause relaxation and drooping of the skin and other tissues of the eyelids. This may result in an appearance of excessive / baggy skin and puffiness of the eyelids. Some patients note a tired or grouchy appearance while others may experience blockage of some peripheral vision. If eyesight is impaired due to this, surgery may even be covered by insurance as a functional issue.

Goals of surgery

- Improve excess and wrinkling skin of the upper and lower eyelids.
- Reduce puffiness of eyelids.
- It is important to note that blepharoplasty will not help certain conditions:
 - Pigmentation or "dark circles" beneath the eyes.
 - "Crows feet" wrinkling beside the eyes (consider Botox ® / chemical peel for this).
 - Large bags below the eyes or above the cheekbones may only be partially corrected.

Other considerations

- Brow Lift - Many patients with excess upper eyelid skin would also benefit from a *brow lift* to elevate the forehead and eyebrows. Droopiness of these structures may increase the appearance of upper eyelid hooding / bagginess and also can affect peripheral vision. This can also be a functional problem if it impairs peripheral vision.
- Other Procedures – blepharoplasty is often performed along with other facial rejuvenation surgery such as face lift.
- Wrinkles - The wrinkles around the eyes may be best treated with chemical peeling, laser resurfacing, collagen injection, or Botox®.

Scheduling of Surgery

Surgery will most likely have been discussed during a cosmetic consultation and a surgical date selected then or by later discussion. Patients are seen back for a preoperative visit in the office and then usually have a visit at the hospital or surgery center in advance of surgery as well. Patients undergoing only an upper lid blepharoplasty with local anesthesia in the office will not need this appointment.

The Blepharoplasty Procedure

- Outpatient Surgery – Normally have surgery and go home the same day.
- Anesthesia – can be performed under local anesthesia plus intravenous sedation or with general anesthesia. If only upper lid surgery is done, this can be performed in the office under local anesthesia to reduce cost.
- Incisions –
 - Upper Eyelid – A pair of curved parallel horizontal incisions follow the natural direction of skin creases beginning on the inner aspect of the lid and extending to above the outer corner of the eye.
 - Lower Eyelid – Two incision choices are available depending on a patient's needs.
 - Subciliary – located about 3 millimeters below the eyelashes. This is used when excess fat, skin, and muscle need to be removed.
 - Transconjunctival – Incision through the mucous membrane *inside* the lower lid. Used when only excess fat needs to be removed.

Postoperative precautions and instructions

- Elevation – Swelling is reduced by sleeping with the head elevated in a recliner chair for 2 – 3 days after surgery.
- Antibiotic Ointment – Applied 4 times daily to incisions 7 – 10 days.
- Iced Eye pads – placed on eyes and changed every ½ hour for 1 – 2 days.
- Activity - Avoid strenuous activity and bending over for about 2 weeks after surgery.
- Sunscreen - (SPF 30 or higher) on eyes and face plus avoidance of sun exposure for 6 months to prevent possible skin darkening.
- Convalescence – Usually 5 - 7 days, with no heavy lifting for 2 or 3 weeks.

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- Showering - Usually OK 24 hours after surgery.

What to expect after surgery

- Pain - Generally mild and well controlled with pain medication.
- Swelling - Occurs in some patients; head elevation, oral steroid, and iced eye pads reduce this.
- Bruising - Occurs very commonly around the eyes. Head elevation significantly helps with this just as with swelling. Avoidance of the medications described below reduces this.

Risks of Blepharoplasty

Blepharoplasty is very safe surgery but all operative procedures involve a certain amount of risk such as infection, bleeding, anesthesia reaction, or even death. The following partial list of potential complications is provided to assist patients in making an informed decision regarding surgery:

- Vision Change - Although very rare, vision changes, double vision, and even vision loss have occurred with blepharoplasty and other eye surgery
- Dry eyes - May occur temporarily afterward or, rarely, be permanent. Patients with autoimmune disorders, Jorgen's syndrome, and preexisting tendency toward dry eyes are at greater risk.
- Asymmetry - Everyone has some asymmetry between the right and left sides of their eyes, faces, and other parts of the body. It is normal to have some difference in appearance following surgery when comparing one side with the other.
- Unfavorable Healing - of incisions / surgical area.
- Eyelid Malposition - Altered position of the eyelid position. Patients with lower eyelid laxity may develop *ectropion*, which is a lowered lid position.

PLEASE, DO NOT TAKE NON-TYLENOL PAIN MEDICATION SUCH AS IBUPROFEN, MOTRIN, ALEVE, ASPIRIN, AND ADVIL FOR 2 WEEKS PRIOR TO SURGERY AS THIS INCREASES YOUR RISK OF BLEEDING. VITAMIN E AND GARLIC ALSO INCREASE THIS RISK. PLEASE CHECK WITH OUR OFFICE IF YOU HAVE QUESTIONS ABOUT ANY MEDICINE.

We appreciate the opportunity to participate in your health care. Please let us know how we may make your treatment experience more pleasant.

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