

Choice Aesthetics

Upper Blepharoplasty Patient Information Leaflet



This leaflet provides further information for patients considering upper blepharoplasty surgery. The leaflet goes through what the procedure involves, the potential risks and long-term consequences.

What is an upper blepharoplasty?

As you age, the upper eyelid skin sags from losing its elasticity and the muscles supporting the eyelids also weaken. Folds of skin can gather and lead to the appearance of 'droopy' upper eyelids. Sometimes the skin can overhang the eyelashes and affect your vision.

Your eyelids may look 'baggy' and seem worse in the morning. This is because fluid that is normally distributed throughout the body when upright tends to settle in areas where the skin is loose, such as the eyelids, when you are lying down.

An upper blepharoplasty is sometimes called an 'eyelid lift' or 'eyelid skin removal'. It is a surgical procedure that involves removal of excess upper eyelid skin and aims to give a more youthful appearance, reduce any heavy feeling over the eyelids and improve any visual problems resulting from the overhanging skin.

What are the requirements for surgery?

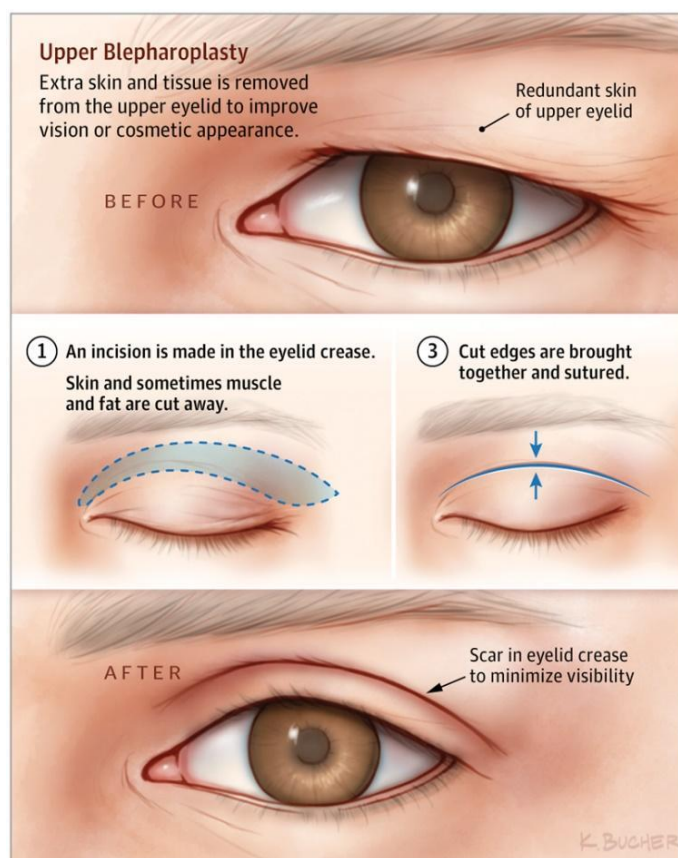
Smoking adversely affects blood supply to tissues and smokers are more prone to complications such as, delayed wound healing and wound infection. Therefore, if you are smoker, it is critical that you do not smoke for at least 6 weeks before and after surgery to minimise the risk of these complications.

In addition, any blood thinning medication must be stopped as per the advice given in your pre-assessment before the surgery to minimise any bleeding.

How is upper blepharoplasty surgery performed?

The procedure is usually performed using local anaesthetic as a day case so that you are able to go home the same day.

Skin markings are carefully made to mark out the excess upper eyelid skin. The local anaesthetic fluid is then injected into the area. An incision is made in the upper eyelid crease on each eyelid and an ellipse of skin is removed. Care is taken to preserve enough skin to allow normal eyelid closure following the procedure. Muscle and fat are not usually removed as they help maintain function and provide a more youthful appearance to the eye. The wound is cauterised to stop the bleeding and the wound is then closed with absorbable sutures. An antibiotic- based ointment is applied to the wound a few times a day to promote healing and minimise infection.



What are the risks of upper blepharoplasty surgery?

Every surgical procedure has the potential for complications and it is important that you understand these before proceeding with surgery. Miss Tadiparthi will go through the procedure and make sure you are fully informed. The main risks of upper blepharoplasty surgery include:

Permanent scarring

There will be a permanent scar in the in the upper eyelid following surgery. In the vast majority, the scars heal well and are hardly noticeable.

Bleeding

There may be some slight oozing of blood from the wound but this usually stops with pressure over the wound.

Bruising, swelling and altered sensation

The eyes and eyelids will be bruised, swollen and will feel different after surgery. This will improve over a few weeks. Sleeping more upright overnight can help improve the swelling.

Infection

Infections are uncommon but can usually be treated with antibiotics in the majority of cases. Rarely, a deeper infection may require washout of the wound in theatre under anaesthetic.

Watery, blurred or dry eyes

You will be given either eye drops or ointment following surgery for 2 weeks to keep the eyes well hydrated and this can make your vision blurry.

Loss of vision / blindness

Very rarely (occurs in 0.04% of cases), there may be bleeding with accumulation of blood behind the eye called a 'retrobulbar haematoma'. It occurs in the first few days after surgery and symptoms typically are a swollen, painful or blood shot eye, blurred or progressive loss of vision and a forward or abnormal looking eye. It is critical that you contact Miss Tadiparthi's team or the hospital emergency number urgently so that the blood clot in the back of the eye is drained and any further bleeding is stopped. A retrobulbar haematoma is a complication that occurs more commonly when fat is removed and can permanently affect vision if the blood clot is not removed and the source of the bleeding not stopped immediately.

Stitch extrusion

Deep sutures that hold the wound may be recognised as foreign material by the body and work themselves outside the wound. These sutures can be simply be removed later on in clinic.

Overcorrection and dry eyes

Care is taken not to remove too much upper eyelid skin as it can cause problems with eye closure and lead to dry, irritated and painful eyes. Regular long term eyedrops would be then be needed to keep the eyes lubricated. Therefore, it is important that not too much upper eyelid skin is removed.

Poor scarring

The quality of the scarring varies with each individual's own healing ability. Scars in the eye area usually heal well but some patients are prone to poor scarring. The scars may be painful, lumpy, sore and itchy which is called, 'hypertrophic' or 'keloid' scarring. Further treatment may be needed with regular steroid injections or silicone dressings if hypertrophic or keloid scarring develops. Any further treatment for poor scarring will be at an extra cost to patients.

Asymmetry

There may be slight differences in the appearance in the amount of skin remaining in the upper eyelids or in the positioning or length of the scars following surgery. These differences may be due to pre-existing asymmetries such as the location and severity of the excess eyelid skin or amounts of fat present on each side. Any significant differences can be corrected with further surgery if required.

Under correction

There may still be a slight excess of upper eyelid skin. Any significant difference in the amount of upper eyelid skin remaining between the two sides or if there is a significant amount of excess still, this can be corrected with further surgery if required.

Recurrence / long term changes

There may be long term changes with ageing and gravity, and recurrence of the upper eyelid excess. Surgery may be needed to maintain the results of upper blepharoplasty surgery. In such cases, the procedure can be repeated once the wound heals, again under local anaesthetic and as a day case procedure.

Allergic reaction

You may develop an allergic reaction to either the skin cleaning solution used during the procedure, the stitches or the dressings. You may notice a rash, itching and swelling or occasionally, ulcers with raw skin. Further treatment may be needed if you develop such allergic reactions.

What is the recovery time and post-operative care following surgery?

- You will be allowed home the same day shortly after the surgery.
- You will need to apply either eye drops or ointment following surgery for 2 weeks to keep the eyes well hydrated and this can make your vision blurry.
- The stitches used in the operation are usually dissolvable.
- It should be possible for you to return to work in around 7 to 10 days although you should be able to work from home the day after surgery if you wish to do so.
- Usually by 2 weeks, the wounds would have healed. The scars should be massaged ideally twice daily with a simple aqueous moisturising cream (e.g. E45) or bio oil.
- To ensure good healing, we recommend that you eat a healthy diet and if you usually smoke, avoid smoking for at least 6 to 8 weeks before and after surgery.
- Any blood thinning drugs such as aspirin, warfarin and rivaroxaban should be stopped between 5 to 14 days prior to surgery. They can be restarted the day after surgery. You will be given specific advice regarding your medication either at your pre-assessment or by Miss Tadiparthi's secretary prior to surgery.
- Swimming and general cardiovascular exercise such as gym and exercise classes should be avoided for at least 3 to 4 weeks until the wound is fully healed to minimise the risk of wound infection and wound separation. It is fine to do walking and other gentle exercises from the day after surgery.

What follow up will I have after surgery?

- At approximately 7 to 10 days after your surgery, you will be seen in the hospital dressing clinic to check your wounds.
- You will be seen in the clinic by Miss Tadiparthi at 4 to 6 weeks after the operation to check on your progress and then again at 3 to 6 months following surgery.

Where can I get further information?

Recommended websites for further information on upper blepharoplasty surgery:

British Association of Aesthetic Plastic Surgeons (BAAPS)

https://baaps.org.uk/patients/procedures/9/eyelid_surgery_blepharoplasty

American Society of Plastic Surgery (ASPS)

<https://www.plasticsurgery.org/cosmetic-procedures/eyelid-surgery>