



EYELID SURGERY

Background

Human interaction is predominantly through facial expression and the 'social triangle' between eyes and nose is what we spend most of our time looking at. A fresh, young-looking face is therefore strongly influenced by our eyelids.

As we age our skin becomes wrinkled, saggy and the eyes appear smaller. Also known as 'eye lift', blepharoplasty reshapes eyelids by removing redundant skin and reforms the crease lost in the upper lid. Whilst marked improvements are common it is important to appreciate that surgery cannot remove all wrinkling or change the overall quality of the skin. Surgery may involve the upper, lower or both eyelids.

Upper Blepharoplasty

An incision made in the natural crease allows excess skin to be removed. If required, any bulging fat can be reduced too.

Lower blepharoplasty

The lower eyelids are both more complex and subject to gravity so there are more surgical options and downtime. Surgery is not able to remove all 'crow's feet' **lines and takes one of two forms:**

- **Subciliary incision** - the skin is lifted through an incision just below the eyelashes. Any bulging fat is either carefully removed or repositioned to reduce the 'tear trough' crease
- **Transconjunctival** - although desired because its scar is placed inside the eyelid, this is not the most common form because it cannot remove excess wrinkled skin and very few people have only an excess of bulging fat with perfect skin over the top.

Pre-Operative Consultation

Although not surgery on the eye itself, visual assessment is recommended before surgery. Your surgeon will also ask about eye problems such as a tendency to dry, red or watering eyes as these may be affected postoperatively. The result of blepharoplasty depends on many factors including age, skin condition, severity of laxity and wrinkles and importantly expectations.

Operative Procedure

Upper eyelids alone are sometimes performed under local anaesthesia, but a general anaesthetic is preferred. Lower and four-lid blepharoplasty benefits from overnight stay to allow elevation, cool packs and resting of the eyes.

Post-Operative Advice

All incisions are closed with stitches that are removed in the dressing clinic within a week. You will awake with sterile tapes covering the incisions and possibly some blurred vision due to the antibiotic ointment used at the end of the operation. Cool packs are applied to help minimise swelling.

Risks and Complications

Whilst any operation has the potential for complications, these are rare with modern techniques. Particularly important are your own expectations as to whether the operation can achieve the result you desire and at what cost in terms of the scar and any individual risks.

CASE STUDY 1: 50-YEAR ♀ - BILATERAL UPPER & LOWER BLEPHAROPLASTY



PRE-OP



POST-OP 6 WEEKS

CASE STUDY 2: 60-YEAR ♀ - BILATERAL UPPER & LOWER BLEPHAROPLASTY



PRE-OP



POST-OP 8 WEEKS

CASE STUDY 3: 34-YEAR ♂ - LOWER BELPHAROPLASY



PRE-OP



POST-OP 8 WEEKS