



Patient Information sheet

Blepharoplasty - eye lid reduction

A blepharoplasty is an operation to reduce the redundant folds, hooding and bags associated with loose skin and lax tissue around the eyes. The upper eyelids are commonly associated with hooding and the lower eyelids with bags. Both can be attended to at the same time. However it is worth noting the relationship between the eyelids and adjacent parts of the face as this has a bearing on the type of improvement to be gained and the boundaries.

If the folds of the upper eyelids extend past the outer corner of the eye then the eyebrows themselves may need to be repositioned, otherwise any attempted correction tends to move the tarsal plate too close to the eyebrows. If the high cheek fat pad has moved downwards from the rim of the eye then the bony orbit is revealed and the lower eyelid lengthened and a v opens up below the eyelid out towards the temple. If severe this needs a facelift procedure to correct.

HOW IS IT DONE?

For operations on the eyelids local anaesthesia often works well. If the fat pads under the eyelids need doing then day stay general anaesthesia is preferred by some people. The incisions are hidden in the folds of the eye. Some loose skin is trimmed particularly in the upper eyelids and the sagging muscles are trimmed and repositioned in the uppers. Structural fat under the eyelids is sometimes redistributed for example to fill tear trough grooves if these are well marked.. There are a lot of ancillary moves that may be required in order to correct the situation such as a lateral canthopexy to tighten or reposition the lower eyelids, muscle slings or contour grafts may be required.

The usual situation note the contribution from eyebrows and muscle relationship to upper cheek



Position of upper and lower fat pads



The areas of skin attention in the folds of the eyes





Position of skin closures in the crease lines

The objective a refreshed awake look with good visibility of the tarsal plates of the upper lids and bags removed from the lower eyelids



WHAT IS THE RECOVERY PERIOD?

After upper eyelids alone with no fat pad work the recovery is only a few days although strenuous exercise is not advised for about 10 days to protect healing tissues. Most of the bruising is gone by 10 days, however a small amount of swelling takes longer to settle completely. The scars are invisible almost straight away as they are hidden in the folds. A slight amount of redness is sometimes visible in the corner of the eye, this is easily camouflaged and settles.

After both upper and lower eyelids and ancillary procedures most people take about three weeks off work although many feel fit to return to light duties much quicker. Wearing slightly tinted glasses hides these early effects. Very little pain relief is required usually only Panadeine for a short period. My practice is to give some medication before operation to reduce swelling and increase comfort.

WHAT ARE THE COMPLICATIONS?

Blindness has been reported in overseas literature in a few cases world wide and is usually associated with pressure from vomiting and bleeding. I have seen no reports now for many years with the advent of better anaesthetic agents and the routine use of anti swelling medication.

Text book complications include infections although antibiotics are given after the operation and are not seen in practice although remain a theoretical risk. Often there is some irritation and watering in the eyes in the early stages as a result of the swelling causing the eyelids to lose close contact with the eye ball which causes irritation from breaking the tear film. This is remedied by drops or ointment and exercises to speed the recovery of eyelid muscle tone.

DOES THE USE OF THE LASER ADD ANYTHING TO THIS OPERATION?

No. International publishers show clearly it does not and neither is the recovery time quicker. But it does add unnecessary expense to the procedure. Overall lasers are most disappointing except in very particular circumstances.

YOUR RESPONSIBILITIES

- To reveal all medications, conditions, history, allergies and recreational drug use.
- To understand all aspects of the information discussed at consultation and all written information given and to seek clarification if needed.
- To understand that you are entering a process where your surgeon is dedicated to the best possible outcome. This requires engaging in the complexities of biology, healing and individual differences.

- That additional stages or further surgeries are occasionally required and that the surgeons best efforts are the basis of the charges. Further surgeries will incur additional charges in pursuit of a particular result.
- To understand that the initial consultation is charged for but all subsequent pre operative consultations pertaining to this surgery are at no charge.
- To understand and accept the above conditions.