

## Patient Information sheet

# Browlift

A browlift is often performed in association with eyelid reduction or as part of a face lift, but can be performed separately.

The procedure is performed to reposition the level of the eyebrows so that the upper folds in particular can be corrected properly. To rely only on trimming of eyelid skin to correct all situations would leave the eyelids too close to the brows and with too little skin in the attempt to correct.

A good test as to whether this is required is to see if the redundant eyelid skin of the upper lids extends past the point where the upper lid joins the lower or the lateral canthus.

The tissue excess extends past the corner of the eye and the upper lid is buried.



The correction achieved is natural looking and reveals the border of the upper lids giving a refreshed look. The frown lines can also be corrected by work on the muscles. The corrugators at the top of the nose may be removed and the brow ones evened so that facial expression is preserved but the permanent look of irritation or anger is removed. Incision lines are behind or on the hairline using special methods to hide the scar amongst the hairs



#### THE OPERATION

The operation is done behind the hairline so all scars are kept hidden in the hair. Closure is achieved using special clips that are kind to hair follicles and do not cause punctate hair loss as the swelling after operation is compensated for. Half the clips are removed at one week and the remainder at two. A small drain is inserted at the time of surgery and is removed the next day before discharge from Hospital.

Hair washing can be performed with Baby shampoo without causing harm to healing.

Swelling is reduced by medication but still occurs and subsides over two weeks. A small residue lasts longer before settling after a few months. Patients are usually quite social at three to four weeks but many are able to disguise any bruising with dark glasses or cosmetics to go out into public quite quickly.

The operation can also be done endoscopically through tiny incisions. This is best for the less advanced case and there is some relapse although good results are obtained.

#### COMPLICATIONS

Complications can include the usual complications of surgery such as infection, bleeding and delayed wound healing but these are rarely encountered with specific measures against them taken.

There may be some bruising or stretching of the frontal branch of the facial nerve resulting in loss of movement in the forehead. This generally recovers and may take several months. This is uncommon.

More commonly there is some numbress in the forehead that slowly dissipates over a few weeks. Occasionally one sees the scalp heal with a small ridge feet with the fingers. This settles with the scars over the year after surgery but rarely requires a trim.

### 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.