

Information about **EYELIFT**

UPPER AND LOWER EYELID SURGERY

Do your eyes make you look older or more tired than you really feel? If the answer is “yes”, you may benefit from blepharoplasty, a procedure commonly performed to remove excess, unwanted tissue from your upper or lower eyelids.

People who look at you usually notice your eyes before any other facial feature. Aging, heredity, and sun-damage often become manifest in your eyelid skin. These changes may consist of baggy, loose, excess skin on the upper eyelids, and / or “tired bags” or “festoons” (fat pads) on the lower eyelids. These changes may make you look tired, sad, or older than you actually feel, especially earlier in the morning. However, eyelid surgery can be a very satisfying facial cosmetic procedure, since, in many cases, these problems can be corrected with pleasing aesthetic results.

Your self confidence may indeed improve as your eyes look brighter, younger, and more awake.

AM I A GOOD CANDIDATE FOR EYELID SURGERY?

The following are conditions that frequently respond to this procedure:

- **FULLNESS OF THE UPPER EYELIDS:** This condition, characterized by upper eyelid “bags”, is found in both sexes. Surgery for this condition can result in dramatic improvement and can be performed at any time after the age of 18. Unlike drooping skin secondary to aging, this condition will typically not recur once repaired. Excess skin often accompanies fullness of the upper eyelids. Surgery for upper eyelid fullness combined with removal of excess skin is the most widely performed and effective of all eyelid operations. East Asian people who wish to enhance or elevate their upper eyelid fold, with or without cosmetic debulking or refinement of their upper eyelids, are often good candidates. FOR WOMEN: Removal of the upper eyelid bags along with excess skin may also be tailored to accentuate or elevate your normal eyelid crease and permit better use of your eye makeup, providing added noticeable improvement. Traditionally, in fashion models, the ideal, attractive upper eyelid demonstrates a slightly elevated upper eyelid fold. In contrast, IN MEN, tailored removal of the excess tissue can result in a subtle, more relaxed and youthful appearance.
- **EXCESS SKIN OF THE UPPER EYELIDS:** Excess skin laxity is typically due to aging and/or prior sun exposure. On occasion, the skin may sag enough to partially obstruct vision. This condition also lends itself well to surgical correction, which removes the sagging, tired skin, and restores a more youthful, rested appearance. Removal of excess skin will produce a cleaner, more healthy and youthful appearance to the upper eyelid crease. In addition, eye makeup can also be worn more effectively. Both women and men with upper lid bags and/or excess skin are good candidates for these corrective procedures. Upper eyelid surgery is, of course, especially effective in the elderly, where vision is obstructed.
- **LOWER EYELID FULLNESS OR BAGGINESS:** This problem may gradually develop with age, or it may be a familial, inherited characteristic. Patients benefit significantly from reduction of lower eyelid bags that produce that tired, aging, overworked look. Both men and women can achieve considerable improvement with this procedure, which can be performed at an early age if desired. For this problem, Dr. Strimling usually performs “transconjunctival blepharoplasty” which avoids an external scar. This technique effectively removes the tired, sagging bags from under the lower lids via an incision on the inside lid surface. Sometimes, the location of the bags or “festoons” warrants excisional removal through a lower eyelid crease.

For younger patients, surgery may be tailored to produce moderate, yet subtle results; avoiding the “surgical look”.

- **SAGGING OR DROOPING EYEBROWS:** This condition can be corrected by elevating the eyebrows via a brow-lift (elevation and/or recontouring of the eyebrow with or without removal of excess eyebrow or forehead skin, as needed). Dr. Strimling utilizes newer approaches that achieve desired results via small, well hidden incision lines, sometimes hidden in your scalp hair. Older techniques such as coronal or pretrichial brow-lift / forehead-lift, which serve to elevate the brow as well as the entire forehead and remove any excess forehead or scalp skin via long incision lines hidden in the scalp, have various disadvantages that warrant very strict patient indications. Other newer approaches utilizing Botox and/or injectable fillers combined with modern, minimally scarring brow-lifting techniques offer significant potential patient advantages. These are separate operations that may be performed at the same time as blepharoplasty.

HOW IS THIS PROCEDURE PERFORMED?

Upper and lower eyelid-lifts (blepharoplasties) are separate procedures, but are frequently performed simultaneously. On the upper eyelids, a small, fine incision is made with precision in a carefully-marked area, designed to be eventually hidden in the new eyelid crease. Excess skin, as well as bulging fatty tissue, are removed as needed. Fine sutures (stitches) are placed in the skin; these disappear or are removed in *1 week*. In most instances, the small scar practically disappears in *2-3 months*.

Lower eyelid surgery is often performed through an incision hidden inside the eyelid, so that a scar does not result. On occasion, however, it may be made under the eyelashes. The excess fatty tissue that produces your “tired bags” is then trimmed and removed. Occasionally, if your lower eyelid sags, it can be corrected by a “tightening” procedure.

IS IT PAINFUL? WILL I BE ASLEEP?

Your procedure will be performed under oral sedation ("twilight sleep"), accompanied by very effective local anesthesia. You will be awake enough to respond to commands during the procedure, but may not remember much of this. With the local anesthesia, you will feel no pain during the procedure. Any post-operative discomfort is generally short-lived and easily controlled with the analgesics recommended.

WHAT ARE THE AFTER EFFECTS?

Since you will have been given relaxing medication, someone will need to drive you home after your eyelift. You will want to rest at home as much as possible during the first day or two, eating light meals, and applying ice to minimize swelling. We will want to see you in the office 5-7 days after your surgery for evaluation and suture removal, as needed.

CAN BLEPHAROPLASTY BE COMBINED WITH OTHER PROCEDURES?

Brow-lifting, Forehead-lifting, and face-lifts can, and often are, combined with upper and lower blepharoplasty. Lower eyelid chemical peeling or laser resurfacing can be performed at the same time of upper eyelid surgery and lower eyelid surgery only if you are having transconjunctival blepharoplasty. Otherwise, chemical peeling or laser eyelid resurfacing is usually not performed at the same time as an eyelift; but can be performed several months later after your healing is complete.

WHAT IS THE COST? WILL IT BE COVERED BY INSURANCE?

The cost of these procedures has been considerably lowered in the recent years by performing the procedures in one of our office surgical suites rather than in the hospital (albeit with appropriate monitoring and care from fully trained assistants). Upper lid blepharoplasty may occasionally be covered by insurance or Medicare if vision is obstructed by overhanging lids. However, lower lid blepharoplasty is always considered cosmetic. Ask us about payment arrangements.

WHEN CAN I RETURN TO WORK?

Some swelling and bruising are natural, and generally last 7-10 days. Contact lenses can generally be restarted after this time. Eye makeup can be restarted when sutures are gone and most crusting has resolved. In general, however, you can work prior to this time if you wish to.

WHAT ARE THE RISKS? IS IT SAFE?

Side effects & complications are relatively uncommon. During the procedure, the eye is carefully protected from surgical instruments. Visual impairment is extremely rare, and has been reported to occur in approximately 1 in 50,000 cases. The other potential risks can be discussed with you prior to the procedure.

Great care is taken prior to the procedure to locate, measure, and mark the exact amounts of skin and fat to be removed. Immediately after we finish, we will sit you up to examine you again for any irregularity. On occasion, a "touch-up" may be desirable if changes become apparent after the procedure.

AFTER THE BAGS ARE GONE, WILL ANY WRINKLES OR DARK CIRCLES REMAIN?

Upper eyelid wrinkles are generally considerably improved by upper lid blepharoplasty. However, "crows' feet" or lower eyelid wrinkles are generally not significantly improved by lower lid blepharoplasty, and they usually will not worsen even after the bags have been removed. These lower lid wrinkles and lines are generally best treated by laser resurfacing or chemical peeling. Additional techniques that are suitable for crows' feet include injectable Botox and/or Fillers. Additionally, "dark circles" under the eyes that are not caused by shadows from the bags will not disappear, and may be treated by other newer lasers, chemical peeling, Retin-A, or hydroquinone (fading cream) or other topical fading/eye creams.

WHAT DO I NEED TO DO TO SCHEDULE A PROCEDURE?

Please schedule an initial consultation, so that Dr. Strimling can carefully evaluate you (including an extensive exam) and determine your needs, problems, and the types of corrective procedures that are possible and best suited for you and your condition(s). You may need a detailed eye exam performed by your eye doctor before surgery, if indicated by Dr. Strimling. Lab work and/or a general medical exam are usually not, but may be needed, as well.

Pre- and post-operative instructions, course, expectations, and prescriptions will be discussed with you in detail before surgery. Your signed consent will be obtained before surgery.

Please do not hesitate to call (702-243-6400) or write with any further questions. Our fulfillment depends upon your satisfaction.

ROBERT B. STRIMLING, M.D. & Associates, L.L.C.

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BLEPHAROPLASTY (EYELID-LIFT) PATIENT INSTRUCTIONS

* Please arrive 30 minutes prior to the scheduled procedure time so that medications may be given.

INSTRUCTIONS PRE-OP:

1. Please do not wear make-up and/or jewelry on the day of your procedure.

Please be prepared to remove contact lenses or bring your glasses on the day of surgery.

Wear clothing that buttons down in front (no pullovers). Arrange to have someone drive you home.

Avoid aspirin, aspirin containing products, **Plavix, Advil, Nuprin, Motrin, ibuprofen** and **Ginkgo** for 2 weeks before and 48 hours after surgery.

Avoid drinking alcoholic beverages, smoking and Vitamin E (or fish oil vitamin products with Vitamin E) for 2 weeks before and after surgery.

Please arrange to have a responsible adult drive you home after surgery and stay with you that evening.

2. PRE- AND POST-OP MEDICATIONS:

Duricef: Take 1 tablet in the morning and 1 tablet in the evening starting the morning of the procedure for 5 days.

(or **Zithromax:** Take 2 tablets the morning of the procedure, then continue 1 tablet daily for 4 days.)

Extra-strength Tylenol or Tylenol #3 (or equivalent), but not both at same time: Take 1-2 tablet/s every 4-6 hours after surgery as needed for pain.

Bacitracin or Cortisporin ophthalmic ointment (or equivalent per Dr. Strimling): use as instructed below.

Artificial Tears, Duratear ointment (sold over the counter): use as instructed below. Take all medications as directed.

If you experience any side effects, call the office.

POST-OPERATIVE CARE:

1. Apply light **iced compresses** over the eyes to reduce swelling and discoloration. They should remain in place continuously all day until bedtime on the day of surgery, as best tolerated. Continue ice compresses for the next two days, ~15 minutes per hour.

2. **Artificial Tears** (e.g. **Tears Natural, Liquifilm, Absorbatear, Dacriose**) (sold over the counter): 2-3 drops into eyes every 2 hours while awake for 48 hours, and then as needed for any blurry vision or "dry" scratchy feelings until you return for your follow-up evaluation.

3. **Duratear Ointment** should be applied to the eyes at bedtime until you return for your follow-up evaluation so that your eyes do not get dry while sleeping. (sold over the counter)

However, if you had **Transconjunctival lower eyelid blepharoplasty** (no external excision/no stitch lower eyelid-lift surgery), then you should use

Bacitracin or Cortisporin ophthalmic ointment (instead of Duratears ointment) nightly to your eyes.

4. Wound Care Instructions:

A. If you had **no external excision / no stitch lower eyelid-lift surgery**, only the following wound care instructions apply:

Apply Bacitracin or Cortisporin ophthalmic ointment (or equivalent) 4 times daily into eyes.

B. If you have **stitches** (upper eyelid-lift or traditional lower eyelid-lift surgery), then;

Begin *twice daily* wound care the morning after surgery, as follows.

Gently cleanse the suture line with **hydrogen peroxide** soaked **cotton-tipped applicators sticks** (i.e. **Q-tips**).

Attempt to remove any crusting or not to allow crusting/scabbing to form on the suture line,

by gently, repetitively rolling back and forth several times the moistened Q-tip over the suture line.

(Never place a used applicator stick back into the hydrogen peroxide.)

With a new dry Q-tip, dry the suture line. With another Q-tip, apply a thin layer of Bacitracin/Cortisporin ophthalmic ointment

(or equivalent), to the suture line. Attempt to keep suture line continuously covered by above ointment

while healing (until sutures are removed or dissolve). Additionally, keep the suture line dry for 24 hours.

5. You can shower and wash your hair after 24 hours, but do not bend over.

When showering, avoid the shower from forcefully beating directly on your suture lines.

6. Sleep on your back with your head elevated on a few pillows and avoid bending down for the first few days to prevent or decrease swelling.

7. Avoid strenuous exercise, activities, or work for the next 2 weeks.

8. If dissolvable sutures (stitches) are used, they usually dissolve in about 1 week. Otherwise, sutures will be removed in 5-7 days after surgery.

This is usually a painless procedure, but if you are apprehensive, take one of the pain pills before coming to the office.

9. Eye makeup can be re-started when the sutures are gone and any crusting has resolved.

10. Avoid drinking alcohol and smoking for 1 week after surgery.

11. Do not wear contact lenses for 2 weeks following surgery.

12. Keep eye activity to a minimum for 48 hours.

13. Your eyebrows may be plucked 2 weeks after surgery.

POST-OP COURSE/EXPECTATIONS:

Some black and blue discoloration, together with swelling, will occur and generally lasts 7-10 days.

It may persist longer in a few patients who heal more slowly and thus prolong the recovery period.

However, you may work prior to this time if you feel up to it. Most patients return to work (indoor office-type work) in 4-10 days after the surgery.

The eye may water slightly following the surgery. This is due to swelling of the lids and the teardrops spilling over onto the cheeks.

This will disappear as the swelling subsides. The lower lid may occasionally have a slight "droopy" appearance following surgery.

Again, this is due to the swelling and will disappear as the swelling subsides. There may be some discomfort along the incision.

Extra-strength Tylenol or the pain medication prescribed for you, should readily eradicate this any discomfort.

If there is any undue pain or swelling, please contact our office.

Bleeding after surgery is rare, but should it occur, apply firm uninterrupted pressure with a clean gauze or towel to the wound for 15 minutes.

If bleeding has not stopped at this time, call our office or go to the *nearest* emergency room.

FOLLOW-UP CARE: Please schedule a follow-up appointment ~ one week after your procedure.

If you have any questions or concerns, please do not hesitate to contact our office, **ROBERT B. STRIMLING, M.D. & Associates @ (702) 243-6400**