

# EYELID REDUCTION SURGERY

Patient information to assist informed consent

**A**s a part of normal ageing, the skin of the eyelids may sag and become loose and baggy. Excess fatty tissue in the upper and lower eyelids may contribute to the condition. Some people find this unsightly. If the condition is extreme in the upper eyelid, it may partially block vision.

Eyelid reduction surgery, called “blepharoplasty”, can correct both the aesthetic and visual problems.

The loose fold of skin that droops over the upper eyelid can be removed to make the eyes appear bigger and younger looking. The “bags” below the eyes can also be reduced.

Eyelid reductions are one of the most common plastic surgery operations. They can be done alone or at the same time as other facial surgery.

## THE DECISION TO HAVE TREATMENT

The decision to have eyelid reduction surgery should be made only after discussion with your plastic surgeon. The decision whether to have surgery is yours and should not be made in a rush. Make the decision only when you are satisfied with the information you have received and believe you are well informed.

Your surgeon will be pleased to discuss the benefits and risks of treatment. Your surgeon cannot guarantee that the surgery will meet all of your expectations or that the surgery has no risks. Seek the opinion of another plastic surgeon if you are uncertain about your surgeon’s advice.

**REALISTIC EXPECTATIONS:** Patients who are healthy and have realistic expectations about what the surgery can achieve are suitable for an eyelid reduction. Eyelid reduction surgery is an “elective” procedure, meaning that it is a matter of choice and not necessary for good health.

Not everyone will get the same results from an eyelid reduction procedure.

**CONSENT FORM:** If you decide to have

treatment, your surgeon will ask you to sign a consent form. Read it carefully. If you have any questions, ask your surgeon.

## BEFORE SURGERY

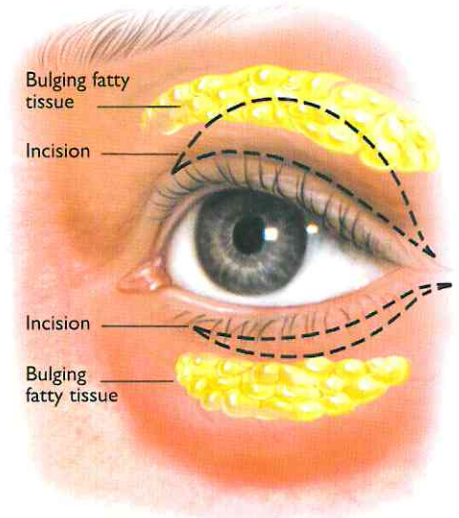
To plan the best treatment, your surgeon needs to know your full medical history. Tell your surgeon about health problems you have had, as some may interfere with surgery, anaesthesia and care after surgery.

You may be advised not to take blood thinners, aspirin, medicines containing aspirin, large amounts of vitamins, or anti-inflammatory medicines for at least 10 days before surgery. These can increase the risk of excessive bleeding during and after surgery. Discuss this carefully with your surgeon.

Give the surgeon a list of all medicines you are taking, or have taken recently. Unless your surgeon advises differently, you will be able to continue to take most medicines. Tell the surgeon if you have had:

- an allergy or bad reaction to antibiotics, anaesthetic drugs or any other medicine

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Surgery can correct unsightly drooping of eyelids, due mostly to the bulging of excess fatty tissue. “Bags” around the lower eyelid can also be corrected.

## TALK TO YOUR PLASTIC SURGEON

**T**his pamphlet is intended to provide you with general information. It is not a substitute for advice from your surgeon and does not contain all the known facts about eyelid surgery or every possible side effect. This information will change with time, due to clinical research and new therapies.

It is important that you have enough information about eyelid surgery to enable you to compare the benefits and risks. If you are not sure about the benefits, risks and limitations of treatment, or the terms used in this pamphlet, ask your surgeon.

Read this pamphlet carefully, and save it for reference. Technical terms are used that may require further explanation from your surgeon. Write down questions you want to ask, and discuss them with your surgeon. Fully discuss with your surgeon: the result you want, the surgery to be done, and the outcome you can expect. Use this pamphlet only in consultation with your plastic surgeon.

## IMPORTANT: FILL IN ALL DETAILS ON THE STICKER BELOW

DEAR SURGEON: When you discuss this pamphlet with your patient, remove this sticker, and put it on the patient’s medical history or card. This will remind you and the patient that this pamphlet has been provided. Some surgeons ask the patient to sign the sticker to confirm receipt of the pamphlet.

### TREATMENT INFORMATION PAMPHLET

PEEL HERE

PROCEDURE: \_\_\_\_\_

PATIENT’S NAME: \_\_\_\_\_

DOCTOR’S NAME: \_\_\_\_\_

EDITION NUMBER: \_\_\_\_\_ DATE: DD / MM / YYYY

Your plastic surgeon

AUSTRALIA PLASTIC SURGERY

- prolonged bleeding or excessive bruising when injured
- any long-term or recent illnesses
- previous eyelid or facial surgery
- dry eyes, use of eye drops, or visual disturbances
- any use of glasses or contact lenses

## THE SURGICAL PROCEDURE

Either the upper eyelid, the lower eyelid, or both can be treated during the same operation. The loose fold of excess skin that droops over the upper eye is carefully removed so that the natural shape of the eye is retained. Excess fatty tissue under the upper eyelid may be removed (as shown in the figure, right). Excess skin of the lower eyelid may be excised to remove the “bag” below the eye. Fat tissue may be removed or repositioned.

If there is no excess skin to be removed from the lower eyelid, excess fatty tissue may be removed or repositioned through an incision on the inside of the eyelid. The operation takes from one to three hours.

As much as possible, incisions are made

- psychological or psychiatric illness.

To detect problems that could complicate surgery or anaesthesia, tests may be needed. Your surgeon will give you instructions about preparing for any tests. Arrange for a relative or friend to drive you to and from the day-procedure clinic or

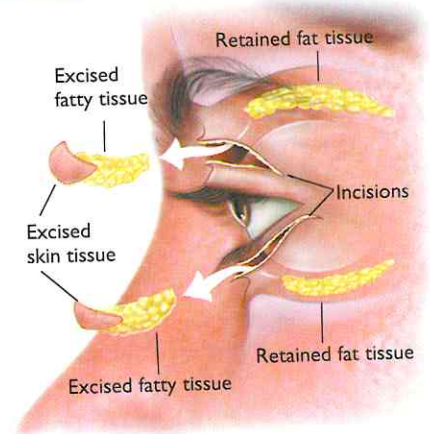
in the skin’s natural folds so that the fine scars are less visible. An incision is closed with a fine suture that is removed in four to five days. Some surgeons use sutures that dissolve and do not need to be removed. As incisions heal, they should eventually fade to fine lines.

An eyelid reduction will not remove the dark circles that can occur around the eyes, smile lines at the corners of the eyes, crow’s feet or droopy eyebrows. Other surgery such as a facelift or browlift may be needed. (See the Society’s patient education pamphlets on these procedures, available from your plastic surgeon.)

**ANAESTHESIA:** Eyelid reduction surgery may be undertaken with either general anaesthesia or local anaesthesia. Your surgeon will advise you which is best in your case.

hospital. Have someone stay with you for at least 24 hours after you return home.

**SMOKING:** Stop smoking for at least two weeks before and after surgery. Smoking increases the risks associated with surgery and anaesthesia, and impairs healing. It is best to quit.



- 1 Bulging fatty tissue is excised or repositioned inwards.
- 2 Excess skin tissue in the upper or lower lid may be removed.
- 3 The skin incision in the upper or lower lid is closed with fine suture.

## RECOVERY FROM SURGERY

You can usually drink fluids and eat a light meal two to three hours after surgery.

Discomfort is usually mild and typically is limited to the incisions. You may need pain medication for a few days. Bruising and swelling usually subsides in three to four weeks. Sleeping with your head elevated will help to reduce swelling. Putting a cool compress gently over the area can help relieve discomfort and swelling.

You can resume your normal activities a few days after surgery but do not smoke, undertake strenuous activity or drink a lot of alcohol. Most people take two or three weeks off work. Healing is usually complete within a few months.

You may need to clean your eyes as they sometimes get crusty and itchy. You may need to use lubricating drops. You will be shown how to do this before you go home.

Your eyes may be sensitive to light for a few days so you may need to wear sunglasses. Use a sun-block cream, and wear a hat to protect your face when outside. You can wear make-up after about 10 days.

Do not wear contact lenses for at least two weeks. After that, they can be worn but may still cause some discomfort for a while.

**FOLLOW-UP:** You will usually return to the surgeon for a check-up after about a week. Your surgeon will examine the treated area and answer any questions. Another appointment may be scheduled at the check-up visit.

## RISKS OF SURGERY

Modern surgery is safe but does have risks. Despite the highest standards of surgical practice, complications are possible. It is not usual for a surgeon to dwell at length on every possible side effect or rare, serious complication of any surgical procedure.

Any discussion of frequency of risks or benefits (for example, one patient in 100, or “rare” and so on) can only be estimates as the outcomes of clinical research can vary widely. Such outcomes can depend on many factors, such as the surgical methods, equipment, surgeons’ experience and data collection, among others.

Most people having eyelid reduction surgery will not have complications, but if you have concerns about possible side effects, discuss them with your surgeon. The following list of possible complications is intended to inform you, not to alarm you. There may be others that are not listed.

Serious problems after eyelid reduction surgery are uncommon. Risks include:

- pain and discomfort
- temporary swelling, leading to a tight feeling in the eyes
- bruising, which persists for two to three weeks
- removal of too much skin, possibly exposing the cornea to injury
- asymmetry of the eyelids
- noticeable scarring of the incisions
- itchiness, watering or dryness of the eye

that may require use of artificial tears; rarely, this may be permanent

- changes in vision, which usually resolve quickly; rarely, some may be long lasting or permanent
- rarely, blindness may result; the risk is considered to be about one eye in every 40,000 procedures; smoking, pre-existing eye disease, straining, lifting and coughing add to this risk.

## REPORT TO YOUR SURGEON

Tell your surgeon at once if you develop any of the following:

- temperature higher than 38°C or chills
- heavy bleeding from the incisions
- severe pain or tenderness
- redness around the incisions that is spreading
- loss of feeling in any area of the face
- dizziness, feeling faint, short of breath
- any impairment of vision
- any concerns you have regarding your surgery.

## COSTS OF TREATMENT

Ask your surgeon to provide an estimate of the surgical, anaesthetic and hospital fees that may apply. This can only be an estimate because the actual treatment may differ from the proposed treatment. Discuss costs before treatment rather than afterwards.