





# FACELIFT SURGERY

Patient information to assist informed consent

he aim of facelift surgery is to reduce the signs of ageing by improving the contours of the face and neck. A facelift can help to make the face and skin appear younger and smoother. The surgery usually involves the tightening and removal of sagging skin on the face and neck, and the removal or repositioning of excess fat. Facial muscles may be surgically tightened, improving their tone.

A facelift may be undertaken alone, or it can be combined with other surgical procedures such as browlift, eyelid lift or nose reconstruction. The bone structure of the face is not changed during facelift surgery.

Facelift surgery is a common cosmetic procedure performed by plastic surgeons. It is also known as meloplasty or rhytidectomy. Most facelifts are performed for people aged between 40 and 65, but older people can also have facelifts.

The outcome of surgery depends on the person's age, general health, degree of ageing, facial skin looseness, lifestyle and the procedure undertaken.

The results of a facelift usually last between five and 12 years. Most people can have two to three facelifts in a lifetime, depending on the extent of each procedure and the amount of scarring that occurs with each facelift.

Chemical skin peel, dermabrasion, fat grafting or laser resurfacing of the face may be undertaken at the same time as the facelift. See "Laser Surgery – a guide for patients", available from your plastic surgeon. The aim of these treatments is to treat sun-damaged skin and crow's feet around the eyes and fine lines around the mouth, which are not

removed by facelift surgery. Volume can be added by fat grafting to areas of deficiency and hollowing.

### The normal ageing process

As people age, facial skin loses the tone and elasticity it had during youth. The jaw and neckline lose definition and appear to sag. As the skin is not as resilient as it once was, the wrinkles that occur with smiling and frowning do not smooth out, and crow's feet develop around the eyes.

A groove often appears from the corner of the mouth to the chin. Fatty deposits which give the face its shape and contour may decrease in some areas and increase in others.

Smoking, high alcohol consumption, sun damage, genetic factors and some medications can also contribute to the signs of ageing.

While facelift surgery can be effective in improving facial contours, the normal ageing process will continue after the surgery.



The incisions for facelift surgery are hidden, as much as possible, in the hairline, in the creases of the face, and behind the ears. See page 3 for more information on the surgical procedure.

### TALK TO YOUR PLASTIC SURGEON

This 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 facelift surgery or every possible side effect.

Read this pamphlet carefully, and save it for reference. Technical terms are used that may require further explanation by your surgeon. Write down any questions you want to ask, and discuss them with your surgeon.

If you are not sure about the benefits, risks and limitations of treatment, or terms used in this pamphlet, ask your plastic surgeon. You are encouraged to discuss with your surgeon:

- the result you want (point out the areas you want improved)
- the surgery to be done, and why
- the outcome you can expect.

Thorough discussion will help your surgeon to determine whether your expectations are realistic and can be achieved.

Use this pamphlet only in consultation with your surgeon.

Your Plastic Surgeon
AUSTRALIA PLASTIC SURGERY

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

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: DD/MM/YYYY

### THE DECISION TO HAVE A FACELIFT

In assessing whether a facelift is an option for you, your plastic surgeon will examine:

- the elasticity and thickness of the facial skin
- subcutaneous tissues and fatty deposits
- bone structure and the shape of your face
- degree of wrinkles and folds
- your hairline, to see where incisions can be best placed and hidden as much as possible.

The examination will help your surgeon to plan the treatment best suited for you.

The decision whether to have a facelift should only be made after discussion with your plastic surgeon. The decision is always 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 having a facelift. When making a decision, keep in mind that your surgeon cannot guarantee that the surgery will meet all your expectations and that the surgery bears no risks. The general risks of surgery and the specific risks of facelift surgery are discussed on page four.

People with any of the following conditions will have to discuss with their surgeon whether facelift surgery is suitable for them:

- collagen vascular disorders
- anticoagulation bleeding disorder
- use of high-dose steroids, isotretinoin, or immunosuppressants
- uncontrolled high blood pressure, poorly controlled diabetes, significant chronic airway disease, or significant COPD
- not able to have an anaesthetic
- scarring from previous surgery.

### Realistic expectations

People who are healthy and have

realistic expectations are suitable for a facelift. It is important to have realistic expectations about facelift surgery and what your surgeon may be able to achieve.

The results of treatment may not be as good as your expectations. The improvements that may be achieved are not permanent. The ageing process goes on as normal.

Facelift surgery is an "elective" procedure, meaning it is a matter of personal choice and not needed for the maintenance of good health.

Decide what you hope to achieve from having a facelift and to discuss it in detail with your surgeon.

Seek the opinion of another surgeon if you are uncertain about your surgeon's advice.

### Consent form

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

## **BEFORE SURGERY**

Your surgeon needs to know your full medical history in order to plan the best possible treatment. Tell your surgeon about any health problems you have had, as some health problems may interfere with surgery, anaesthesia and care after surgery. Your medical history is confidential.

Give your surgeon a list of ALL the medicines you are taking or have taken recently including insulin, blood thinners (such as warfarin), aspirin, cough medicines, or herbal or homeopathic remedies.

Your surgeon will advise you if you are able to continue taking most of your medicines, for example, those for blood pressure, diabetes, epilepsy, birth control, or psychiatric problems, among others.

Aspirin, medicines that contain aspirin (such as some cough syrups), some herbal tonics, large amounts of vitamins and anti-inflammatory medicines can increase the risk of excessive bleeding during and after surgery. Your surgeon will advise you whether you should alter the dose or stop taking the medication. Discuss this carefully with your surgeon.

Tell the surgeon before surgery if you have had:

- an allergy or bad reaction to antibiotics, anaesthetic drugs or any other medicine
- prolonged bleeding or excessive bruising when injured
- any long-term or recent illnesses

- previous facial surgery
- psychological or psychiatric illness.

You may need blood tests or other tests (such as X-ray examinations or ECGs) to detect problems that could complicate surgery or anaesthesia. Your surgeon or anaesthetist will give you instructions about preparing for any procedures or tests.

Some people let their hair grow prior to surgery so it can be styled to hide the healing incisions.

Smoking: Smoking increases the risks associated with surgery, anaesthesia, recovery and particularly healing. You should stop smoking and all nicotine intake several weeks before surgery. It is best to quit.

## ANAESTHESIA

A facelift can be performed under general anaesthesia or local anaesthesia.

Often a combination of general and local anaesthesia is used. If local anaesthesia is used, the area to be operated on is widely infiltrated with local anaesthetic. The local anaesthetic helps to constrict the blood vessels, reducing bleeding and bruising after the surgery.

Modern anaesthesia is safe and effective, but does have some risks. Rarely, side effects from an anaesthetic can be life threatening. Ask your anaesthetist for more information.

Give your anaesthetist a list of ALL the medications you are taking or have taken, and any allergies you may have.

## **FACELIFT SURGERY**

The surgeon makes an incision in or behind the hairline and then just in front of the ear between the ear and the cheek, ending behind the ear and within the hairline (see Figure 1).

The skin is carefully separated from the muscle and fat layers that lie below it. The muscles and deeper tissues are tightened using sutures. This is sometimes called the "SMAS lift". Excess fat is then trimmed or removed with liposuction (see Figure 2).

The facial skin is then pulled backwards towards the incisions, and excess skin is removed (see Figure 3).

The wound is closed with very thin sutures (stitches) or metal clips. In some patients, loose skin and excess fat from the front of the neck are removed at the same time as the facelift. This requires an additional incision that is made below the chin.

Facelift surgery usually takes between two and six hours to complete.

After surgery, a drain tube may be inserted into the wound and left in place for a day or two. The tube assists healing by preventing the accumulation of excess fluid around the surgical site.

A firm dressing may be wrapped around the face and over the incisions. The dressing is usually changed the next day, after which the hair can be washed. Some surgeons recommend that a light supportive bandage be worn on the face for a few weeks to help reduce swelling and bruising.

If a narrow band of hair is removed prior to surgery, it grows back in three to four months. The hair can usually be styled to hide the shaved area and the healing incisions.

As much as possible, the incisions for facelift surgery are hidden in the hairline, in the creases of the face, and behind the ears. All surgery leaves a scar of some sort. Plastic surgeons close incisions in a way that usually makes the scars as thin and unnoticeable as possible.

As plastic surgeons can use a wide variety of techniques, your surgeon can explain the techniques that are most appropriate in your

Types of facelifts: In addition to the SMAS facelift, other types of facelifts include: the MACS facelift, short scar facelift, mid facelift and endoscopic facelifts. Discuss with your surgeon which types are suitable for your specific need and your surgeon's experience.

**Endoscopic facelift:** Some facial treatments are performed using an endoscope, a thin tube with a light and video camera. It is inserted under the skin to reposition tissue. If an endoscopic procedure may assist your case, your surgeon can discuss it further with you.

## RECOVERY FROM FACELIFT SURGERY

Facility. It usually involves one to two nights in hospital but can also be performed as a day procedure. Arrange for a relative or friend to drive you home after the surgery. Someone should stay with you at least for the first day after you go home and preferably for a few days.

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

You can resume your normal activities a few days after surgery but do not smoke, undertake strenuous activity or consume large amounts of alcohol during the healing period. Smoking and heavy exposure to tobacco smoke can slow down the healing process.



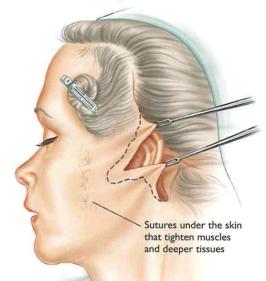
Figure 1

The surgeon makes an incision in or behind the hairline and then just in front of the ear, ending behind the ear and within the hairline.



### Figure 2

The skin is carefully separated from the muscle and fat layers that lie below it. The muscles and deeper tissues are tightened using sutures. This is sometimes called the "SMAS lift". Excess fat is then trimmed or removed with liposuction.



### Figure 3

The facial skin is then pulled backwards towards the incisions, and excess skin is removed. The incision is closed with very thin sutures (stitches) or metal clips. In some patients, loose skin and excess fat from the front of the neck is removed at the same time as the facelift. This requires an additional incision that is made below the chin (see Figure 1, above).

Most people take between two and three weeks off work. Healing is usually complete within a few months.

You may have some pain and discomfort, particularly around the incisions. Pain medication will be prescribed by your surgeon.

Some bruising and swelling is normal, especially one to two days after surgery, and can be unsightly. Swelling can cause a temporary change to the symmetry of the face.

Swelling and bruising usually resolve during the next few days but may require three to four weeks to disappear. Sleeping with your head elevated will help to reduce the swelling.

After one week, make-up can be

worn to disguise the temporary bruising and swelling. As the swelling settles, some fine wrinkles may reappear. To see the final results of the surgery, a few months of healing are needed. The time needed for complete recovery varies greatly from person to person.

Most people have numbness in the face that may last for several weeks, and sometimes longer.

If inserted, a drain tube is usually removed a few days after surgery. The stitches or clips are usually removed five to seven days after surgery.

Protect your skin from heat and sunlight following surgery, especially if you have had a chemical peel, dermabrasion or laser surgery to treat the skin's surface. Use a sun-block cream, and wear a hat and sunglasses to protect your face outside. (See "Laser Surgery – a guide for patients", available from your plastic surgeon.)

Follow-up: You will usually return to the surgeon for a check-up after a few days. Your surgeon will examine your face and answer any questions you have. Any further appointments that are necessary will be scheduled at the check-up visit.

Some surgeons suggest that periodic check-ups are important to observe the long-term results.

## POSSIBLE COMPLICATIONS OF FACELIFT SURGERY

A ll surgery carries some degree of risk. It is not usual for a doctor to dwell at length on every possible side effect or rare but serious complication of any surgical procedure. However, it is important that you have enough information to weigh up the benefits, risks and limitations of facelift surgery.

Most people having facelift surgery will not have complications, but if you have concerns about possible complications, discuss them with your surgeon. If complications occur, more surgery may be needed. This will lead to more costs and inconvenience.

The following possible complications are listed to inform you, not to alarm you. There may be other complications that are not listed.

### General risks of surgery

- Wound infection (treatment with antibiotics may be needed)
- Pain and discomfort around the incisions and sometimes in other facial areas
- Haematoma (an accumulation of blood around the surgical site that may require drainage)
- Nausea (typically from the anaesthetic; this usually settles down quickly)
- Heavy bleeding from the incisions
- Keloid or hypertrophic scars (Most scars fade and flatten, but some may become keloid or hypertrophic and remain raised, itchy, thick and red. Such a scar can be annoying but is not a

threat to health. Additional surgery or chemical treatment may be needed to try to improve the scar.)

- Slow healing (more likely to occur in smokers or people with diabetes)
- Separation of wound edges
- Allergies to anaesthetic agents, antiseptic solutions, suture material or dressings.

### Specific risks of facelifts

- Hair loss around the scars this is usually temporary but sometimes may be permanent
- Loss of skin due to impaired blood supply; this may be minor and heal by itself, or rarely, may involve large areas and require skin grafts
- Bruising and swelling
- Deformity of the earlobe
- Numbness around the ear and cheeks, which is common but usually improves over the next few months
- Slight difference in the appearance between the right and left sides of the face (asymmetry)
- Branches of the facial nerve and the great auricular nerve are located in the area treated by surgery. In rare cases, a nerve may require surgery at the time it is injured. Damage to the facial nerve occurs in about one patient in every 100. Motor nerve injury can result in partial loss of movement and a "lopsided" appearance of the face, which may be permanent in rare cases. Sensory nerve injury occurs in about seven

patients in 100, but this typically is not permanent, recovering gradually over weeks and months

■ In a few patients, re-operation may be necessary to correct complications.

### 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
- dizzy, faint or short of breath
- any concerns you have regarding your surgery.

### COSTS

sk your surgeon to provide an Ask your sar second anaesthetic and hospital fees that may apply. This can only be an estimate because the actual treatment may differ from the proposed treatment. If further treatment is needed due to complications or if other options are chosen by the patient, extra costs are likely to apply. Ask your surgeon about costs that may be covered by Medicare or private health funds. Medicare benefits are payable in specific cases but not usually for cosmetic procedures. A Medicare or health fund rebate may be available for treatment of complications. You should discuss costs before you have treatment rather than afterwards. Goods and services tax (GST) may apply.