

Information provided is intended to inform clients of expected procedures and outcomes. However, not all patients, procedures or surgeons are the same, and information may not be applicable to all procedures. PIAC reserves the right to vary the way the procedure is performed or which technique is used.

Blepharoplasty

Surgical/Procedure Name

Blepharoplasty

Common Name

Eyelid surgery

Introduction

Blepharoplasty is the procedure used to correct conditions like baggy lower eyelid, lower eyelid wrinkle and the so called tear - trough deformity. First mechanism of deformity, the baggy lower eyelid is the senile change in the periorbital fat prominence that is caused by laxity of the fat contents which is the fascia (orbital septum) & the muscle (orbicularis oculi) layer. The amount of periorbital fat cannot increase with age and pay much less responsibility to the baggy eyelid as previously understood. Second, is the lower eyelid skin excess that expands with age. Third, laxity of the lower eyelid sphincter muscle. Lastly, the tear-trough deformity is the separating invaginating skin zone between 2 bulging areas of the periorbital fat and cheek (malar) fat pad.

Surgical Procedure

The surgeon will, according to how a patient presents, remove the excess fat of a baggy eyelid and possibly tighten the muscles. The surgeon may also remove excess skin.

Hospital Admission

Out Patient procedure. No admission necessary

Duration of Operation

Two to three hours

Anaesthetic

Normally, it is done under local anesthetic injection to save the cost of surgery, save from anesthetic risk and being awake gives the surgeon a dynamic assessment of the surgical adequacy. This can also be done under general anesthesia.



Pre-operative Care

Inform your surgeon of any drug allergies, all medical conditions and any medications that you are taking both prescription and non-prescription. Patients who suffer from hypertension must control blood pressure to the normal level before getting the surgery.

2 weeks prior to surgery :

To prevent the occurrence of abnormal bleeding that will cause many adverse consequences such as difficult surgery which can prolong operative time, post operative hematoma that will worsen the surgical result (ectropion, infection), prolonged post-operative pain and swelling you should avoid consumption of any bleeding promoting medications (Aspirin, Ibuprofen, anticoagulants, Vitamin E, Estrogen hormonal derivatives).

6 hours prior to surgery :

- No food and liquid intake if general anesthesia is planned.

No eye make-up, mascara and clean the face from any cosmetic.

Post operative care

Dressing : Apply the compressive adhesive tape over the lower eyelid for 3 days then clean the sutured area twice daily with non irritating substance like saline solution and Chloramphenicol ointment.

Medication : You will be provided with oral antibiotics, anti-swelling and pain reliever tablets. Take the medications as directed by your surgeon. Note that it is important to complete the full course of antibiotic therapy.

Cold compression : In the first 3 days to prevent further bleeding from the wound.

Warm compression : After 3 days to promote decrease in swelling. Don't have it on the first 3 days otherwise it will increase the bleeding and swelling.

Suture Removal : Will be done on the 5th or 7th day post-op.

Follow-up appointments : Scheduled on the 7th day as well as 2nd, 4th and 12th week following surgery.

Showering : Keep the suture site dry and away from any sweat and dirt 'till stitches are removed. You may apply Chloramphenicol ointment over the suture line before getting a shower.

Activity : It is advised to have bed rest in a cool and dry room. Avoid activities that can increase heart pumping in the first 3 days.

Lying position : In the first few days it is best to lay in a high-head position to lessen the leakage of blood to the wound area.

Recovery Expectations

In the first 2 days following the procedure, pain will be most intense and bruising and swelling will be maximum. This will start to subside after 3 days, 80% recovery in 3 weeks and will become normal in 2-3 months. Scar will be hidden very close to the lower eyelash.

When to call

It is important that you know the signs of infection. This includes fever temperature over 37.8°C, pain not relieved by meds, increased redness along the incision, yellowish or greenish fluid collection on the wound edge, excessive swelling, excessive tenderness. When signs and symptoms of infection is noted or there is bleeding from the incision that is difficult to control with light pressure, call the staffs, nurse or your doctor without hesitation.

Risks and complications

Risks are inherent to any surgical procedure. The most common risks are swelling, bruising, bleeding, infection, fluid, scarring.

Ectropion or the eversion of the lower eyelid rim may happen in some cases that have very weak eyelid and have no lateral canthoplasty done together with lower blepharoplasty. Most of the cases will subside in 3 weeks. You can reduce your risks by closely following your surgeon's instructions both before and after surgery.

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