

FREQUENTLY ASKED QUESTIONS - EYELID SURGERY

1. What is Blepharoplasty?

Blepharoplasty refers to the plastic surgery of the eyelids. The most common indication for the blepharoplasty is to remove the excess fat, skin and atrophied, atonic or uncommonly hypertrophic muscle from the upper and lower eyelids. It is a very common procedure performed on women and men who, because of "hooded" eyes may tired.??? Sometimes the excess skin or fat bulges may interfere with the upward gaze.

2. What is fat herniation?

Both upper and lower eye lids have pockets of fat which may cause bulges through the thinned out fascial layers which normally contain them. This is common sequel of aging process. However some individuals may suffer from this in early age. It is also hereditary.

3. How is the blepharoplasty operation performed?

Dr Gahankari usually performs blepharoplasty using local anesthesia and light sleep sedation or General anesthesia. He will assess and mark the excess eyelid skin before the operation. The incisions are made within the natural creases of the eyelids. After the excess skin and muscle is removed, the herniated fat is addressed. Usually there are two pockets of the fat in the upper eyelid and three in each of the lower eyelids. He will then suture the incision often with very fine, dissolvable sutures. In case of the upper eyelids, at this stage, he may use a special technique of suturing to reconstruct the eye fold, if this was needed.

In case of the lower eye lids, if there is excess laxity of the lower lid, he may remove the outer wedge of the lid along with the excess skin. Baggy lower eye lids may not be entirely amenable to be corrected by the skin-muscle-fat removal. In fact, removal of excess fat

from the lower eye lids can give rather hollowed appearance and this is avoided.

4. How are the scars after a Blepharoplasty?

Eye lid skin is very thin and scars are usually very inconspicuous. Although the scarring associated with Blepharoplasty is quite minimal and practically non-existent after several months, problems can arise. In case of both upper and lower eye lids it is common for the scars to extend in the creases of the 'Crow's feet'. In the upper eye lids the scar is along the eye fold while in the lower eye lids it is 2-3 mm below the eyelash margin.

5. Who are the ideal candidates for Blepharoplasty?

The patients may ask for the blepharoplasty surgery either for aesthetic or/and functional (restriction of the peripheral gaze) reasons. Most patients are middle aged men and women. People with Asian descent may ask for the operation for reconstruction of the upper eye lid fold and this is generally referred to as 'double eye lid' correction. Elderly people may need the operation for treating weakened upper eye lid elevator muscle and for excessively lax or weak lower eye lids.

6. Will a Blepharoplasty correct the wrinkles around eyes?

Blepharoplasty procedure is not designed to remove the wrinkles (i.e. Crow's feet). Other procedures such as microdermabrasion or injection of botulinum toxin may be needed to suit your needs.

7. What to expect in the post-operative course?

Eye lid skin is very thin and hence it is usual to have swelling or 'black eyes' after the surgery. Some patients may be prone to

bruising more than others. Your eyelids may feel tight and sore as the anaesthesia wears off, but your pain medication should be able to control any discomfort. Your vision may be a little blurry for the first few days due to the swelling and the eye ointment and your eyes may be watery, red or they may be very dry. Significant pain is unusual after blepharoplasty and if present, should be a cause for concern. You are advised to keep your head up (over a couple of pillows) even while sleeping to reduce the eye lids swelling.

8. What about stitches?

Dr Gahankari in most instances uses dissolvable sutures. However, if non-absorbable sutures are used, you would be informed of the arrangement for their removal in about four days.

9. How long does it normally take to appreciate the results of this procedure?

The bruising of the eye lids normally takes about a week to subside, but occasionally it may take another week or so. The improvement in appearance is quite noticeable at this stage, but it may take up to six weeks for appreciating nice results.

9. What are the risks of Blepharoplasty?

There are risks with all operations and Blepharoplasty is no exception. It is important that the surgeon is a member of the Australian Society of Plastic Surgeon such as Dr Gahankari. The risks of the operations can be many and potentially severe if a non qualified surgeon is chosen. Proper assessment and diagnosis is often a key to good results after the surgery.

Common minor complications that are associated with Blepharoplasty include double or blurry vision for a few days, temporary

swelling at the corners of the eyelids, and *milia* (or tiny whiteheads) that can be removed *by your surgeon* by pricking them with a micro-needle. It is possible to develop asymmetry during healing or excessive scarring especially if you are prone to such a thing.

It is common to experience difficulty in closing your eyes when sleeping in the first week or so. In rare instances, when this is prolonged, this may need further correction. Rarely lower lids may be pulled down (*ectropion*) after the surgery. This may need further surgery. As with any surgery it is preferable to determine the possibilities of the revision surgery.

Asymmetry in appearance of the eyes is uncommon and rarely noticeable enough. Occasionally though, the eye or eyes may get rounded looks at the corners which again may need some corrective procedure.

It is important that you make Dr Gahankari aware of the following conditions if you have them

1. Thyroid disorders- excess or inadequate (Myxedema)
2. Dry eyes
3. Glaucoma or high blood pressure
4. Visual problems, retinal detachment etc
5. Medications especially if they thin your blood or make you prone to easy bruising, steroids or medications for arthritis or dermatitis.
6. Neuro-muscular disorders such as facial nerve weakness or myasthenia gravis

The most important and the most devastating complication of blepharoplasty surgery is blindness. This is extremely rare and can occur with any surgery in or around the eye, and has been reported even with just injections of drugs around the eyes.