

Blepharoplasty



ABOUT OUR PRACTICE

“We believe it is important for any patient to know as much as possible about their surgery, their physician, and their options. We approach each patient on an individualized basis, learning as much as possible about their goals in my initial consultation. Our practice is designed to provide patients with a comfortable atmosphere where they can feel safe and confident about their medical care.”

Frederick J. Duffy, Jr., MD, FACS & Brice W. McKane, MD, FACS

PROCEDURE DESCRIPTION

Our eyes are one of the most important features of our face. Not only are the eyes the “windows to the soul”, they are a principal component of how others read our moods or feelings. Unfortunately, as we age our eyes often begin to look tired and droopy, even when we aren’t feeling tired, and we no longer have that “wide-eyed” youthful appearance. It is bad enough to look tired at the end of a long day – who wants to look tired in the middle of the morning?

A blepharoplasty is an operation performed on upper and/or lower eyelids to remove excess skin and fat. It may be done alone or in combination with other facial rejuvenation procedures such as a facelift or browlift. Every patient is different and a careful analysis of the face and the anatomy around the eyes needs to be done, as well as the position of the eyebrows, before any recommendation can be made about a blepharoplasty or other procedures. The amount of excess skin and/or fat that a patient has is in part due to the aging process and in part due to congenital reasons. Many people are born with a significant amount of fat around their eyes that tends to expand with time. Aging skin loses its natural elasticity and may actually also increase with time. These problems combine to lead to bulging, redundant skin around the eyes which gives patients a tired and aging look. The procedure to correct this involves making incisions that are hidden well in the crease region of the upper eyelid and below the lower lash line. These tend to heal amazingly well.

This is an example of where such an incision might be made in an upper eyelid, along the natural fold of the lid.



When a blepharoplasty is performed alone, many of our patients have the opportunity to have this surgery in the office under local anesthesia. This greatly reduces the cost for the procedure, as well as allows the procedure to be done in a more comfortable atmosphere. Although not every patient is a candidate for having the surgery done in the office, most are able to do so.. Prior to the procedure, patients are prescribed a mild oral sedative, such as Valium, to relax them during the operation. Some patients are not comfortable being awake during a procedure and prefer to have it done in the hospital. Also, if the patient is having combined procedures, such as a browlift or facelift, that surgery would need to be performed in a surgery center under general anesthesia.

Below are pre- and post- operative photos of a patient who recently underwent blepharoplasties in our office.



Dr. Duffy performed an upper and lower blepharoplasty on John Hammarley, the Fox 4 Health Watch Reporter. The procedure was done in the office under local anesthesia and broadcast on November 8, 2001. A brief introductory segment was broadcast live from the office that evening. John had the surgery done on Halloween, October, 31, and was back on the air live on November 8th, looking great. While not every patient recovers at the same pace, John's recovery was fairly typical. You can view the broadcast on our website at

www.dallasblepharoplasty.com

PREPARING FOR SURGERY

UPON SCHEDULING YOUR PROCEDURE

Healthy patients recover from surgery more quickly, heal better, and are less likely to have complications following surgery. It is crucial that you discuss any underlying health problems with your surgeon so that the risk of complications can be minimized.

Smoking may lead to poor wound healing. Smokers are much more likely to have delays in healing as smoking reduces circulation to the skin and tissues. We strongly encourage you to stop smoking before surgery. If you are a smoker, please inform your surgeon.

It is important that you discuss any and all medications you are currently taking. It may be necessary to stop taking medications containing aspirin or ibuprofen (Advil or Motrin) before surgery. Both of these drugs are blood-thinning agents and can cause bleeding problems during and after surgery. It is also important that you inform us about any herbal or holistic supplements you are taking. Some of these products may be associated with bleeding problems. You may need to consult with your primary care physician if you have any concerns about the medications that you are currently taking. Do not discontinue taking any medication without the approval of the prescribing physician.

THE DAY PRIOR TO SURGERY

In most cases you will be given a prescription for postoperative medications when you come to our office for your final appointment before surgery. We recommend you go ahead and fill that prescription at your pharmacy before the day of surgery, so that it will be available to you when you return home after surgery. If you have any questions about your medications, you can consult your pharmacist or ask your surgeon when he sees you prior to the surgery.

You will be unable to drive yourself home after surgery, and the hospital/surgical facility will not allow you to leave in a cab by yourself. Therefore it is important to arrange to have someone take you to surgery and bring you home after you are released. It is also required that you have someone stay with you for at least 24 hours after surgery.

We recommend avoiding any alcoholic beverage for 24 hours prior to surgery as alcohol may dehydrate you.

If you are having your blepharoplasty done under general anesthetic, it is very important that you do not eat or drink anything, including water, after 12:00 midnight the night before surgery. If you need to take any medications during this time, take it with as little water as possible. Your anesthesiologist will call you the night before surgery. If they are not able to reach you, you will be able to ask any questions upon your arrival at the surgical facility.

THE DAY OF SURGERY

If you are having your blepharoplasty performed under general anesthetic (not in our office), it is important you have nothing to eat or drink, including water, after midnight prior to surgery. If you eat or drink prior to surgery it may be necessary to cancel the surgery. If medications are to be taken, please take them early in the morning if possible with only a sip of water. All medications should only be taken if authorized with the anesthesiologist or your surgeon.

If you are having your blepharoplasty performed in our office, you will be given a prescription for a sedative (typically Valium). This will be for you to take the morning of your procedure. Please take the medication exactly as prescribed by your surgeon. If you are having your procedure done in our office, you may eat or drink prior to surgery.

Be sure to wear comfortable, loose-fitting clothing that does not have to be pulled over your head. Do not wear hairpins or jewelry. Do not bring any money or valuables with you to the surgical facility.

WHAT TO EXPECT AFTER SURGERY

Dressings & bandages: You will not have any dressings (bandages) after surgery, except possibly steri-strips (tapes) at the corner of your eyes. The sutures will be removed in the office approximately 5 days after surgery. The day after surgery you may shower normally. Do not put any makeup or ointments on your eyes, including mascara, until released to do so by your surgeon.

Swelling and bruising: Moderate swelling and bruising may occur after any surgical procedure. If they are excessive or continuous, it may be indicative of bleeding or infection and our office should be notified as soon as possible. After a blepharoplasty there is typically bruising around both eyes and even across the bridge of your nose somewhat. Some patients describe it as looking like they have two black-eyes. The bruising is typically at its worse at 24-48 hours after surgery and then begins to improve rapidly from there. You will be given an eye patch that can be cooled in the refrigerator. This should be used to help minimize the swelling, particularly for the first 24 hours after surgery.

Pain: Although there will be some discomfort, particularly the first few days following your surgery, it is typically not significant and you will be given pain medication. If the pain is significant or worsening, call our office immediately. The pain medicine will not totally alleviate your pain but the goal is to make you as comfortable as possible, particularly in the first few days.

Numbness: During the procedure, it is likely that some of the sensory nerves to the skin will be cut. It is also possible to experience some numbness from the local anesthetic that is administered during the procedure. It can be expected that most normal nerve activity will return within days, although some areas may stay numb for weeks.

Bleeding: It is normal to experience some bleeding from the incision sites. It should not be excessive and you should notify the office if any excessive bleeding occurs.

Seeing Your Results: You will be able to see a significant improvement within a few days of surgery, as the swelling and bruising begins to resolve. However, because there will be some small amount of swelling for days or even weeks following surgery, you will not be able to see the final result until the swelling is gone. Be aware your results will continue to improve as the swelling resolves.

Smoking: Smoking, even after surgery, will delay the healing process. If at all possible, smoking should be stopped 2 to 3 weeks prior to surgery and you should make every effort not to smoke for at least a month following surgery.

Workout Routine: You will be able to return to normal exercise activities typically within 48 hours of surgery. If you are still experiencing bleeding or discomfort you may want to minimize the activities for a few days more.

If you have had your blepharoplasty under general anesthetic (not in our office), you will likely feel tired and weak for a few days or even up to a week after your surgery. You may have intermittent nausea and some dizziness. Constipation is also occasionally a problem following general anesthetic.

If you have any questions, we encourage you to call the office. We will make every effort to make this procedure as pleasant for you as it can possibly be.

GENERAL SURGICAL RISKS

It is important that you fully understand the risks associated with any surgery. We encourage you to obtain as much information as possible about the surgical procedure and the associated risks. If you have questions and concerns about the procedure or risks, we encourage you to ask us to help you to better understand them. We want you to make an informed decision about your surgery.

As with any surgery, there are risks associated with the anesthesia and with surgery in general. If you are having general anesthesia (i.e. in a hospital or surgical facility and not in our office), those risks may include pulmonary embolism (blood clots of the lungs), severe allergic reactions to medications of anesthetic, cardiac complications, heart attack, stroke and even death. These are rare but potential risks of any surgical procedure. If you are having your procedure done in our office under local anesthetic the risks of the anesthetic are typically less but you may still experience those reactions. You will receive a detailed surgical consent prior to surgery and will have the opportunity to discuss the risks. The risks listed below are only some of the more common risks associated with a blepharoplasty. All of these are infrequent, but it is important you are aware of the possibility of these risks.

Thick, wide or depressed scars: You will have scars in the lids (upper or lower or both depending on which lids you are having done). These scars are designed to be hidden as much as possible in the natural folds of the skin. However, it is impossible for scars to be made invisible and you should be aware there will be scars. As your incisions heal, your body creates new collagen that forms a scar. The majority of the healing process takes place in the first few weeks after surgery. However, you should be aware that scars take up to a full year to reach their final appearance. Depending upon the healing process, a scar may be abnormally wide, dark, or depressed. You will be started on a program of scar massage a few weeks following your surgery to help the healing process. If abnormal scarring occurs, there are a variety of non-surgical and surgical solutions that will be presented to you. However, you should be aware there will always be a scar in this region.

Delayed healing: Some patients heal at a slower rate than others. Factors that play a role in delayed healing include (but are not limited to) infection, decreased circulation and smoking, poor nutrition, advanced age, prior surgery or radiation, Lupus, or other diseases such as Diabetes.

Unsatisfactory result: You have decided to have a board-certified plastic surgeon perform a procedure to enhance or improve the appearance of a specific part of your body. Plastic surgeons are specially trained and strive to give you the most pleasing aesthetic result. Although these procedures are performed to improve the appearance of an area, it is important to remember that complications may occur and that sometimes expectations are not achieved. Some procedures will require a secondary procedure or revision surgery to help achieve the result you were striving for. It may even be possible that the result you want cannot be achieved.

Bleeding: It is possible, though unusual, to experience a bleeding episode during or after surgery. Should post-operative bleeding occur, it may require emergency treatment to drain accumulated blood or, in rare cases, a blood transfusion. Do not take any aspirin or anti-inflammatory medications for ten days before surgery, as this may increase the risk of bleeding. Non-prescription “herbs” and dietary supplements can increase the risk of surgical bleeding.

Infection: Infection is unusual after this type of surgery. Infection is more likely when there is delayed wound healing. If an infection occurs, treatment may be necessary including antibiotics or hospitalization.

Blindness: Blindness is extremely rare after blepharoplasty. However, it can be caused by internal bleeding around the eye during or after surgery. The occurrence of this is not predictable.

Contour irregularities: Contour irregularities and asymmetries may occur after a blepharoplasty. There may be a “pulling” or “puckering” of the skin at areas of the incision. In most cases these can be surgically corrected under local anesthesia here in our office.

Damage to deeper structures: Deeper structures such as nerves, blood vessels, and eye muscles may be damaged during the course of surgery. The potential for this to occur varies with the type of blepharoplasty procedure performed. Injury to deeper structures may be temporary or permanent.

Dry eye problems: Permanent disorders involving decreased tear production can occur after blepharoplasty. The occurrence of this is rare and not entirely predictable. Individuals who normally have dry eyes may be advised to use special caution in considering blepharoplasty surgery.

Ectropion: Displacement of the lower eyelid away from the eyeball is a rare complication. Further surgery may be required to correct this condition.

Corneal exposure problems: Some patients experience difficulties closing their eyelids after surgery and problems may occur in the cornea due to dryness. Should this rare complication occur, additional treatments or surgery and treatment may be necessary.

Unsatisfactory result: There is the possibility of a poor result from eyelid surgery. Surgery may result in unacceptable visible deformities, loss of function, wound disruption, and loss of sensation. You may be disappointed with the results of surgery. Infrequently, it is necessary to perform additional surgery to improve your results. Additional surgical procedures such as a browlift may be needed to correct eyebrow sagging which contributes to upper eyelid problems.

Allergic reactions: In rare cases, local allergies to tape, suture material, or topical preparations have been reported. Systemic reactions which are more serious may occur to drugs used during surgery and prescription medicines. Allergic reactions may require additional treatment.

Eyelash hair loss: Hair loss may occur in the lower eyelash area where the skin was elevated during surgery. The occurrence of this is not predictable. Hair loss may be temporary or permanent.

Long term effects: Although the blepharoplasty is designed to improve the appearance of the eyes, the normal aging process is not stopped. The increasing laxity of the skin, wrinkling, etc continues to occur over time. However, most patients find the improved appearance from the blepharoplasty lasts for many, many years.

Additional Surgery: Should complications occur, additional surgery or other treatments may be necessary. Even though risks and complications occur infrequently, the risks cited are particularly associated with blepharoplasties. Other complications and risks can occur but are even more uncommon. The practice of medicine and surgery is not an exact science. Although good results are expected, there is no guarantee or warranty expressed or implied, on the results that may be obtained.

INFORMATION ABOUT SCARS AND SCARRING

Every surgical procedure involves some form of scarring. The amount of scarring, length of the scars, and the location of the scars is very much a function of the type of surgery that is performed.

With any surgical procedure, it is important to realize that every scar, regardless of size, goes through a process of healing that lasts as long as a year. Regardless of the size of a scar, scars are often initially slightly raised and somewhat reddened. They are occasionally painful. As scars heal, patients will occasionally note that the scars are very sensitive and this may take months to resolve.

Scars will soften as they heal and become less reddened and usually end up pale and flush with the skin. However, it is important to realize that any scar may be raised, widened, or permanently numb as can the skin around the scar. Most patients' scars go through the normal process of healing and rather quickly end up looking very good. However, problems can occur with any scarring and wound healing process regardless of the success of the operation itself. Each individual patient heals differently, and even the same patient may notice a difference in the healing process from one surgery to the next.

There are a number of things that you, the patient, can do to minimize the appearance of surgical scars. We encourage all patients to begin a program of scar massage several weeks after surgery. This improves the blood supply to the skin and he believes this softens the scars quicker. It is also very important to strictly avoid sun exposure to any scar for a year following any surgical procedure, particularly on the face or other sun-exposed area. If you need assistance choosing a sunblock product, please speak with our esthetician. Additionally, smoking has an extremely detrimental impact on any wound healing process and may result in a poor scar appearance.

If a scar is prominent there are treatments which may be recommended including scar revisions. These treatments are designed to improve scarring where possible, but it is not possible to "erase" a scar. The goal is to avoid a problematic scar. Some patients are prone to hypertrophic scars or keloids. If you have a history of problematic scars you should be certain your surgeon is made aware of this prior to any surgical procedure.

It is always our goal to have patients well informed prior to any surgery. Because it is impossible to do a surgical procedure without some type of scarring, we provide this information to help you be aware of the process of scarring and wound healing. It is important to realize the healing process does occur over time and may take weeks, months, or even a year or more to achieve a final result.

If you have any questions regarding the location and type of scarring associated with the particular procedure(s) you are considering, please do not hesitate to ask for additional information.

FINANCIAL INFORMATION

The cost of cosmetic surgery involves several different components. These consist of the surgeon's fee, the operating room fee (often called the facility fee), and the anesthesia fee. In addition, depending on the type of surgery being performed there may also be the cost of implants. We will provide you with a written quote of the costs for surgery, including anesthesia and the surgical facility costs. Many minor procedures can be performed in our office surgical suite under local anesthesia, which allows us to pass a cost savings on to our patients as well as provide a comfortable surrounding.

Scheduling of any surgery requires the commitment of time and resources by your surgeon as well as the anesthesiologist and the facility where the surgery is to be performed. Therefore, a deposit is necessary to reserve your surgery date. The deposit is 10% of the surgeon's fees. Full payment for the procedure will be due one week prior to the surgery date. Failure to make this payment will result in cancellation of the surgery and forfeiture of the deposit. If surgery is cancelled for non-medical reasons within one week of the surgery date, the 10% deposit will be forfeited. If surgery is cancelled due to medical reasons or a family emergency, a full refund will be made, including the deposit.

Please be aware that there may be additional charges incurred for preoperative testing, such as bloodwork, EKG, and Chest x-rays. If you cancel surgery after having completed your preoperative testing, you will still be billed by the hospital/surgical facility for those tests. Insurance policies will not cover these items.

As with any procedure, there is always a possibility of complications following surgery. If those complications require additional hospitalization and/or procedures, there could be additional charges. Of course, serious complications are extremely unusual. It is important to remember that health insurance will not pay for any hospitalization, medication, or other healthcare provided as a result of a complication from a cosmetic procedure.

It is impossible for anyone, including your physician, to guarantee the results of any surgical procedure. While every effort possible is made to insure the results you desire, you may not achieve exactly what you hoped. It may be possible to improve the results with additional surgeries, but those will involve additional costs. Please understand that the payments you make to your physician, hospital, and anesthesiologist are for their expertise and services. If the results do not meet your expectations, it is not possible to refund any portion of the payments made.

FINANCING COSMETIC SURGERY

Our office does not offer financing programs through the office directly. It has always been our policy to focus on the health and well being of our patients, rather than on financing. However, there are a number of financing programs which can be utilized

which are not done directly through our office and we are happy to make our patients aware of these programs.

TRADITIONAL FINANCING PROGRAMS

There are a variety of options available for financing of cosmetic procedures. Some patients finance utilizing their credit cards or by loans from their own banks. Our office accepts Mastercard, Visa, Discover, and American Express. There is also a Compass Bank in our building which does loans for cosmetic procedures, as do most banks.