Western Eyecare
EYE & EYELID SURGERY

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Lower Eyelid Blepharoplasty

Lower eyelid blepharoplasty includes a collection of procedures to address both skin and fat excess of the lower eyelid as well as tightening of the lower eyelid.

HOW IS LOWER EYELID BLEPHAROPLASTY PERFORMED:

A wide variety of techniques are used to address a patient's concerns depending on whether the patient has a skin or fat excess and whether there is significant eyelid laxity from the ageing process. Each can be performed individually or combined depending on the individual needs of the patient.

For those patients with prominent eyelid bags only and no skin excess, an approach from the back surface of the eyelid is possible (Tarso-conjunctival lower eyelid blepharoplasty).

If there is a skin excess as well, then an anterior approach is generally best suited where there will be a skin wound placed in an eyelid crease just below the eyelashes (Trans-cutaneous lower eyelid blepharoplasty). This enables multiple synergistic surgical techniques in the one procedure including skin excision and reduction of prominent eyelid bags.

When significant lower eyelid laxity needs to be addressed, this is achieved with an independent procedure to tighten and support the lower eyelids (canthoplasty). This procedure reduces the risk of lower eyelid malposition when removal of excess skin and fat has occurred.

MANAGEMENT OF PAIN DURING SURGERY:

This procedure is usually performed in theatre with both local anaesthetic and sedation. Sedation is given through a needle in your vein, anaesthetic medications are injected via the needle, causing you to feel a quiet and calm sensation, an anaesthetist will be performing this. You will be aware of what is happening around you but will not feel any pain. Local anaesthetic will also be injected into your lids by your surgeon but you will not feel this due to your sedation. Although you will feel sleepy, you will remain awake enough to be able to open and close your eyes.

WHAT ARE THE RISKS ASSOCIATED WITH THE SURGERY:

- Swelling of the eyelid and surface of the eye are usually significant particularly in the first 2 weeks.

- Bruising of the eyelid and a “blood shot” eye is common and usually resolves within the first 1-2 weeks after surgery. It is not unusual to have a small ooze from the wound, or blood-stained tears but you should contact your surgeon should there be persistent or significant bleeding.

- Dry and gritty eyes may occur when the eyelids are swollen and patients may benefit from using lubricating drops.

- Blurry vision: A mixture of wound ointment + dry eye + eyelid swelling will cause minor blurring of vision in the first 1-2 weeks. This settles quickly thereafter and is generally not severe enough to limit normal daily activities.

- Scarring is usually well hidden in skin creases and heals well. A rare risk is thickened of the scar, especially in those who suffer keloid scarring.

- Infection is uncommon, but should be considered if there is increased pain, redness and swelling around the stitches, this can be treated with a course of antibiotics if necessary.

- Pain is generally minimal, and regular paracetamol is usually adequate. Patients will more commonly report numbness of the lashes which can last several months before returning as well as itchiness from the stitches.

- Under/over correction of skin/fat removal – leaving too much fat or hollowing the lid too much.

- Asymmetry between the eyelids: Our faces are commonly asymmetric. It may be important to maintain some asymmetry to achieve a natural outcome, however there is also a risk of increased asymmetry between the eyelids post-surgery.

- Lower eyelid retraction: observed as a dragging down of the lower eyelid or turning out of the lower eyelid. This occurs if there is poor support of the eyelid or eyelid laxity.

- Ectropion (turning out of the lower eyelid) independent of retraction or skin shortage can take place if a lax lower eyelid is left uncorrected or in the setting of poor support of the ligaments of the outer corner of the eye.

- Double vision from muscle injury is a risk however is very rare.

- If you have any concerns post surgery, you are able to ring Western Eyecare during clinic hours. If after hours, please call Dr Slattery or attend your nearest hospital emergency department.

RISKS SPECIFIC TO CURRENT PATIENT (IF ANY):

WHAT SHOULD I EXPECT POST SURGERY:

- If you have had a sedation, do not drive/operate heavy machinery, use alcohol or sedating drugs for 24 hours.
- Keep wounds out of the shower for 48 hours. After that, use ointment prior to the shower, pat the wounds dry and then re-apply ointment.
- Bruising and swelling in the first 2 weeks are significant and you should apply ice/cold compression (this can be ice packs or frozen peas wrapped in a clean, wet towel) 20-30 mins every 4 hours (or more frequently if possible) in the first week. There may be a low-grade swelling that persists even longer in some cases and your surgeon will generally wait several months before the final lid position to settle.
- You will be prescribed an antibiotic ointment which should be applied to the wound 3 times per day for 1 week.
- Strenuous activity should be avoided for 1 week.
- A follow up appointment is planned in the first 1 week to remove stitches.
- Your vision will be “smeary” in the first 2 weeks after surgery because of eye ointment combined with swelling, tightening of the eyelid and any dry eye symptoms that may occur early post-surgery. This generally improves after stopping ointment.
- The eyes may also feel gritty while the eyelids are swollen. This often resolves once the swelling settles. Some people may need lubricating drops during the recovery period.

- Most patients take approximately a week off work due to swelling.

WHAT FOLLOW UP IS REQUIRED:

You will be seen in clinic 7-10 days after your procedure when stitches will be removed, and then at a later date approximately 4 months post surgery when swelling has settled and an accurate assessment of outcome is possible. You can also ring Western Eyecare at any time if you have any questions/concerns in the meantime.

If you require any further information regarding your operation, please call Western Eyecare Monday to Friday 08:00 to 17:00 on 8353 6768.