



ENT SOUTH WEST
where individuals matter

Blepharoplasty (eyelid surgery)

patient information leaflet

The Consultant has suggested that you be admitted to The Ridgeway Hospital for Blepharoplasty

The following information has been compiled to provide you with a better understanding of your procedure/operation, your stay in hospital and your recovery after discharge. It is only a guide as each case is individual. If you have concerns or anxieties after reading this information, do not hesitate to contact your Consultant or a senior member of the nursing staff. Contact numbers can be found at the end of the information leaflet. Please read this leaflet in conjunction with the Coming into Hospital leaflet.

What is a Blepharoplasty?

Blepharoplasty is the term used to describe the operation to remove excess loose skin from the eyelids. Blepharoplasty, or eyelid surgery, can be performed on one or both eyes. An upper Blepharoplasty refers to the excess tissue on the upper eyelid, a lower Blepharoplasty refers to the excess tissue, or 'bags', under the lower eyelid.

A Blepharoplasty is performed through small incision(s) (cut(s)) made very close to the eyelashes. The excess fat and skin is removed through the incision. The incision is sutured (stitched) together, usually by a 'running stitch' lying under the superficial layer of skin. Steri-stitches (paper or butterfly stitches) are applied to the outer layer of skin.

The operation lasts for 30-60 minutes depending on whether both eyes and both eyelids are being operated on.

Why do I need a Blepharoplasty?

As the skin ages it tends to lose its elasticity giving rise to some parts of the skin 'hanging down'. Certain eye shapes, which are genetically and race related, make the excess tissue more noticeable. In some cases a Blepharoplasty is necessary if patients have suffered a facial paralysis such as Bells Palsy or Cerebral Vascular Accident (CVA) or 'Stroke' as it is commonly known. The presence of this 'loose skin' will not cause any life threatening conditions, although many patients report that the excess skin interferes with their vision and cause difficulties when wearing spectacles.

Is there an alternative to elective surgery?

It can be assumed that if your Consultant has suggested Blepharoplasty that there are few alternatives. However, each case is different so it is important that you discuss your individual case with your Consultant.

What happens prior to admission into hospital?

5-10 days prior to your admission date you may be asked to attend the Pre-Admission Screening Clinic. This appointment will last for about 1-1.5 hours. The nurse will take a comprehensive nursing history and perform investigations such as blood samples, urine samples and ECGs (heart tracing). Please bring any medications you are taking to the Pre-Admission Clinic and details of your next of kin. The nurse will also be able to give you some information about your operation so please write down any questions you may have.

If you have an eye infection please contact The Ridgeway Hospital as soon as possible as your operation will need to be postponed for approximately 2 weeks to allow for the infection to subside. Patients that suffer with a condition called 'dry eye-syndrome' must discuss this with the Consultant before their admission date. To help combat bruising some patients find it beneficial to take a homeopathic remedy called 'Arnica' before and after the operation.

If you are taking aspirin or anti-inflammatories, such as Ibuprofen/Nurophen, please discuss this with your Consultant or the Pre-Admission Nurse as you may have to stop these drugs prior to your operation.

What type of anaesthetic can I expect?

A Blepharoplasty can be performed under either a general anaesthetic or a local anaesthetic. A general anaesthetic is usually given by injection into the back of the hand. The patient is anaesthetised (asleep) until the operation is finished. Some patients report a sore throat following this method of anaesthetic which can be due to a tube being passed down the throat to maintain the airway whilst the patient is anaesthetised. A local anaesthetic is a technique used to provide the area of operation with temporary loss of sensation, this allows the doctor to perform the procedure without causing any discomfort. This is achieved by injecting drugs into the tissue surrounding the area of the operation. The Consultant Anaesthetist will visit you before the operation to discuss the most appropriate method for you.

Starvation

You will have been requested to follow a period of starvation prior to your anaesthetic and specific times will have been given to you alongside your admission details. A diagram follows to help ensure that you follow the correct instructions regarding starvation.

Admission time	Last food	Last fluid
Admitted for morning surgery	12 midnight	05.00
Admitted for afternoon surgery	07.30	10.30

The Anaesthetist requests that the fluids taken between your last food intake and fluid intake be still water only and that you do not chew 'gum' or suck boiled sweets on the day of surgery.

What happens when I come into hospital?

If you have not been invited to attend the Pre-Admission Clinic a member of the nursing team will ask you some information about yourself, which will assist in the planning of your care for the time you are in hospital and the period of recovery after you go home. They will also give you a detailed explanation of everything that will happen before, during and after the operation.

Your temperature, pulse and blood pressure will be taken to check that they are within acceptable limits before your operation. You may also be asked to provide a specimen of urine if you have not been pre-admitted.

If you are wearing nail polish you will be asked to remove this from fingers and toes prior to surgery. Those patients wearing dentures (false teeth) will be asked to remove them just before going to Theatre. Please also remove false eyelashes, eye make-up and jewellery.

Most patients undergoing surgery will be requested to wear a pair of anti-thrombosis stockings which will be issued on admission and you are expected to wear the stockings, night and day, for the duration of your stay. Along with these stockings you may receive a course of anti-thrombosis treatment.

A member of the nursing team will be able to inform you of the preparations necessary for you to undergo surgery.

The Consultant will visit you before the operation to ask you to sign a consent form and mark the operation site if appropriate. Please pay special attention to the leaflet 'Don't Get Sore, Get Moving'. If necessary, a member of the nursing team will provide a 'special' mattress in order to minimise the risk of you getting any sore spots on your skin.

Your Consultant Anaesthetist will see you to discuss any worries you may have about the anaesthetic. He/she will ask for details about your general health and about any anaesthetics you have had in the past. Some anaesthetists ask for cream to be applied to the back of both hands to numb the skin as a small needle is inserted in a vein in the anaesthetic room. Please ask if you would like this.

A plastic bracelet with your name and hospital number, will be placed on the wrist. You will be asked to put on a hospital gown and paper pants. Prior to leaving the Ward, a pre-operative checklist will be completed to ensure you have been correctly prepared for the operation.

Patients usually walk to Theatre, however if this is difficult you can be pushed in the bed.

What can I expect after my Blepharoplasty?

Initially you will be monitored in the 'recovery' area attached to Theatre and once your condition is satisfactory we will transfer you to the Ward or Day Care Unit. All patients are monitored for a period of time after the operation.

Some patients will be administered some oxygen through a clear mask.

It is quite normal to be 'sleepy' for up to 5-6 hours after the operation.

Most patients prefer to sit up after their operation. It is usual to notice swelling and puffiness of the delicate tissue around the eyes – cold compresses can be used to help reduce this swelling. It is quite normal to notice some bruising in the first 7-10 days after a Blepharoplasty. Some patients find it useful to take a homeopathic remedy called Arnica, available from high street chemists, for 5-7 days after the operation to help reduce swelling. Some patients report that their eyes can feel sticky, which can influence the vision for a short while after surgery. Sometimes it is necessary to prescribe an antibiotic eye cream or drops to help reduce the inflammation and prevent infection.

You may eat and drink normally following the operation. Some patients are well enough to go home on the day of surgery, others may stay for one night.

What can I do when I go home?

Most patients feel tired, lethargic and insecure when they get home, getting frustrated as they cannot do the things that they want to do – this is normal and largely related to the after effects of the anaesthetic. It is normal to experience both good and bad days. You may suffer from flu like symptoms, lack of concentration and enthusiasm. Even the smallest task can be exhausting whilst the body is trying to recover from surgery.

It is essential that you listen to what your body is trying to tell you – i.e. rest if you feel tired. Some people can feel slightly depressed, tearful and very emotional. These symptoms are normal and will usually resolve within a short time. As a guideline, allow yourself a 1 week period of rest, walking short distances, resting or going back to bed for short periods throughout the day, and being reliant on family and friends to provide meals, do the shopping and general household chores.

Dusty environments should be avoided for 1 week, also avoid the activity of dusting for this time frame to prevent irritating the eyes.

What can I expect from the wound?

Most patients will have stitches that need to be removed 5-7 days after surgery, an appointment will be arranged for you at The Ridgeway Hospital. We advise that you keep the area dry until that time. It is advisable not to wear any make-up or cream around the eye area as perfumes may irritate the scar line. Any bruising should subside within 2-3 weeks after the operation, 'Arnica' cream can be gently applied to the area to help reduce bruising.

If you usually wear contact lenses, we advise that you avoid using them for the initial week after surgery.

When can I resume driving?

You should not resume driving until 72 hours after your anaesthetic. Before recommencing driving ensure that your vision is not distorted or influenced by the operation.

Extensive research indicates that the decision to recommence driving relies on the patient assessing when they are fit enough to drive. Before recommencing the activity of driving it is advisable to contact your car insurance company to inform them of your recent surgery, ensuring you are still legally insured to drive. Remember that your movement and strength must be able to cope with an emergency stop as well as normal driving. Also power of concentration does not return to normal immediately. Beginning with short distances would be advisable and gradually increase the distance over a period of time.

When can I go back to work?

The time at which you return to work depends on both the type of operation you have had and what your job is. Most people aim to go back to work after 1-2 weeks following a Blepharoplasty. However some patients prefer to refrain from work until the bruising and swelling subside. If you require a sick certificate to send to your employer, you can self certificate for your first working week. Longer periods of sickness do require a certificate, so please ensure you ask a member of the nursing team about this before you leave The Ridgeway Hospital.

Will I need to see the Consultant again?

You will be invited to attend the Outpatient Department for an appointment with your Consultant about 1 month after surgery.

Should I expect any complications?

Complications are rare following Blepharoplasty but the following information is to inform you of some such complications. This list should not be seen as exhaustive and should be discussed with your Consultant. Complications can occur with any operation. Operations involving a general anaesthetic procedure carry the risk of complications such as chest infection, thrombosis, pulmonary embolism (clots in the lung), stroke, wound infection and allergic reaction. All of these complications total no more than 1%.

The specific complications of the surgery are:

Infection

A Blepharoplasty carries a minimal risk of post-operative infection and documentation reports that one in ten thousand suffer loss of sight.

If I have any questions, who do I ask?

Many people are concerned at the length of time it takes to get over an operation, but time, nature and a bit of determination are usually effective. Do not be afraid to ask for advice however small your worry may seem. A few words can often save a lot of anxiety.

It is essential to remember that the information provided in this leaflet is a guide only. Should you experience any complications or have any concerns relating to your procedure/operation, then do not hesitate to contact The Ridgeway Hospital Helpline:

DAY CARE UNIT PATIENTS

01793 814848 Ext 320

(Monday to Friday, 0800 to 1900 hours)

INPATIENTS AND OUT OF HOURS

01793 814848 Ext 283

The Ridgeway Hospital staff wish you a comfortable and trouble-free recovery.