

COSMETIC SURGERY

BLEPHAROPLASTY



BEESON COSMETIC SURGERY

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BLEPHAROPLASTY

We live in a visual age. In our culture, people have come to expect any kind of communication to be a "visual" experience. From YouTube, to Face Book, to Instagram, the way we communicate and interact with others has a predominant visual component. How you look, the visual impression you make, has a significant impact on how others interact with you.

Psychologists note that our appearance plays a role in the way our feelings and attitudes are reported by others. Studies show that when it comes to feelings and attitudes being portrayed, the words we say account for 7%; the way we say it accounts for 38%; and what people see accounts for 55% of perception. There is a physiologic reason to support our being "visually centric" people. Studies show that 90% of information transmitted to the brain is visual and



visuals are processed sixty thousand times faster in the brain than text.

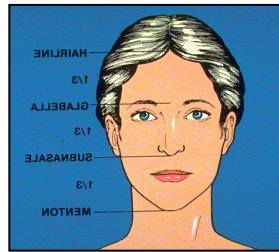
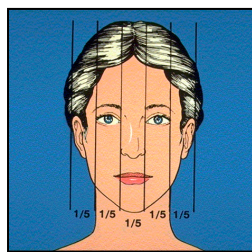
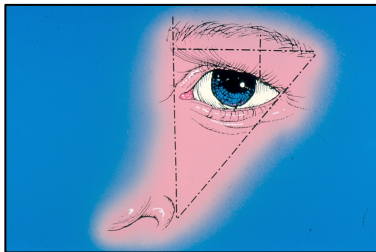


The traditional concept of beauty relates that beauty is harmony and comes down to symmetry and proportion. How does "looking good", making our face and body more symmetrical and proportional, translate into "feeling good"? Studies reported in the *Journal of Evolution Human Behavior* note that physically attractive woman were judged to be healthier. Rhodes reported research showing a distinct correlation between facial symmetry and perceived attractiveness and good health. So having cosmetic surgery and making your face more "proportional" and "symmetrical" may help to project a healthier image!

BEAUTY IS SYSMETRY AND PROPORTRION = HOW WE ANALYZE THE FACE



The basic tenets that a portrait painter uses can be used by the patient to analyze their own face. Ideally, the face can be divided into equal one-thirds in the vertical dimension by lines at the forehead, eyebrows, base of the nose, and chin. Horizontally, the face should be five eye widths [five times the width of an eye]. If the nose or chin is out of proportion to the other facial features, correction can provide significant harmony. From the profile, the chin projection should be in line with the lower lip. Any deficiency may be corrected with chin augmentation.

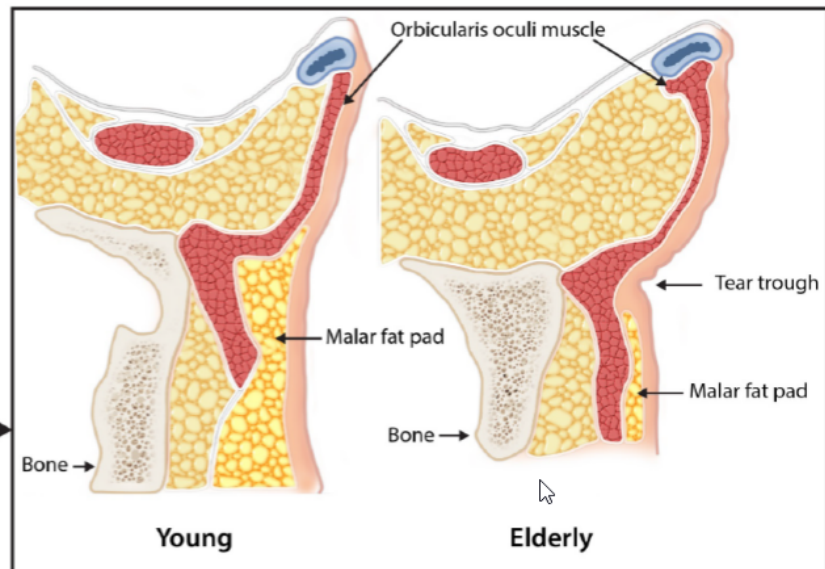
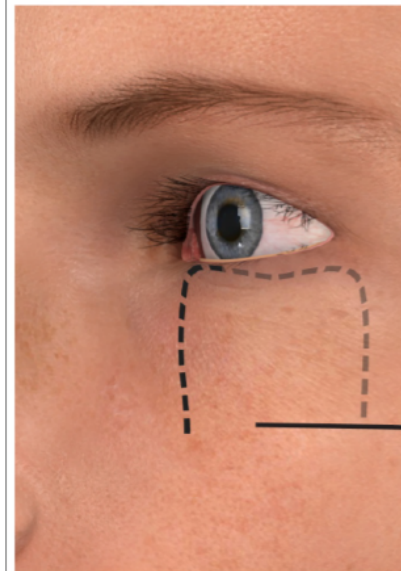


BLEPHAROPLASTY



Eyes are one of the first areas to show aging. Some people refer to the eyes as the “windows of the soul.” They are certainly the focal point of the face and increased laxity of skin can portray a tired, sad, or melancholy appearance when in actuality we feel otherwise. Blepharoplasty surgery, or the eyelid tuck as it is sometimes called in layman’s language, primarily gives us a more rested appearance by reducing the excess skin and fatty tissue, which can develop in both the upper and lower eyelids with aging.

The entire eyeball is surrounded by fatty tissue, which medically we call adipose tissue. With aging, fatty tissue can bulge forward, especially in the lower eyelid, and form a hernia, just like in any other part of the body. The dark circles that



people complain of are oftentimes not due to pigmentation in the lower eyelids, although that can occur in rare instances, but is usually due to a shadow effect caused by this excess fatty tissue. This results in a convex bulging to the lower eyelid with a resultant concavity that causes the shadowing effect. This is the reason the condition may appear more severe in various kinds of light.



The condition may be worsened during a woman’s menstrual cycle, or when one is eating or drinking an increased sodium diet. Both of these conditions result in an increased fluid retention by the body. The fatty tissue attracts this fluid which results in an increase in

bulging in this area. If the condition is detected early the fatty tissue can be removed simply by using a laser on the interior part of the lower eyelid and removing the fat without any external incision. This is called a transconjunctival blepharoplasty. The fatty tissue is removed and the skin re-drapes into its normal position. However, if the condition has persisted too long or the skin laxity has markedly increased, then both skin and fatty tissue need to be removed. This would be the traditional blepharoplasty or eyelid tuck.

The appearance of our eyes is an individual characteristic. It is due in part to the shape of the bony cavity (the orbit). Some people have a very prominent superior orbital rim, which affects



the shape of the periorbital area. Little can be done to alter bone structure of this area. In some cases, the depth of our eyelid crease is determined by the amount of cartilage in the eyelid area. This is an inherited characteristic and there is a limit to how much can be modified. For example, an individual with small eyelid fissures may be able to obtain significant improvement in the appearance of their eyes and a well-rested look

but may never be able to obtain a large, deep-set upper eyelid fold due to their anatomy.

Individuals show changes in the eyes at varying ages. The average person as early as age 25 may have enough laxity in the upper eyelid that they

can obtain significant improvement and at approximately 25-30 for the lower eyelid. However, our individual anatomy in this area varies so greatly that a good rule of thumb on the time to seek eyelid surgery is, for women when it becomes difficult to place eye shadow on the upper eyelids, and for men and women when a good night's sleep doesn't get rid of puffiness in the lower eyelids.

Most often a droopy eyelid is due to laxity in upper eyelid skin. Infrequently it may be due in part to an abnormality in one of the upper eyelid muscles. A small muscle called the levator aponeurosis can sometimes lose its attachment to the cartilage in the eyelid or can become dysfunctional with age. When that occurs, the eyelid can drop. This usually occurs unilaterally. In this condition, the muscle needs to be tightened as well as removing the excess skin and fatty tissue in the upper eyelid area. When this condition occurs, there can be significant improvement, but there will always be some asymmetry or slight difference in the position of both eyelids.

Surgical Procedure

Eyelid surgery is usually performed under twilight anesthesia on an outpatient basis. The skin is then removed and excess fatty tissue from the middle (medial) most portion of the eyelid is also removed. In some cases, the upper eyelid muscle may be contoured. The incision is closed with dissolvable sutures and/or sutures that run underneath the skin and can be painlessly removed after one week. Within approximately one week the incision conforms to the natural contour of the eye and is hidden in the eyelid fold. Laterally it blends into the fine eyelid creases in the outer part of our eye.

In the lower eyelid, an incision is made several millimeters below the eyelash line and is carried laterally into the skin crease. The skin and muscle are reflected down and three fatty tissue pockets in the lower eyelid are opened and excess fatty tissue is removed. The skin and muscle are then repositioned and excess skin is removed. The incisions are closed with interrupted dissolvable sutures. Frequently special tape is used to support the lower eyelid area for a week after surgery. This helps to reduce the amount of swelling and bruising and allows an increased amount of extra skin to be removed more safely.

If the only problem in the lower eyelids is bagging secondary to excess fatty tissue, often the laser can be used with no external incision. In this case, the laser removes the fatty tissue from inside the eyelid with no incision on the outside of the eyelid. If, however, excess fatty tissue has resulted in stretching of the lower eyelid skin, then both fatty tissue and skin need to be removed in the traditional blepharoplasty with an external incision.

Patients commonly will ask how long eyelid surgery lasts. Because the tissue is removed, one will always look better than they would have had they not had the surgery. Unfortunately, we continue to age, so there will always be changes in this area. We are fortunate that eyelid changes do not occur as rapidly after surgery as changes in other areas. This appears to be due to the fact that the fatty tissue does not recur and that the eye is located within the bony structure and appears to be protected somewhat by the gravitational and environmental effects of aging as contrasted with the cheeks, jowl and neck area which may need tuck-up procedures after a facelift.

Various types of chemical peels can be used to remove wrinkling in the eyelid area and provide an additional tightening effect to the skin. Each type of peel varies in the degree of wrinkle removal and tightening that is obtained. Some provide an increased lightening effect to the skin in the eyelid area. A new development in recent years has been the use of the laser to resurface or rejuvenate eyelid skin.

Recovery

Following eyelid surgery, an individual needs to sleep with their head elevated approximately 30 degrees for the first two weeks following surgery. They need to refrain from lifting over 5-10 pounds or activities, which result in heart rate elevation for the first 7 to 10 days following surgery.

This will help to minimize the amount of swelling and bruising. Eyelid incisions are cleansed with hydrogen peroxide soaked Q-tips 4-5 times a day during the first week. The patient can wash over these areas or get in the shower, as long as the shower spray does not directly hit the face. In fact, this is encouraged in order to accelerate the wound healing. Makeup can be applied after 7 days. Applying makeup sooner could result in irritation to the incision lines and should be avoided.

Ice water-soaked compresses are applied to the eyelid area constantly for the first 48-72 hours following surgery. This is critical in helping to reduce swelling and bruising, decrease discomfort and accelerate wound healing. Ice packs work well, but do not contour into all areas of the eyelid and therefore increased swelling and bruising can result. This problem is eliminated with washcloths soaked in ice water.

One needs to limit eyelid movement for the first 48 hours after surgery. This means they should keep their eyes closed as much as possible and use the cold compresses. If an individual was reading, watching TV, or doing paperwork immediately following surgery, each time they blink their eye they would be pulling and stretching the incision lines. This obviously will decrease healing and result in more swelling and bruising. During those first 48 hours the patients should have as much eye rest as possible. Most patients find that at the end of one week, they can resume their normal activities and have significant improvement in their appearance as compared to before surgery. Makeup can be used to camouflage the minimal swelling and bruising that can occur in some patients.

When transconjunctival blepharoplasty is performed, patients can often return to normal social and work activities within 48 hours. Advances in laser technology allow this surgery to be performed with much less discomfort, bruising and swelling. However, this procedure can only be done if there is good elasticity to the lower eyelid skin.

Blepharoplasty Post Procedure Care Instructions

- Sleep with head elevated 30-40° for two weeks
- Apply cold compresses over eyes every 10 minutes for 48 hours following surgery
- No heavy lifting or straining over 5 pounds for 7-10 days after surgery
- Clean incision lines with hydrogen peroxide and apply Bacitracin 3-4 times a day for 7 days following surgery (for upper eyelids). No external incision is used routinely for lower eyelids.
- Avoid applying any cover up over incisions for 1 week.