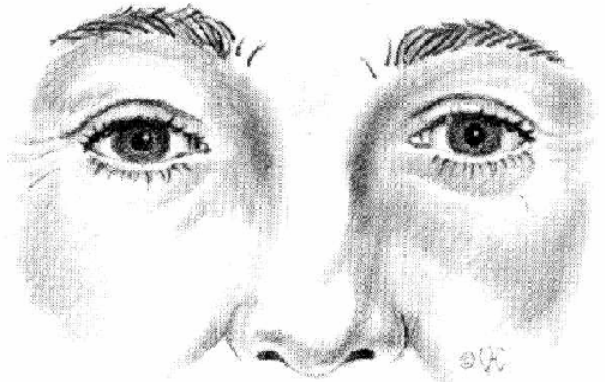


KAISER PERMANENTE  
SAN RAFAEL

PTOSIS SURGERY  
&  
BLEPHAR  
OPLASTY



# DEPARTMENT OF OPHTHALMOLOGY OCULOFACIAL PLASTIC & RECONSTRUCTIVE SURGERY

GREGG S. GAYRE, MD  
BOARD CERTIFIED: AMERICAN BOARD OF  
OPHTHALMOLOGY  
AMERICAN SOCIETY OF OPHTHALMIC PLASTIC &  
RECONSTRUCTIVE SURGERY

Every year, many millions of patients elect to undergo eyelid surgery. The vast majority of these patients elect surgery because drooping eyelids or excess upper eyelid skin has begun to impact their vision, however, a number of individuals have recognized that droopy eyelids or excessive (and wrinkled) eyelid skin creates an aged or tired look, and therefore elect to undergo eyelid surgery to improve their appearance.

Droopy eyelids, or *ptosis* refers to eyelids that tend to descend to the point that they block the pupil and affect peripheral vision. There are many causes of droopy eyelids. The most common type of eyelid droop in adults is due to stretching of the tendon of the muscle that elevates the eyelids. This may occur as a result of aging, eyelid surgery, trauma or genetics. Another common cause is known as "pseudoptosis". *Pseudoptosis* refers to the artificial appearance

of droopy eyelids actually caused by excess skin or fat in the upper eyelids. There are other forms of ptosis that are due to abnormal functioning of the eyelid lifting muscle itself. This is common in children who are born with a drooping eyelid. Finally there are instances where eyelid droop is related to an underlying medical condition. **Your physician will determine the exact nature of your drooping eyelids as different surgical techniques are required**

**for different types of eyelid droop.**

Once the type of surgical correction has been determined, surgery is scheduled as an elective, outpatient procedure. This means, in most instances, that only minimal anesthesia is required and patients may return home on the same day as surgery.

In anticipation of surgery, it is very important to minimize your risk of bleeding. The eyelids have a very rich blood supply and excessive bleeding may result in excessive bruising and swelling, need to abort the surgical procedure, failure of the procedure and in rare instances, **permanent vision loss.**

You will find an attached list of over-the-counter, prescription, and alternative medications that increase the risk of bleeding. In addition, it is very important to inform you doctor of any history of bleeding or clotting disorders.

Although most eyelid surgery is performed with local anesthesia, most patients elect to receive oral or IV sedation during the procedure. It is therefore recommended that patients avoid eating or drinking after midnight on the morning of the procedure. Failure to comply may result in the cancellation of your surgery. Despite this warning it is important that you continue to take your regular medications with a small sip of clear fluids unless otherwise instructed by your doctor or nurse. If you have a condition that requires antibiotics before any invasive procedure, be sure to let your physician know, so that a prescription antibiotic can be provided in advance.

Prior to surgery, it is important that you secure a ride to and from the surgical center. Even if you do not receive a sedative your vision after surgery will be blurry, and your doctor does not

recommend that you drive. It is also advised that you do not to rely on a taxi or public transportation in case you should require urgent medical attention in the immediate post-operative period.

**Failure to secure travel arrangements with a family member or friend may result in the cancellation of your surgery.**

Most patients who require assistance after surgery, usually rely on a family member or friend on the afternoon and evening of surgery. Extended assistance is usually unnecessary. If you are making arrangements for assistance, typically this is necessary for only the first evening following surgery.

Eyelid surgery is most often performed with minimal sedation. This is because your surgeon needs you awake by the end of the procedure in order for you to open and close your eyes. This helps your surgeon to determine the correct amount of eyelid muscle tightening and skin removal necessary for

optimal results. Fortunately, for most of the procedure, patient cooperation is unnecessary and you will remain heavily sedated with your eyes closed. Most patients report minimal complaints of pain both during and after the procedure, even in cases in which sedation is not used.

Significant surgical complications are minimal, but as with any invasive procedure, **complications are possible**. The most dreaded complication of any surgery is a complication to your overall health (including death). Such complications are exceedingly rare and, in fact, your health is at greater risk from a motor vehicle accident on the way to or from surgery than from the actual procedure itself.

Additionally, when surgery is performed around the eyes, **vision loss is possible**. Again, in the hands of an experienced surgeon, visual loss is

exceedingly rare, although mild temporary changes in vision may occur—*see below*.

With any surgical procedure, a surgical scar in the skin is produced. The surgical wounds in eyelid surgery are minimal and barely noticeable. Where possible, these procedures are performed through a skin incision across the upper eyelid hidden in the eyelid crease, or within other natural folds of wrinkles. After the initial redness at the incision site resolves, scarring is minimal and not visible to the untrained eye. Occasionally, surgical scarring may result in an abnormally prominent scar or an asymmetric eyelid crease. For the vast majority of patients, these prominent scars or asymmetrical eyelid creases will resolve without need for further surgery. In rare instances, further surgical intervention will be required to treat abnormal scarring.

Perhaps the most common complications of eyelid surgery are asymmetry, over correction or under correction. No one is completely symmetric when comparing one side of the face to the other. Often, asymmetries present prior to surgery will persist after eyelid surgery that is performed on both sides of the face. Asymmetry occurs in up to 10 percent of all patients undergoing eyelid surgery is best corrected in the first weeks after surgery. In some cases asymmetry may resolve with observation or massage. Other times repeat surgery is necessary. If further surgery is necessary, it can often be performed with minimal invasiveness in the doctor's office. **Under-correction** refers to persistent drooping of the eyelids after surgery. In most cases this represents a "pseudoptosis" caused by persistent excess upper eyelid skin or the appearance of excessive

upper eyelid skin that is actually caused by brow droop that was not addressed with eyelid surgery. **Over-correction** refers to an exaggerated opening of the eyes. This is typically temporary. In expert hands, the removal of too much eyelid skin (which results in the inability to close the eyes) is exceedingly rare. More commonly, a temporary weakening of the eyelid closing muscles may result in failure of the eyelids to close completely. This is a temporary state that will resolve. During the period of healing, however, artificial tears and night-time lubricants may be necessary.

The sensory nerves of the eyelids and brows may also be affected by surgery. A mild numbness of the upper eyelids is normal, but is temporary and will resolve completely.

Infection is also a potential complication of any surgical procedure. Fortunately,

infection after eyelid surgery is also very rare. You will be given an antibiotic ointment to apply to the incision site 4 times daily until your sutures dissolve or are removed. Occasionally, oral antibiotics are prescribed for prolonged surgical procedures or for patients with increased risk of infection.

In most cases dissolvable sutures are utilized to close your surgical incisions. These sutures are delicate. Avoid manipulating or rubbing your incision sites. As the sutures dissolve, itching and a slight increase in redness may occur. This is normal. Over the counter Benadryl® and ice may help with itching. Please avoid using home remedies or other over-the-counter remedies as they may cause an abnormal reaction in the delicate eyelid skin. If your surgical incisions opens: do not panic; continue to apply your antibiotic ointment and notify your physician.

After surgery ice packs are applied and are utilized for the first 48 hours after surgery in order to minimize swelling. Specialized ice packs are available at the pharmacy; however they are often expensive and function poorly. Many patients prefer to use a package of frozen peas as they easily conform to the curves of the face. Alternatively, bath cloths, soaked in an ice bath function well. Swelling is best minimized by applying ice for 20 minute intervals followed by 20 minutes without ice, then repeating. Cold compresses should be used at a minimum of 15 minutes out of the hour, every hour, while awake.

Despite the use of ice-packs, swelling, and bruising are normal after surgery, and if a dressing has been applied tightness may be present. Try to sleep with your head elevated on 2 pillows for 4 days. Do not rub the operative site. A slight amount of oozing from the incision is normal. In most

cases a dressing will not be present over your eye.

After surgery, it is normal to be somewhat drowsy, but try to eat a light, soft meal the evening following your surgery. ***If a dressing is taped over your eye, leave it in place for until your physician or nurse permits removal.*** The dressing may become slightly wet or blood-tinged. This is normal. However, if bleeding is excessive, call the office.

A small amount of oozing from your surgical incisions is normal for the first 24 to 48 hours. However, it is always best to call the office of your doctor for any excessive swelling, bruising, pain, bleeding, or a fever above 101 degrees.

For the first two weeks after surgery, avoid straining the operative site. You may start to resume normal activities as tolerated. Apply the antibiotic ointment to the incision four times a

day, until your post-operative visit.

The second day may show the most swelling and discoloration. Swelling and bruising may persist for up to several weeks. If you had surgery on both sides of the face or on both eyes, it is not uncommon for one side to show more swelling. Try to sleep on your back for 2 weeks with your head slightly elevated (on two pillows, if possible).

After surgery or after any dressing is removed during the post-operative period, apply iced gauze pads to the operated eyelid for 2-3 days. Continue to put antibiotic ointment on the incision four times a day until your follow-up office visit. You may wash your face gently with a mild soap and water, but avoid vigorous scrubbing. You may shower and wash your hair with a mild shampoo 2-3 days after surgery.

After utilizing ice packs for 48 hours,

discontinue and switch to warm compresses. Heat will help to hasten the resolution of any bruising or swelling that has developed. Use a warm bath cloth or heating pad for 15 minutes, up to four times daily. Be careful not to burn the delicate eyelid skin.

Do not bend over or lift more than 10 pounds for 1 week after surgery. You may begin to wear contact lenses after 7 days. You may resume an exercise program after 1 week. Swelling, bruising, red and bumpy incision lines, numbness, tingling, hardness, crusting, itching, and tearing are normal and will go away with healing after several weeks or even months.

Mild discomfort after surgery is normal, though most patients remark that pain is in fact minimal. You will be given a prescription pain control medication at the time of surgery, however, most patients prefer to take Tylenol.

Post-operative healing time varies from patient to patient. It is advisable not to schedule travel plans or important events within **four weeks** of surgery. This will allow adequate time to heal. For most, swelling and bruising resolves within two weeks. It is not uncommon however, for patients to appreciate a subtle, mild change in their vision. This is due to the change in the position in their eyelids. This change in vision is mild and always resolves, though it may take several months. For this reason, you should not purchase a change in your prescription glasses until 90 days after your surgery.

Dry eye symptoms may also temporarily develop

following eyelid surgery. For most patients, the use of a non-preservative artificial tear solution every 1–2 hours as needed is recommended to alleviate this condition. It is normal to experience blurry vision after eyelid surgery. This is due to a temporary change in your refraction as result of altered blinking and eyelid position. Do not be concerned, this should improve quickly in the first few weeks after surgery. Occasionally mild blurry vision may last up to three months. **However, significant loss of vision, especially accompanying extreme swelling of the eyelids and pain is NOT normal and your physician should be notified.**

Most patients undergoing eyelid surgery require post-operative visits at one week, and one month following surgery. Occasionally more visits are necessary. Most eyelid surgery is affective for 7 to 10 years after surgery, and no guarantee can be placed on the duration of treatment following *any* eyelid surgery.

Eyelid surgery is an affective means of improving visual function and rejuvenating your facial features. *I hope that you have found this information helpful and I would appreciate your feedback on how to improve this guide so that it will be helpful to future patients*

## Frequently Asked Questions:

### What are the risks of eyelid surgery?

*Bleeding for several days after surgery; wound infection; persistent drooping of the eyelid; placing the lid too high; excessive overhanging skin; asymmetry in eyelid height or the lid crease between the two sides; persistent swelling of the eyelid, prominent scarring, **ETC.***

### Will my appearance be altered by eyelid surgery?

*The goal of eyelid surgery is to improve visual function and give the eyelids a refreshed appearance. Great care is taken to avoid changes to ethnic features so that you will maintain a natural appearance.*

### **How do I know if my vision or health is affected by droopy eyelids?**

*Most patients appreciate clinically significant eyelid droop because a decrease in peripheral vision, in combination with excessive headaches or brow-aches caused by over-action of the eyebrows that are attempting to counteract the affects of droopy eyelids.*

### **What about laser eyelid surgery?**

*Although lasers may be utilized to create surgical incisions, they are often costly and provide no better results than conventional surgery. In fact, surgical incisions created by laser often heal more slowly and are prone to other surgical complications. Lasers are best utilized to reduce wrinkling within the delicate skin of the eyelids as well as to decrease hyperpigmentation and bagginess of the lower eyelids skin. If you would like to learn more, be sure to enquire about our cosmetic rejuvenation procedures.*

### **Can I have general anesthesia?**

*In most cases your doctor will not recommend general anesthesia. The eyelid lifting muscles are controlled by a single area in the brain. If one lid is elevated, the other often drops, much like a see-saw. It is therefore necessary to closely observe both eyelids for symmetry during eyelid surgery. Your surgeon can minimize (but not eliminate) the risk of eyelid asymmetry by having you open your eyes at the conclusion of the procedure. By using heavy IV sedation, it is possible for you to literally "sleep through" the entire procedure, yet at the same time, make it possible for you to be arousable enough to open and close your eyelids on command. Most patients report that they never even remember being asked to open their eyes during the procedure.*

### **What are the symptoms that my eyes are dry and require lubrication?**

*Tearing, foreign body sensation, redness and blurred vision are common features of dry eye.*

### **How long will the surgery take?**

*Surgery itself takes only about an hour. However, the pre-operative evaluation requires up to 30 minutes and patients that receive sedation may require up to 2 hours observation in the post-op holding area.*

### **What eyelid surgery will not do:**

*Eyelid surgery is designed to rejuvenate the eyelids by removing excess upper eyelid skin and correcting eyelid droop. Fine lines and wrinkles will not improve. Eyelid wrinkles known as "crow's feet" will not resolve with traditional surgical means. However, lasers, chemical peels and Botox are very affective at diminishing these common age-related changes and maybe utilized at the time of your eyelid surgery. Be sure to enquire about these services if you are interested.*

### **Will my surgery be covered by my insurance?**

*Eyelid surgery that improves visual function is covered by insurance. In cases where it is necessary to determine just how significant the eyelid droop affects vision, you may be asked to submit to a test of visual function. Such tests ensure that by elevating the drooping eyelids or removing excess eyelid skin, that vision will be improved. Typically surgery designed to remove eyelid wrinkles and surgery to remove bags from the lower eyelids is not covered by your insurance. Additionally Botox® is not covered when utilized for wrinkle reduction. However, it may*

*be possible to discount such cosmetic surgery, should you elect to undergo these procedures at the time of your functional eyelid surgery. Please enquire for details regarding lower eyelid rejuvenation, laser skin resurfacing, brow-lifts, Botox and mid-face lifts.*

**I am a diabetic, are there special precautions?**

*As a rule, diabetics heal more slowly and have a higher risk of complications. It is important to have your blood sugar under tight control prior to surgery. Additionally, it is very important that you discuss with your physician and nurse, how to take your normal a.m. dose of insulin or oral glucose control medications. In most instances, your doctor will recommend avoiding taking oral glucose control medications and short acting insulin on the morning of surgery. **Please confirm this with your doctor or nurse.***

**Should I take my regular medications on the morning of surgery?**

*Despite the rule of no eating or drinking after midnight on the morning of surgery, In most instances it is important to take your regular prescribed medications on the morning of surgery with a sip of clear fluid. Failure to do so could result in cancellation of your surgery.*

**What number should I call in case of emergency?**

*(415) 444-0111 and explain that you have recently had eyelid surgery and need to speak to Dr. Gayre or the eye specialist covering his "on-call" patients.*