BLEPHAROPLASTY PATIENT INFORMATION

Dr Sid Ogra MBCHB FRANZCO

LOWER LID BLEPHAROPLASTY (Eye bag removal)

What causes eye bags?

With age, the thin skin around the lower eyelid stretches and the fat pads from the eye socket can bulge forward. This often also has a genetic factor. Lower blepharoplasty is a surgical procedure to reduce the fat pads surrounding the eyes (and sometimes skin) to give the area a more rejuvenated, youthful appearance and restore the eye shape.

What things are important to know before surgery?

Medication and Lifestyle	Please advise us if you are on aspirin or blood thinning medication since it interferes with normal blood clotting. Smokers should cease smoking for at least three weeks before and after surgery to reduce postoperative coughing and bleeding. This can extend recovery time if not mentioned.
Anaesthesia options	Local anaesthetic with intravenous sedation or general anaesthetic. You cannot eat or drink 6 hours prior to surgery. If your surgery is under local anaesthesia alone there is no need to be nil by mouth preoperatively however this is rare for this procedure. There is a cost for anaesthesia as an anaesthetic specialist has to be present to administer it. This is typically covered by you. If you are anxious about facial surgery or are squeamish around surgery, general anaesthetic is preferred.
Health insurance	Lower eyelid blepharoplasty is not typically covered by health insurance as it is deemed a cosmetic procedure. If there are underlying medical factors such as sleep apnoea or trauma these can be discussed during the consultation.
Skin Preparation	We recommend preparing your skin 2 weeks prior to surgery by using medical grade skin care to optimise your healing and results post surgery. For more information on medical grade skin care contact our Registered Nurse: alpna@oasissurgical.co.nz

What happens during the operation?

Length of surgery	Approximately 60-90minutes, day surgery case at Oasis Surgical.
Procedure	Once you are made comfortable, intravenous sedation or general anaesthetic is administered. Then local anaesthetic is placed into the lower lids and the fat pads removed as

	per the preoperative plan. Sometimes excess skin is also removed. Often this is combined with either upper lid blepharoplasty, or ptosis repair (eyelid lift). The incisions are hidden on the inner surface of the eyelid if only fat is removed/repositioned (transconjunctival). If we remove the fat there are no stitches. Antibiotic ointment is placed in the eye and special compressive tape is put on the skin. If the fat is being repositioned, sutures will be placed on foam bolsters and this is visible on the cheek skin. If skin is being removed there are fine dissolving sutures just below the lash line. The right approach is discussed in the consultation.

What to expect immediately after the operation?

Recovery	You will be taken to our recovery area and a cool soothing eye gel mask is applied to your eyes to minimise swelling and bruising. Your eyelids may feel tight and it is normal for this to continue for a few days afterwards especially as the local anaesthetic wears off. Mild painkillers such as paracetamol are usually sufficient to provide comfort. The recovery is not usually painful, therefore severe pain is a red flag and must be discussed with Dr Ogra or the nursing team at Auckland Eye.
Driving	Please arrange a support person to drive you home after the surgery. You can drive the next day onwards if you feel safe and comfortable.

What to expect after being discharged from Oasis Surgical?

Medication	Antibiotic/anti-inflammatory ointment is prescribed for you to put in the eye twice a day and as a waterproof barrier prior to showering. Please use as prescribed. There are no dressings or bandages to use. The external sutures in fat repositioning are left there for 5-7 days and removed at the first postoperative visit as required.
Scar	If only a hidden incision is used for fat removal/repositioning, there is no visible scar. If skin is being removed, there is a fine scar hidden below the lashes. As with all scars, it may feel bumpy or prominent for a few weeks but fades on its own. The final result is often evident at approximately 3 months and any judgement prior to this is often premature. If there are concerns about a worsening scar, steroid injections or other treatments can be performed so please discuss this with us.

Bruising/ Swelling	A provided cool soothing eye gel mask is recommended to place over your eyes for 10 minutes every hour in the first few days after the operation to minimise swelling and bruising. It is recommended to do this at least 6 times a day for the first 2-3 days. The swelling and bruising can travel down your face and it may exacerbate under eye bags or darkening. This is normal and typically temporary. Asian eyelids tend to swell more and take longer to resolve so this needs to be considered. Avoid blood thinners such as Aspirin or Voltaren for at least 48 hours after the surgery. Proper skincare and sun protection including sunglasses, are essential during healing. Avoid prolonged sun exposure 6 weeks after surgery to avoid swelling. Avoid straining/ heavy lifting for the first 7 days. Further advice will be provided at the one week eye check when the wound and recovery will be assessed. It is common to resume your normal life after one week as long as the skin is healing well.
Sleeping position	Sleep on your back if possible with 2-3 pillows for first 7-10 nights. If not possible it is not a major issue but it is important to be gentle with the surgical wounds.

What to expect at the follow up appointments?

Suture removal (5-7 days post op)	If sutures have been used for fat repositioning these are removed at day 5-7. If skin has been removed, the fine sutures do not need removal and will fall out within 2 weeks. The skin is assessed, and any issues addressed. You can wear make up after sutures have been removed. The process is painless and done in the clinic, there is no need to worry about this.
Final follow up and advice (3 months)	A final check is performed at 3 months to assess scar healing as well as the final result. This is typically a quick visit. Further interventions such as medical grade skin care, anti-wrinkle injections and other supportive measures are often implemented at this stage once the eyelid has healed. The rate at which ageing occurs, and continues, varies from one person to another. In general, any blepharoplasty surgery should provide an improvement that lasts for about 10 years if not more.

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What are the problems with lower blepharoplasty?

Common	Swelling/bruising (temporary) Itchiness of scar while healing (if skin incision) Tightness while healing Exacerbation of dry eye (new or pre-existing) Redness of skin that improves with time Numbness of skin around the incision (recovers) Gritty eyes (temporary)
Rare	Infection/severe bleeding (rare) Over correction (causing difficulty in eye closure called retraction) Under correction – visible bags Severe dry eye (rare) Damage to eye (extremely rare) Loss of vision (extremely rare)
Limitations of lower blepharoplasty	Cannot correct all pre-existing asymmetry In people with flat cheekbones there may still be visible bulging despite fat removal – this cannot be completely eliminated Sometimes fat removal may cause hollows you are not satisfied with – these can be augmented with fillers If there is fat repositioning and you are unhappy with the result, revision surgery may be required to remove excess fat May not meet your expectations Lower lid blepharoplasty is a surgery that involves a lot of work for a subtle result – it is extremely important you are clear with your expectations during the consultation so that we can advise if this is the right surgery to achieve what you require.

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