PTOSIS PATIENT INFORMATION

Dr Sid Ogra MBCHB FRANZCO

PTOSIS SURGERY (Eyelid lift)

What causes droopy upper lids?

Certain factors such as age, contact lens wear, genetics or trauma can cause the eyelid muscle to sag and become loose. This makes the eye hard to open and often causes blurred vision and fatigue. Ptosis simply means droopy eyelid and ptosis surgery refers to the eyelid lift required to repair this.

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 local anaesthetic alone. If your surgery is under sedation 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. Both options do not affect the outcome of surgery but are there for your comfort. There is a cost for sedation as an anaesthetic specialist has to be present to administer it. This is typically covered by insurance or by you. If you are anxious about facial surgery or are squeamish around surgery, sedation is preferred. Oral sedation is not my first preference as the effects and duration cannot be accurately controlled.
Health insurance	If your surgery is covered by health insurance please liaise with our surgical booking team. We will give you all the information you need to obtain prior approval since each case is assessed on a case by case basis. You will need to obtain prior approval with your insurance company prior to being booked in for surgery. To qualify for insurance the eyelid typically has to hang down at least 3mm below its normal position, and this is measured during your initial 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

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What happens during the operation?

Length of surgery	Approximately 60-70 minutes, day surgery case at Oasis Surgical.
Procedure	Once you are made comfortable (IV sedation is given at this point if chosen) and the skin numbed via local anaesthetic, the delicate eyelid muscle is freed and reattached in a better position. This is determined by in-theatre assessments where we get you to blink occasionally. Additional techniques such as brow stabilisation, excess fat removal or excess skin removal (blepharoplasty) are also performed if needed. The incisions are closed, leaving only a fine scar that lies in your natural skin crease line. In Asian eyelids this fold is absent but can be created. The size and shape of the crease is discussed in the preoperative consultation. Patients with mild ptosis (~2mm) can have a scarless approach which will be discussed in clinic. This involves no incision but an internal dissolving stitch. **Blepharoplasty** (excess skin removal): can also be corrected via the same incision by removing excess skin (adds an extra 10-20 minutes to surgery time).

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 ointment is prescribed for you to put over the eye lid wounds twice a day and as a waterproof barrier prior to showering. Please use as prescribed. There are no dressings or bandages to use. Some other surgeons have popularised the use of steri-strips or other

	adhesive bandages however I believe they are irritating, a risk for injury to the eye and not necessary for a good outcome. The wounds are securely sutured and do not need additional reinforcement. These dressings do not affect the final skin scar.
Scar	A fine scar will lie in your natural skin crease. As with all scars, it may feel bumpy or prominent for a few weeks but fades on its own. We expect that the scar will continue to improve and is not visible with your eyes open. 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)	The fine sutures are typically removed 5-7 days after surgery. 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.

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Final follow up and advice (3 months)	A final check is performed at 3 months to assess scar healing as well as the final lid position. This is typically a quick visit. Further supportive measures 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, ptosis surgery should provide an improvement that lasts for about 10 years if not more. Factors such as contact lens wear, muscle weakness, eye rubbing and further eye surgeries can shorten this time.

What are the problems with ptosis surgery?

Common	Swelling/bruising (temporary) Itchiness of scar while healing 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)
Rare	Infection/severe bleeding (rare) Over correction (causing difficulty in eye closure) - ~5% Under correction (eyelid still droopy) ~5% Severe dry eye (rare) Damage to eye (extremely rare) Loss of vision (extremely rare)
Limitations of ptosis surgery	Cannot correct all pre existing asymmetry Will not correct excess skin unless a blepharoplasty (excess skin removal) is also performed at the same time Asymmetric eyelid creases May not meet your expectations IMPORTANT: As this is a subjective surgery and relies not only on good surgery but good healing, the revision rate can be as high as 5%. If there is an immediate issue, revision can be done within the first two weeks. If left longer than this, scar tissue can limit the effectiveness of surgery. If there is an unsatisfactory result at three months revision surgery can be considered then.

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