



## Information about blepharoplasty surgery (eyelid reduction)

### Part 1 of 3

This leaflet explains blepharoplasty surgery. **It is important that you read this information carefully and completely. Please initial each page** to show that you have read it. For information on the risks and complications of the surgery, and care after an eyelid reduction, see parts 2 and 3.

### What is blepharoplasty surgery?

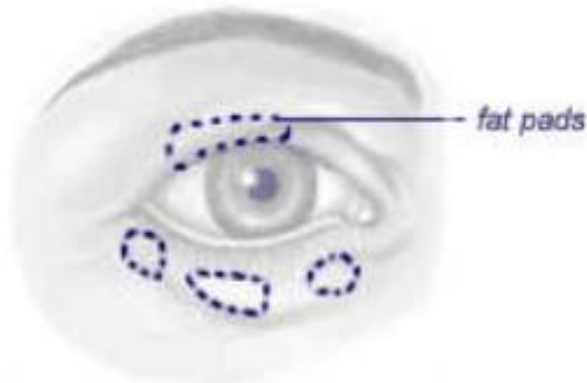
Blepharoplasty surgery, commonly known as an eyelid reduction, is an operation to reshape the eyelids. An upper-eyelid reduction can improve your vision and make you look younger. A lower-eyelid reduction can help to reduce wrinkles and puffiness.

### Why have an eyelid reduction?

With age, our muscles slacken and the skin loses its elasticity. For the eyelids, this results in folds in the upper lids and deepening creases in the lower lids. Also, the slackening of muscle beneath the skin allows the fat which cushions the eyes in their sockets to bulge forwards to give the appearance of bagginess. In some families there is an inherited tendency for bags to develop during early adulthood.

Folds, creases and bagginess often seem worse in the morning, particularly after periods of stress and lack of sleep. This is because fluid that is normally distributed throughout the body when it is upright tends to settle in areas where the skin is loose, such as the eyelids, when a person is lying down.

The ageing process can also cause drooping of the eyelids, and folds of skin to gather in the upper eyelids. Sometimes there is so much skin that the upper lids hang over the eyelashes.



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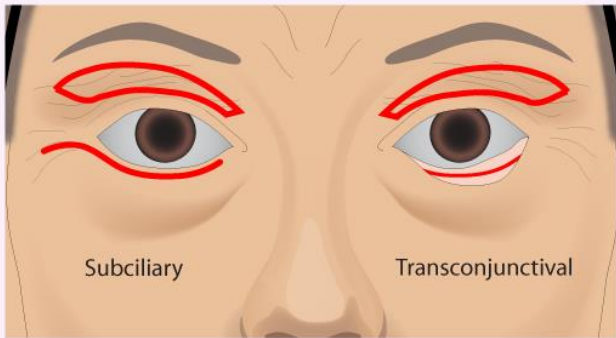




### What will happen before my operation?

You will meet your surgeon to talk about why you want surgery and what you want. The surgeon will make a note of any illnesses you have or have had in the past. In particular, you should tell them if you have ever had any thyroid disease, high blood pressure, diabetes or eye disorder (such as a detached retina or glaucoma). The surgeon will also make a record of any medication you are on, including herbal remedies and medicines that are not prescribed by your doctor.

Your surgeon will examine your eyes, face and skin, and may take some photographs for your medical records. They will ask you to sign a consent form for taking, storing and using the photographs.



The surgeon will measure your height and weight to make sure that it is safe to do an operation. If you are overweight, pregnant or planning to become pregnant, your surgeon may suggest delaying your operation.

If you would be having the surgery under a local anesthetic, the surgeon will make sure that you can lie flat and still.

The surgeon may want you to be checked out by an ophthalmologist.

### How is the surgery performed?

Eyelid reductions can be carried out under local anaesthetic or general anaesthetic (in hospital only). In a typical procedure, the surgeon makes cuts that follow the natural lines of your eyelids – in the creases of the upper lids and just below the lashes in the lower lids (see the eye on the left of the diagram opposite). These cuts are extended a little way into the crow’s feet (also known as laughter lines) at the corner of the eyes.

Through these cuts, extra fat, excess skin and sagging muscle are removed.



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If you have a pocket of fat beneath your lower eyelids without extra skin, the fat can be removed through the inside of the lower eyelid (see the eye on the right of the diagram opposite).

All the cuts made will be stitched up.

### **Choosing a surgeon**

If you decide to have an eyelid reduction, only go to a surgeon who is properly trained and on the specialist register held by the General Medical Council. They will talk to you about what is possible for you or might give the best results. Members of several different organisations do cosmetic surgery, so your general practitioner (GP) is the best person to advise you on who to see.

You should talk to your surgeon before your operation about when and how to pay.

Nobody needs an urgent eyelid reduction. If you are not given time to think about it, you should look elsewhere.

### **How can I help my operation be a success?**

Be as healthy as possible. It is important to keep your weight steady with a good diet and regular exercise. Your GP can give you advice on this.

If you smoke, stopping at least six weeks before the operation will help to reduce the risk of complications.

Do not worry about removing hair near where cuts will be made, but do have a bath or shower during the 24 hours before your operation to make sure that the area is as clean as possible.

### **To find out more, visit the websites below.**

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**The British Association of  
Aesthetic Plastic Surgeons**



**BAPRAS** British Association of Plastic  
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**Information on cosmetic surgery**

[www.baaps.org.uk/safety-in-surgery](http://www.baaps.org.uk/safety-in-surgery)

[www.bapras.org.uk/public/patient-information/cosmetic-surgery/considering-cosmetic-surgery](http://www.bapras.org.uk/public/patient-information/cosmetic-surgery/considering-cosmetic-surgery)

[www.gov.uk/government/news/recommendations-to-protect-people-who-choose-cosmetic-surgery](http://www.gov.uk/government/news/recommendations-to-protect-people-who-choose-cosmetic-surgery)

**General Medical Council (GMC) plastic surgery specialist register**

[www.gmc-uk.org/doctors/register/LRMP.asp](http://www.gmc-uk.org/doctors/register/LRMP.asp)

**Anaesthetics**

[www.rcoa.ac.uk/patientinfo](http://www.rcoa.ac.uk/patientinfo)

**Disclaimer**

This document is designed to give you useful information. It is not advice on your specific needs and circumstances. It does not replace the need for you to have a thorough consultation, so you should get advice from a suitably qualified medical practitioner. We – The BAAPS and BAPRAS – have no liability for any decision you make about the surgery you decide to have.

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