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Blepharoplasty (Eyelid Surgery)

Blepharoplasty is a surgical procedure intended to reshape the upper eyelid or lower eyelid by the removal and/or repositioning of excess tissue as well as by reinforcement of surrounding muscles and tendons. When an advanced amount of upper eyelid skin is present, the skin may hang over the eyelashes and cause loss of peripheral vision. The outer and upper parts of the visual field are most commonly affected and the condition may cause difficulty with activities such as driving or reading. In this circumstance, upper eyelid blepharoplasty is performed to improve peripheral vision. Patients with a less severe amount of excess skin may have a similar procedure performed for cosmetic reasons. Lower eyelid blepharoplasty is almost always done for cosmetic reasons, to improve puffy lower eyelid "bags" and reduce the wrinkling of skin.

Blepharoplasty is performed through external incisions made along the natural skin lines of the eyelids, such as the creases of the upper lids and below the lashes of the lower lids, or from the inside surface of the lower eyelid. Initial swelling and bruising take one to two weeks to resolve but at least several months are needed until the final result becomes stable. Depending upon the scope of the procedure, the operation takes one to three hours to complete.

The anatomy of the upper/lower eyelids, patients' skin quality, patients' age, and the adjacent bony and soft tissue all affect the cosmetic and functional outcomes after blepharoplasty. Factors which are known to cause complications after surgery include failure to recognize factors such as:

- preexisting dry eyes - which may become exacerbated by disrupting the natural tear film
- laxity (loosness) of the lower lid margin (edge) - which predisposes to lower lid malposition
- prominence of the eye in relation to the malar (cheek) complex - which predisposes to lower lid malposition.

Transconjunctival blepharoplasty involves removing lower eyelid fat through an incision on the back of the eyelid, eliminating the need for an external incision. Because there is no external incision, excess skin can not be removed during the surgery, but skin resurfacing with a chemical peel or carbon dioxide laser may be performed simultaneously. [1] This allows for a faster recovery process.

References

1. John Kitzmiller, "Blepharoplasty, Lower Lid Subciliary" 2006. eMedicine. Ed. 25 September 2006,

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