

# **Blepharoplasty** Surgery for dermatochalasis (excess eyelid skin)

## The Eye Unit Patient Information

This leaflet aims to inform patients who are considering blepharoplasty and can help by answering some common questions.

### What is dermatochalasis?

Dermatochalasis is drooping of the upper eyelid skin. It is normal for skin to become more elastic and stretchy and lumpy swellings may appear around the eyes with age.

#### How is this condition managed?

The majority of patients have no symptoms and require no treatment. Blepharoplasty is the removal of excess eyelid skin and/or fat, and may only be carried out on the NHS if certain strict criteria are met. Your surgeon will tell you if you are eligible for NHS surgery.

### What will happen during blepharoplasty?

You **should not drive** to the hospital on the day of surgery. You will be asked to come to the hospital in good time so there may be a short wait. The surgery is usually done following a small numbing injection and takes 30 to 45 minutes. You will have ointment applied to the wound and an eye pad and you can go home on the same day. Occasionally patients may require a general anaesthetic and an overnight stay in hospital.

#### When can I drive and go to work after the operation?

You may start driving and working again as soon as the dressing is removed as long as your vision is clear and you are not light sensitive. Avoid heavy lifting or dirty and dusty environments to reduce the risk of complications.

#### Are there any risks or complications?

The vast majority of patients are pleased with the results of surgery and have no serious complications. However, this surgery is not essential for your health and the treatment being offered is optional. If you choose to have surgery, serious, significant or frequently occurring risks are as follows:

- **common (up to 1 in 20)** scarring, bruising, persistent excess lid skin, asymmetry, palpable lump, puckering of skin, dry eye, numbness, discomfort
- **uncommon (up to 1 in 100)** infection, incomplete lid closure, redness, double vision, uneven lid contour, tingling
- rare (up to 1 in 1000) other e.g. over-excision of skin, significant bleeding
- very rare (up to 1 in 10,000) reaction to anaesthetic
- (1 in 30,000) severe or permanent vision loss

#### What to expect after the operation

A dressing will be applied for 24 hours. Make sure the wound is kept clean and dry, if necessary clean it gently using cooled, boiled water and clean gauze or tissues. Use a separate gauze or tissue for each wipe to the area.

You will be prescribed an eye ointment, which you should apply to the wound as directed, usually twice a day for 7 days.

The scar will be hidden in the upper lid skin fold. You may improve the scar appearance by massaging the area with antibiotic or lubricating ointment e.g. Vaseline.

You will experience some degree of swelling and bruising - cold compresses and elevation of the head will help to relieve any discomfort.

Bruising may take three or four weeks to disappear completely, although it can usually be concealed with make-up after seven days.

You can return to work when you wish but if you deal with the public, you may prefer to delay your return for around ten days because of bruising and swelling.

It is important to avoid strenuous activity for the first week after surgery. Do not swim for four weeks because of the risk of infection.

Avoid heavy lifting, running or strenuous gym work-outs for four weeks or you may exacerbate bruising or swelling.

You cannot wear contact lenses for at least two weeks after surgery, because the eyelids may be stiff and sore and your eyes may be dry.

Some people experience blurred vision or sensitivity to light for a few days. A dry eye problem may be worsened by the surgery, and more frequent eye drops required.

Some patients may feel that insufficient skin has been removed. It is far better for the surgeon to be cautious and remove too little skin. Closing your eye can be difficult if too much skin is removed and a skin graft may become necessary.

### When should I contact the department?

- you have any problems with your vision.
- your eye becomes red or painful
- you cannot close your eye properly
- you have bleeding from the wound or a very sticky discharge

#### Any problems or questions?

For further information and advice please contact:

#### Eye Emergency Helpline: 0300 019 4181

Mon-Sat: 8am-6pm Sunday: 8:30am-2pm. Bank Holidays: 8.30am-6pm.

**The Eye Unit,** The Royal Bournemouth Hospital, Castle Lane East, Bournemouth, Dorset, BH7 7DW

Author: Ben Parkin Date: November 2020 Version: Two Review date: November 2023 Ref: 075/21

t: 01202 303626 w: www.uhd.nhs.uk У : @UHD\_NHS 📑 : @UHDTrust 🤘 : @uhd\_nhs