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BLEPHAROPLASTY (EYE LID LIFT) POSTOPERATIVE INSTRUCTIONS & ADVICE

The following after-care information will help make your surgery safe and uneventful. It is important that you understand it all. If you have any questions, please ask me or my staff. In some cases there will be variations to the instructions, and these will be discussed with you.

Cold Compresses

Before you leave the hospital, nurses will be applying cold compresses to your eyes. It is requested that you continue these compresses for at least four to six hours after you get home. Cold compresses help reduce bruising. A basin of cold water with floating ice is sufficient. Dip a clean face cloth into the water, gently ringing it out, and then apply it to your eyelids. Repeat this every ten to fifteen minutes. Please do not apply ice cubes directly to the skin as this can cause frostbite. If you wish, a cold gel pack can be used instead of ice water compresses. Cold compresses can be stopped the day after surgery. However, some patients may choose to continue the compresses longer because of the cool, soothing effect.

Head Elevation

Head elevation reduces bruising, bleeding and swelling. Please do not swing your head down to pick something off the floor. Bend your knees instead. Also do not do any lifting or exercises for 2 weeks. It is helpful to sleep with an extra pillow for 2 to 3 months after surgery as this reduces "morning puffiness". You may sleep on your side, any time after surgery.

Eye Drops, Eye Ointment

Tobridex eye drops (prescription) reduce the chance of infection and reduce inflammation after eyelid surgery. Starting the day of surgery, two (2) drops are instilled into each eye, four (4) times a day for one week. Do not use these drops for more than 7 days.

Lubricating eye drops (non prescription), e.g. Refresh Tear, Tears Naturele, Isopto-tears 0.5%, soothe the eyes and reduce dryness of the eyes. These drops are typically used after one week, a couple of times a day, and as long as needed. They can also be used immediately after surgery, in addition to the Tobridex drops if the eyes still feel dry when using the Tobridex alone.

Lubricating eye ointment (non prescription), e.g. Refresh Lacrilube, Tears Naturele p.m., moisten and protect the eyes while you are asleep. The lubricant is applied at bedtime directly on the eyeballs and typically causes blurriness. The lubricant is also applied directly on the eyelid incisions to help keep them clean. (Please see "wound care".) Eye drops and ointment are best instilled into the eyes by another person. When doing so yourself, it helps to lie down, and look up directly at the opening of the applicator tube before squeezing. To keep the applicator clean, please don't let it touch your eye during application.

Pain Pills

Most patients are pleasantly surprised how limited their postoperative discomfort is. To reduce the need for pain pills, Advil (Ibuprofen) 200 mg should be taken regularly every 6 hours. Midway between the 6 hourly dose of Advil (that is, 3 hours after the last dose of Advil) please take either an extra strength Tylenol (Acetaminophen) or, if there is more discomfort, one of the stronger pain pills prescribed to you. This combination of anti-inflammatory (Advil) and analgesic (Tylenol extra strength or stronger pain pill) is now recognized as the most effective way of treating postoperative discomfort. Both pills can be stopped when the discomfort subsides. Please note that all pain pills cause constipation, and if you are inclined to becoming constipated, you should consider the use of a stool softener such as Colace 200 mg twice a day, and a laxative such as Milk of Magnesia, 15 to 30 cc at nighttime. Drinking copious amounts of fluids and eating fruit also reduces constipation.

Eating After Surgery

Patients may experience nausea after a general anesthetic. It is therefore wise to drink clear fluids (apple juice, black tea, flat pop) until the stomach feels settled. Then try eating clear soup and a few crackers. A normal diet is usually possible the next day. On rare occasion, a patient may feel nausea for a few days after surgery. Gravol tablets may then be helpful.

Bleeding, Bruising, Swelling

Minor bleeding from the incision lines is normal after surgery, and should subside within 24 hours. Bruising and swelling may make it difficult to see through the eyelids the morning after surgery, but will gradually start subsiding thereafter.

IMPORTANT. If there is progressive swelling of an eyelid, in combination with pain or bulging of the eye, or loss of vision, there may be bleeding behind the eye. This is called a hematoma. It is very rare, but can be very serious. It needs to be assessed urgently by me or an emergency room physician at North York General Hospital or your closest emergency room department.

Bruising is the typical "black and blue" appearance to tissue after any surgery. There is a great variation in how much patients bruise, some bruising very little, some more. As noted in your preoperative instructions, Aspirin, blood thinners, anti-inflammatories, and vitamins can contribute to bruising and should be stopped for two weeks before surgery. These medications can be resumed the day after surgery. The bruising typically subsides within two weeks, but in some patients can last longer. As it dissolves, and becomes more yellowish in colour it may appear to be "spreading". This is normal and is no cause for alarm. 80% of the swelling is typically gone within three weeks, but the last 20% of swelling (especially morning puffiness) can persist for a few months. It is common to have more bruising and swelling on one side than the other. This will even out with time.

Blurred Vision

It is not unusual after an eyelid lift to have a minor degree of blurred vision. This is in part due to the eyes being drier because they are more open. There may also be some watering of the eyes, and this may take a few weeks to completely correct itself.

Wound Care

Regular showering is permissible the day after surgery. Gently wash the incision twice a day with soap and water using your fingertips or a Q-Tip. This should be followed by application of the Lacri-Lube ointment. Polysporin eye (ophthalmic) ointment can also be used. The sutures typically dissolve and fall out within a week.

Once the sutures are out, a scar cream should be massaged onto the incision lines twice a day for two to three months. If any area of drainage remains, Polysporin ointment, rather than the scar cream, should be applied on those areas until the drainage has stopped. The scar cream is then also applied there. The scar cream I recommend is available for purchase in our office. Our office staff will be happy to help you in your selection of the scar cream and other creams that will help with your skin care. Please inquire about these products during your pre-operative visit.

Early Fever

A low grade fever (up to 37.8°C) is not uncommon the day after surgery. It usually occurs after a general anesthetic and results from small collections of mucous in the lungs. It is therefore important after a general anesthetic to take frequent deep breaths, and to cough deeply. The coughing clears the lungs and corrects the low grade fever. Failure to clear the lungs adequately can on rare occasion lead to a lung infection.

Infection

Infection is very uncommon after eyelid surgery. Any sign of increasing soreness, redness or swelling needs to be checked.

Massage

In the first postoperative visit, I shall be teaching you how to massage the eyelids. This improves local circulation, helps reduce the swelling of the eyelids, reduces the eyelid sensitivity, and smoothens out the scar lines.

The upper eyelids are massaged "across and down", while the lower eyelids are massaged "across and up". It also helps to vigorously close your eyes shut, and then open them widely frequently. Massaging should be done for at least ten minutes, twice a day for two months.

Silicone Sheeting

Some studies have suggested that silicone sheeting, available in most pharmacies and on the internet, can help the quality of the scar. To be effective, this silicone sheeting needs to be on the skin day and night for at least six months. It is not recommended for routine usage as it appears to have little value when scars are healing normally. I do recommend it in wounds that are showing evidence of prolonged redness or abnormal scar maturation. This is in less than 5% of patients.

Scar Redness

All scars initially are reddish and thickened. This is part of the normal healing process and eventually will smoothen out. It takes 6 to 9 months for the scars to undergo a full maturation process whereby they become flat and light in colour.

Tanning

Fresh scars and areas that have been bruised should not be tanned for at least four months after surgery. Early tanning can cause permanent hyperpigmentation of the scar and of the surrounding areas. Normal tanning can resume after four months, but please remember that tanning does cause premature skin aging and skin cancers.

Mobility

As a routine, it is important to be up and walking the day of surgery, and prolonged periods of bed rest are discouraged. Lying in bed can increase the rare but ever present risk of developing blood clots in the calves which in turn can cause pulmonary emboli. It is good to go for little walks, and to have frequent naps if you are feeling tired. For the first two weeks there should not be any heavy lifting or exercise that makes your heart beat fast. More bleeding could result. After two weeks, full activities can be resumed.

Driving a Car

You must not be driving a car for at least 24 hours after a sedative or a general anesthetic, nor if you feel drowsy for any reason. Do not drive a motor vehicle if you are having any pain, as the pain may cause you to jerk the steering wheel and lose control. You also must avoid driving a car if you are in any way restricted in your mobility or your vision, as this may compromise safe driving.

Fatigue and "Feeling Down"

While the results of plastic surgery are typically gratifying and uplifting, it is not uncommon for patients to have "down" times. Early on there is the residual effect of the anesthetic, coupled with discomfort, swelling and bruising at the surgical site. This is followed by the typically slow maturation of the scar itself. These frustrations all play together on the psyche, making one question the reason for doing the surgery in the first place. You are not alone with these thoughts, and they are entirely normal. Rest assured that well over 90% of patients are pleased with the results of their surgery, and the apprehensions and "down" times are eventually replaced by feelings of satisfaction and confidence.

Questions/Problems

Every effort is made to provide you with a surgical experience that is safe and as comfortable as possible. Any suggestions you have that might improve the experience are much appreciated.

If you have any questions, concerns, or problems, please call the office at 416-447-6176. If there is an urgent situation, and I am not immediately available, please go to the emergency room department at North York General Hospital, or your closest emergency room department.

I hope you have a speedy recovery from your surgery.

Sincerely,
Bernd R. Neu, M.D.