Blepharoplasty (eyelid surgery)

Summary

- Eyelid surgery, or blepharoplasty, aims to improve the appearance of the upper eyelids, lower eyelids or both.
- Blepharoplasty cannot lift sagging eyebrows or get rid of crow’s feet or dark circles.
- Specific risks of the surgery include abnormal positioning of the eyelids, bleeding behind the eye and permanent blindness.
- Talk with your surgeon about the risks and benefits of blepharoplasty and what results you can expect.

Eyelid surgery, or blepharoplasty, is a type of surgery that alters the appearance of the upper eyelids, lower eyelids or both. The aim is to improve the appearance of the area surrounding the eyes and to improve vision obscured by drooping eyelids.

Blepharoplasty can alter:

- draping skin that obscures or blocks your vision
- loose or sagging skin that creates folds or disturbs the natural contour of the upper eyelid – this can sometimes affect a person’s vision
- excess fatty deposits that appear as puffiness beneath the eyelid skin
- bags under the eyes
- droopiness of the lower eyelids – to avoid showing white below the iris
- extra skin and fine wrinkles of the lower eyelid.

If you are concerned about the way you look, or are thinking about cosmetic treatments to boost your confidence, there are alternatives. These may include lifestyle changes or learning to accept yourself the way you are.

Before choosing blepharoplasty

Before you opt for blepharoplasty, some of the important issues to keep in mind include:

- Upper eyelid surgery is often carried out separately from lower eyelid surgery. Be prepared for two separate operations.
- Blepharoplasty cannot remove dark circles under the eyes, lift sagging eyebrows or get rid of crow’s feet.
- The financial cost. Cosmetic surgery does not usually qualify for rebates from Medicare or private health insurance companies. However, your doctor can advise if your condition matches a relevant MBS item descriptor and is therefore covered by Medicare and private health insurers.

Some costs of blepharoplasty may be covered if it is performed for medical reasons – for example, if the eyelids drape onto the eyelashes and block your vision. Ask your surgeon about any out-of-pocket costs you can expect. Visit [Private Health](http://www.privatehealthinsurance.com.au) for more information on private health insurance.

- Smokers are at increased risk of complications. If you are serious about undergoing surgery, you should try to quit smoking.

Finding a blepharoplasty surgeon

You may want to ask your doctor for advice about finding a suitable specialist surgeon or hospital where blepharoplasty is performed. At your first consultation, you should ask the surgeon about their training and experience. It is preferable to have this procedure done by a surgeon who is specially trained to perform blepharoplasty and who has a lot of experience in carrying out this type of surgery.

Medical issues related to blepharoplasty

Before the operation, you need to discuss a range of medical issues with your doctor or surgeon. They will talk to you about your:

- physical health – an examination will help your doctor or surgeon to decide if the treatment is appropriate
- medical history – some pre-existing medical conditions and surgery you've had in the past may influence decisions about this operation, including the type of anaesthetic that is used. In particular, you must tell your surgeon if you have any eye conditions such as glaucoma, dry eye, wet eye or a detached retina, any thyroid disorders such as Graves’ disease and underactive or overactive thyroid, any cardiovascular disease, high blood pressure or other circulatory disorders, or whether you have diabetes
- eye exam – you may need to be assessed by an ophthalmologist (eye specialist) before your surgery
- risks and possible complications – it is important that you understand the risks and complications so that you can weigh up whether blepharoplasty is right for you
- medication – tell your doctor and surgeon about any medication that you take regularly or have recently taken, including over-the-counter preparations like fish oils and vitamin supplements
- past reactions to medication – tell your doctor and surgeon if you have ever had a bad reaction or a side effect from any medication including anaesthesia
- preparation for surgery – your surgeon will give you detailed instructions on what you should do at home to prepare for surgery. For example, you may be advised to take a particular medication or alter the dose of an existing medication. Follow all instructions carefully.

Blepharoplasty operation

You may have a local anaesthetic and sedation, or a general anaesthetic. Your surgeon will advise you on which is the best option for you.

The operation differs according to the details of the surgery, but generally, the surgeon will:

- make an incision (cut) in the skin fold across the eyelid, to treat sagging of the upper lid
- make an incision either just below the lashes or on the inside of the lower lid (a transconjunctival incision) to treat the lower eyelid
- remove excess skin – excess fat is repositioned or removed
- tighten underlying tissue (such as muscle) with sutures (stitches), if required
- attempt to hide all incisions within natural skin folds and creases
- close incisions with stitches, surgical tape or tissue glue.

Tissue glue in blepharoplasty surgery

Tissue glue, or fibrin sealant, can be used to hold tissue layers together during surgery and to reduce bruising after surgery. It is made from elements of human blood that are produced from donor blood plasma. The plasma is screened for hepatitis, syphilis and human immunodeficiency virus (HIV) before use. The blood components are also heat-treated to prevent any possible virus transmission.

Tissue glue has been used safely for many years as a sealant in cardiovascular (heart) and general surgery.

Immediately after blepharoplasty

After the operation, you can expect:

- mild pain or discomfort
- numbness
- use of cool compresses, gauze and dressings over the eyes
- swelling and bruising around the eyes
- possible bruising on the whites of the eyes
- a sensation of wet or dry, irritated eyes

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• extreme sensitivity to light.

**Complications of blepharoplasty**

All surgery carries some degree of risk. Some of the possible complications of blepharoplasty include:

- risks of anaesthesia, including allergic reaction, which (rarely) may be fatal
- surgical risks such as bleeding or infection
- blood clots that may cause potentially fatal cardiovascular complications such as heart attack, deep vein thrombosis or stroke
- temporary or permanent areas of numbness
- temporarily blurred or impaired vision
- dry or watery eyes
- difficulty closing your eyes – for example, the upper eyelid may remain open while you are asleep, which can dry out the eye surface and cause scarring
- lid lag – a pulling down of the lower eyelid (this is often temporary)
- ectropion – a slack and outward-rolling lower eyelid
- eyelid disorders that involve abnormal positioning of the upper eyelids (eyelid ptosis) or loose eyelid skin – these disorders can coexist with sagging forehead and eyebrow structures
- the development of lumps inside the lower eyelid, which can irritate the eye surface
- sunken or unnatural-looking eyes, if too much fat is removed
- inflamed, itchy scars
- bleeding behind the eye
- vision loss, including complete blindness
- further surgery to treat complications.

This is not a complete list. For example, your medical history or lifestyle may put you at increased risk of other complications. You need to speak to your surgeon for more information.

**Self-care at home after blepharoplasty**

Be guided by your surgeon, but general self-care suggestions include:

- Follow all instructions on looking after your wounds. Apply eye ointment as prescribed.
- Expect to have soreness and swelling around the eye for a few weeks.
- Avoid any trauma to the eyes – for example, do not rub at them.
- Use cool compresses to help manage short-term irritation, discomfort and sensations of dryness.
- Protect your eyes from sunlight until the healing process is complete – this is very important.
- Report any bleeding, severe pain or unusual symptoms to your surgeon.

**Long-term outlook following blepharoplasty**

Post-surgical swelling will reduce over time. Many people find that blepharoplasty makes a real difference to their appearance, especially if they had very loose upper lid skin or large bags underneath their eyes. Your final results will show within several weeks, but it may take up to a year for incision (cut) lines to fully heal. While blepharoplasty can be expected to correct certain conditions permanently, you will continue to experience the effects of ageing.

**Alternatives to blepharoplasty**

There are no other medical alternatives to blepharoplasty that can reposition or reshape the eyelids. Talking to a counsellor or psychologist may help you overcome your concerns about your appearance and you may decide that you like yourself the way you are.
Where to get help

- Your doctor
- **Australian Society of Plastic Surgeons** Tel. (02) 9437 9200
- **Australasian Foundation for Plastic Surgery** - Information Hotline Tel. 1300 367 446
- **Royal Australasian College of Surgeons** Tel. (03) 9249 1200
- **Australian Health Practitioner Regulation Agency** Tel. 1300 419 495

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Australian Society of Plastic Surgeons

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