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Eye lift surgery (Blepharoplasty)

Blepharoplasty is the term used to describe operations to correct baggy or sagging eyelids. This is a common problem - although most patients seeking such surgery are likely to be 35 or older, not infrequently puffy eyes may be a family trait and patients will seek help at a much younger age.

In the upper eyelids, ageing causes a downward movement of the outer corner of the eye, stretching of the eyelid skin producing a 'hooded' appearance and, in some patients, heaviness and downward movement of the outer half of the eyebrows. There is usually a prominence of fat at the inner corner of the upper eyelid.

Most of these problems can be rectified surgically by operating on the eyelid itself and removing or adjusting excess skin and fat. However, in some patients the primary problem may lie in the brow rather than the eyelid, in which case a brow lift may be indicated in preference to eyelid surgery.

In the lower eyelid the most frequent complaint is of puffiness or bagginess, which is noticeable more in the morning and may improve as the day passes. This is mainly due to increased prominence of the fatty cushion around the eyeball because of weakening of the structures holding it in place, and movement of the cheek fat pad downwards with gravity, which makes the outline of the bony eye socket more visible through the skin. There is usually a little skin excess as well, though in some patients there may be none and in others it may be marked.

Lower eyelid surgery is frequently performed through an incision which leaves a scar immediately beneath the lower eyelashes. In some patients, generally younger and with no excess skin, the procedure can be done from inside the eyelid so leaving no external scar. If the support to the lower eyelid is weak it may be necessary to reinforce this with a procedure known as canthoplasty. Lower eyelid surgery requires careful judgment in selecting the best technique for a given individual to provide the optimal outcome and lowest risk of complication.

Blepharoplasty may be carried out alone or in conjunction with other facial surgery procedures such as a facelift. It is important to exclude any eye disease before embarking on surgery such as this and it is wise to have your eyes tested by your optician before the operation. Serious conditions such as detached retina, glaucoma or 'dry eyes' may represent an absolute or relative contra-indication to surgery. Other diseases such as thyroid abnormalities may produce changes in the eyes or eyelids whose primary treatment will be medical (though sometimes surgery may be indicated later).