

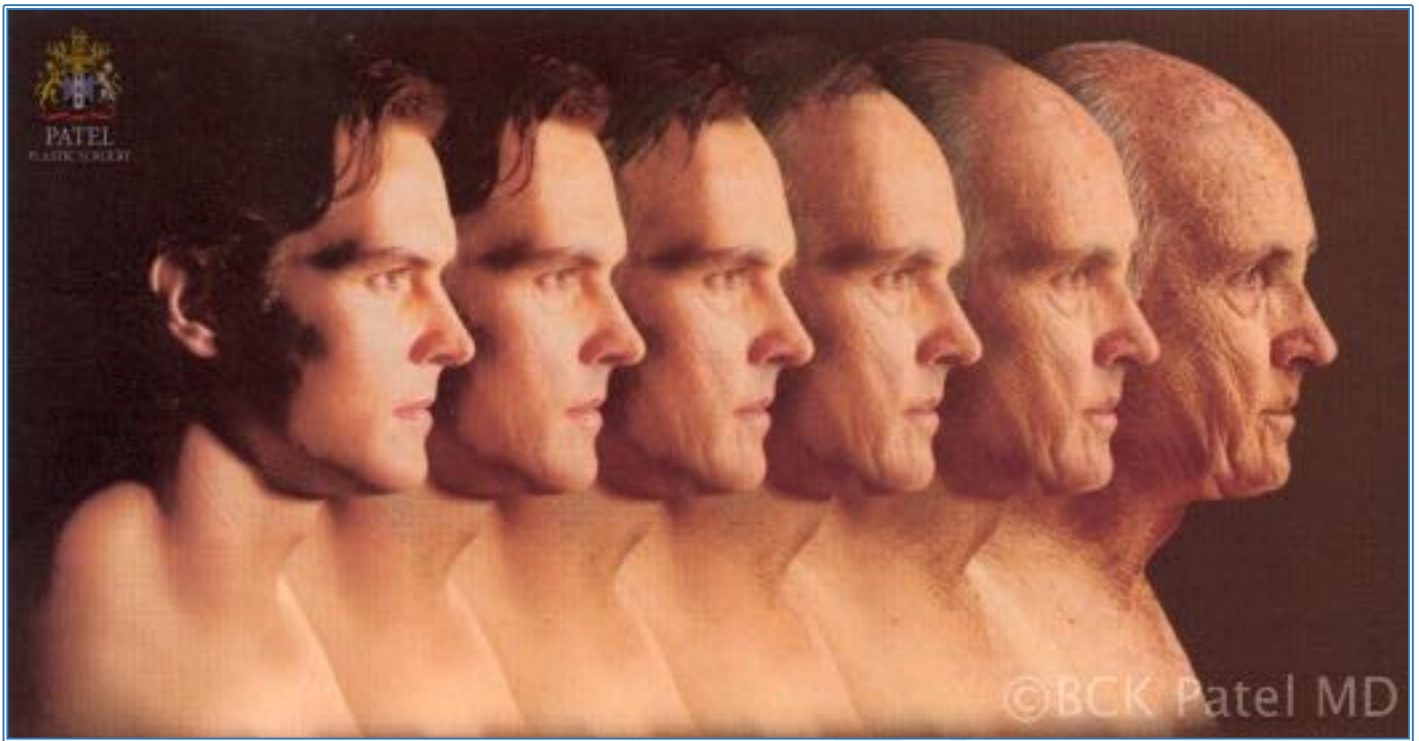


Facelifts: What to Expect & Postop Care

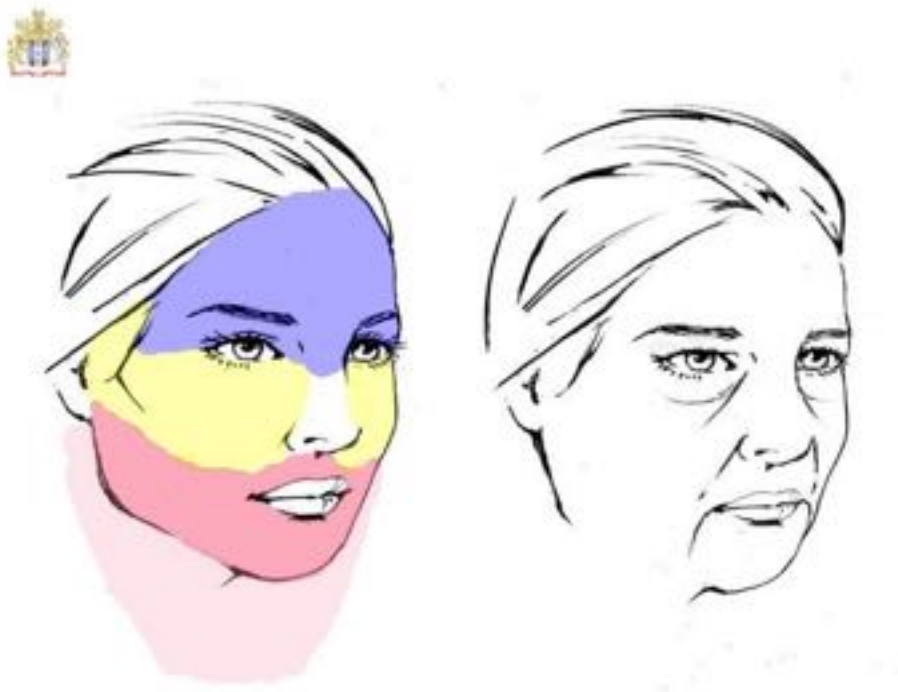
Facelifts are known by many different names: rhytidectomy, facelift, cervico-facial lift, face-and-necklift, lower facelift, etc. Then there are many gimmicky names that are designed to sell the procedure to the public and are best avoided. There is no such thing as a “weekend lift”, “no-scar facelift”, “quicko-facelift”, “acme facelift”, etc. These are creations of the advertising surgeon, all too common and best avoided at all costs.

Tempus fugit: aging of the face is inevitable. Or as Hippocrates said: “ars longa vita brevis”. With the steady march of time, there is loosening of skin, tendons, deeper supporting structures as well changes in bones, resulting in the well-recognized changes of aging that affect our face and neck. From forehead lines and creases, to drooping brows and eyelids, to crow’s feet to deep nasolabial and melolabial grooves, to jowls, to loss of the jawline, to double and triple chins to neck laxity and bands. And that is just a brief outline of aging, the full discussion of which would take a textbook to discuss. It affects ladies and chaps with equal remorseless persistenc!





Many other factors affect how we age: hereditary factors, smoking, sun exposure, personal habits, trauma, etc. **When we refer to a facelift or rhytidectomy**, it is important to remember that the improvements in this procedure are achieved in the areas coloured pink:



- The Blue Zone is improved with endoscopic browlifts and upper eyelid blepharoplasty
- The Yellow Zone is improved with lower blepharoplasty, cheek lifts and fat grafts
- The Pink Zone is improved with a face and necklift (cervico-facial rhytidectomy) with fat grafts and lasers

Do I need a facelift?



I don't need a Rolls Royce and no-one needs a facelift. It is important to understand that not only is this an elective procedure (meaning the patient chooses to have it, rather than it being indicated as being necessary by a surgeon), but it should also be considered carefully. The surgery should only be undertaken after care and attention has been paid to the following important points:

- Understanding what about your face and neck bother you. Not every change needs a facelift. Some changes can be improved with fillers, botox, lasers or smaller procedures. Ask!
- Understanding the difference between the many confusing names of facial procedures that are thrown out to the poor public. Do not get taken in by sleek advertising and fancy offices!
- Establishing a proper rapport with your surgeon: communication is the key. We believe that your surgeon should be the only one who always sees you (before and after surgery), the surgeon should communicate with you and the surgeon should follow up with you to ensure your results meet requirements.



- Word-of-mouth is best: make sure you know of others who have had facelifts by your surgeon so you feel comfortable with your choice.
- Nickeling and diming with discounts can be seductive and dangerous: it is YOUR face, don't forget. Choose wisely.
- A proper face and necklift should be designed for your specific needs and not be an out-of-the-box named "cut here and suture there" procedure. No two people age the same way, which is

why template quick operations produce average results. Our motto is, loosely translated “nothing but the best will satisfy us” (per ardua ad astra). To that end, our before-and-after photographs, patient testimonials and patient-referrals will guide you.

In general, what are the improvements sought in a facelift?

Remembering that many factors have to be considered when predicting the outcome of facelifts (including race, age, lifestyle, sun exposure, history of smoking, genetic factors, previous surgery, etc), these are the areas where improvement is sought and obtained when bespoke face and necklifts are designed:

- Improvement in the lines that run from the nose to the mouth and the mouth to the chin (nasolabial folds and melolabial folds)
- Stronger jawline
- Improvement in jowls
- Improvement in laxity of the skin of the lower face
- Improvement in the laxity of the neck skin
- Improvement in neck bands
- Improvement in the texture of the face and neck skin
- Improvement in fullness in the neck (double chins)
- Improvement in the appearance of the chin (correction of the witch’s chin or the weak chin)
- Improvement in the appearance of lips
- Improvement in the corners of the mouth (“frowny mouth”)



What are the advantages of having a facelift?

Here are the experiences of our patients who have undergone face and necklifts:

- Improvement in the items listed above including the jawline, the neck and face changes
 - A more youthful appearance WITHOUT looking operated. Many patients have called Dr. Patel “the invisible surgeon” because of the lack of an operated look and minimal scars
 - Increased self-confidence
 - Minimal maintenance to keep the results looking good
 - Makes your friends envious
 - Makes your enemies jealous
 - Many patients have told us “now I enjoy looking in a mirror and having my photos taken!”
 - The aim is to change annus horribilis to annus mirabilis
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What are the dis-advantages of having a facelift?

One must always consider all possible outcomes when undertaking anything elective, especially a facelift. To that end, here are my views on possible dis-advantages of undergoing a facelift:

- Down-time. Most patients will need at least two weeks off work to ensure that most of the healing is well under way. If you need to go to a party or get-together where you don't want anyone to see any bruises or swelling, it might be four to six weeks after surgery before that may be done. Everyone heals at different rates. And as I say time and again, it takes you 20, 30, 40, 50 years to age, the body IS going to need some weeks to heal. Please do not think you will be different and your healing will be quicker than everyone else's. Human physiology, biological aging and healing do not discriminate! *Ceteris paribus*, we are all going to take time to heal!
- Cost must always be considered with any elective procedure
- Your expectations: some people have expectations which are not realistic. For example, a facelift will not make anyone look 20 again. Your expectations should be realistic but ambitious, as are ours for all our patients. Our before-and-after photographs will illustrate what one should endeavour to achieve.
- Every single area of the face and neck will not show an equal improvement: the degree of aging, sun damage, etc will vary from person-to-person and from part of the face to part of the face. Results from a facelift and necklift should be regarded as if looking at a whole painting and not studying individual brush strokes. NOT every wrinkle or line will disappear. Indeed, most will improve but few will completely disappear. The *clavis aurea* to a beautiful facelift is the care and attention to detail paid by your surgeon and the patience demonstrated by the patient!
- Maintenance: you will continue to age. Therefore some changes in the face do develop and will need simple maintenance with lasers or fillers or botox to keep the results looking good long-term.

- Psychological: many patients tell us “I never thought I would have a facelift”. This is where no-one should convince you to have a facelift or not to have a facelift. We are adults with the ability to self-determine for a reason. Seek guidance, not convincing by those around you. If you experience pressure-sales-pitches, run.
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What is the correct age to have a facelift?

We have operated on patients as young as in their 30's when they are born with congenital or familial facial changes they wish to change and on patients in their 90's when their health allows and every age in between. There isn't a correct or incorrect age, but there is a correct and incorrect time. I am always talking people out of having facelifts because they want it done too soon. We are European in our way of thinking and therefore conservative. We will guide you, so that, as the Grail Knight, Lord de Bauvis of St Gobain said at the Holy Grail, you “choose wisely.”

Can I choose how much of a facelift I should have?

Instead of falling for all the commercial names of facelifts (weekend lifts, halo-lifts, no-bruise lifts!), it is best to consider what bothers you and seek to have the face and necklift designed to meet your needs. It is perfectly possible to choose to be very conservative, intermediate or aggressive in what one seeks to get from the surgery. To that end, one can divide the approaches to a face and necklift into three:

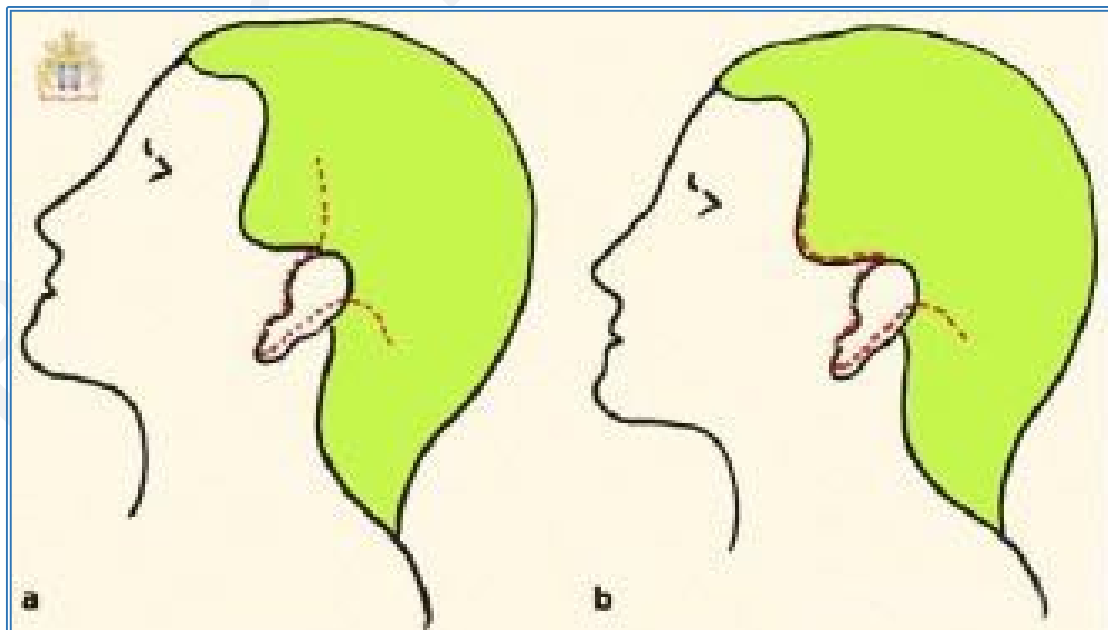
- A full face and necklift would entail an improvement in all the aspects listed above and include fat grafts, use of lasers, etc.
 - A medium facelift can be done without fat grafts and lasers. This will reduce the degree of improvement you would see in some aspects of your face but your recovery is a little faster and the cost is lower.
 - A “mini-lift” is performed when patients just want an improvement in the jowls and some improvement in the neck. Here the incisions may be less extensive, but that also means that the improvement is more measured.
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Where are the incisions made?

Designing incisions specifically tailored to the individual faces is the key to obtaining excellent results. In most patients, the incisions will start from just at the temple tuft of hair, be hidden inside the tragus and go around the ear to a variable distance up in the groove behind the ear:



When a browlift is combined with a facelift, the incision used is shown in diagram a. Otherwise, the incision is as shown in diagram b.



Here are the actual results of the incisions on one of our patients:



There will also be a small incision below the chin which heals imperceptibly: this allows us access to the neck bands and fat.

For men, the incisions are designed so as to keep the beard hair out of the ear. There are several layers of sutures used, dissolving as well as permanent. The skin sutures are removed between 7 and 14 days depending upon a number of factors. In some of our out-of-State and overseas patients, we use the types of sutures that can be left in place longer. We don't use staples as the final scars from sutures inserted by a skilled surgeon are always superior to mechanical staples. Staples save the surgeon's time. Suturing carefully gives you the best results!

What kind of anaesthesia will I need for my face and necklift procedure?

These procedures can be performed using deep sedation anesthesia as well as general anaesthesia. Again, we will look at your general health and previous history and experience with anesthesia to choose the best kind of anaesthesia for you. We work with the best anaesthesiologists who perform superb and properly chosen anaesthesia for our patients.

What other procedures are generally done together with facelifts?

Patients may choose to have other procedures like endoscopic browlifts, upper and lower blepharoplasty, cheek lifts, fat grafts, laser, lip augmentation and fillers. If you have specific questions or procedures you are considering, we will discuss them with you during your consultation. Many patients will divide facial cosmetic surgery into a top two-thirds of the face and the lower one-third of the face and the neck. To that end, patients will often choose to have what we call the Hammock Lift, which is a combination of an endoscopic browlift, upper blepharoplasty and lower blepharoplasty with cheek lifts. This essentially gives you a two-thirds of a facelift (the upper two-thirds). Most of these patients will then have a lower facelift and necklift some months (or years) later. An example of the Hammock Lift are shown below – it shows the longevity of these procedures:



How much swelling and bruising will I have and for how long?

The swelling after facelifts tends to occur on the cheeks and lower down the face. You will notice that the swelling descends lower down your face over the first few days. It is not uncommon to get bruising around the area below the ears and the neck. It helps to use ice on-and-off on the cheeks and neck for the first two to three days. The bruising and swelling decreases gradually but in some patients, the last vestige of bruising or swelling can take several weeks to resolve. Keep the face moisturized with a face moisturizer at least three times a day for the first three weeks.

Discomfort

You will experience tightness of your face as well as numbness of your cheeks. The tightness settles within a few days but the numbness takes a number of months to resolve. This is of no concern and most

patients are not even aware of this. It is not uncommon to need prescription pain medication for the first two to three days, after which most of our patients switch to Tylenol or extra-strength Tylenol.

Immediately after Surgery

- Keep your head elevated using about three pillows for the first 3 days. Avoid keeping your head down for long periods of time. The force of gravity tends to increase swelling. When bending, bend at the knees. You do not need to remain in bed: a recliner is fine. You may read if you want or watch television.
 - Do not take a shower or a bath immediately after your surgery. However, you may shower, wash your hair and even use shampoo after 24 hours. It is fine to get the sutures wet.
 - We will apply a velcro-pressure dressing: we will show you how to apply it back on after a shower and will ask you to wear it every night for the first two weeks and as much as you can during the daytime for two weeks: this helps to reduce swelling and bruising more quickly.
 - You may drink water, clear fluids, 7-Up, clear broth, or tea. You may have a light lunch or dinner as long as you are not feeling nauseated (you will be prescribed medication for nausea if needed). You can resume normal eating and drinking within 24 hours. It is wise to refrain from taking alcohol for the first three days after surgery.
 - Apply ice on your face (frozen peas or crushed ice in a glove work well) on-and-off (on for 20-30 minutes and off for the same time) for the first two to three days.
 - You will have ointment prescribed to apply to any eyelid incisions. You may apply artificial tears into your eyes as vision often varies as you heal. There is no need to apply any ointment to the incisions around your ears, other than a regular moisturizer.
 - Please make sure you have a good moisturizer like Aquaphor, Lubriderm or Eucerin (or any brand you usually use or Vaseline) as keeping the skin moist, especially if laser has been used, allows the skin to recover more quickly.
 - If you have any eyelid surgery done at the same time, EVERYONE experiences blurry vision because of the swelling. Other than using artificial tears and ice as discussed above, there is no reason to worry. The vision reverts back to normal over a few days, but can sometimes take a few weeks.
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When can I go back to work?

We have operated on fellow plastic surgeons who are back to work and able to operate within three days, so you may resume work as and when you feel well enough. However, do remember that the body ages over many years and therefore needs some days to a few weeks to heal: we are but mortal.

Pilots who fly commercial planes and commercial lorry drivers generally need three to four weeks before they are well enough to resume duties.

Office-based work can usually be resumed within a few days.

Physical work (contractors, builders, painters, etc) will need about 7 – 10 days before they can resume vigorous activity.

When can I resume exercising and sports?

Tennis and skiing are generally best avoided for two weeks. Walking and gentle treadmill workouts can be resumed within three days. Heavy lifting of weights or vigorous aerobic exercise is best avoided for two weeks. Yoga may be resumed in one week (except for the one-handed tree pose, the wounded peacock pose or the Sayanasana pose: NOT recommended)!

Risks of Facelift and Necklift Surgery

- Excessive bleeding is a risk. We will insert drains for one to two days if necessary.
- Patients may develop an infection, although this is uncommon.
- Asymmetry: most patients do not have absolutely symmetrical faces. Almost all patients will have some degree of asymmetry of the face. This is partly because we often sleep on one side of the face. Other factors such as familial traits, previous sun damage, personal habits, etc, also have a bearing. As you heal, you WILL see small differences between the right and the left sides of the face. This is completely normal.
- Scarring of facial incisions is rare.
- Face appearance: everyone is concerned about the “pulled look” or the “operated look”. We are well-known to never give our patients this type of result. However, as you heal, swelling can temporarily give you more of a pull on one or the other side. As we design the procedure carefully and aim to get as much of a symmetry as possible by the end of the procedure, you should not worry about swelling and asymmetry in the immediate healing period. Everyone experiences this to some extent and is normal.
- As we are working at all the different layers of the face, you will notice that some nerves wake up sooner than others. You may have slight smile asymmetry. Facial nerve weakness or paralysis is a risk of facelift surgery that every surgeon discloses to their patients. We endeavour to avoid this by using our extensive experience and skills during the surgery, but you should always be aware of the risk.

- **IMPORTANT:** as you will be healing and generally not in circulation with your friends or workmates for the first few days, it is common to feel “down” and concerned after the surgery. This is very common but it passes. We keep in close touch with our patients: reminding them to keep the old pecker up as things only get better! This response after surgery is nothing abnormal: just us being emotional humans.

How do I maintain a beautiful long-term result after my face and necklift surgery?

- As we continue to live our lives and use our facial muscles, some wrinkles and lines are bound to return. Most of our patients will have fillers and lasers to keep the structure and fullness of the face and also improve skin changes. We will guide you with this. By doing this, we have patients who are many years after their browlifts who still continue to look better than the day before surgery!
- Simple sunscreen and moisterizer use is advisable to protect the skin from the vagaries of heat, dryness and wind.
- Some patients need to improve red spots or brown spots which are done in the clinic using Advanced Fotofacial and other Laser treatments.
- As some deeper loosening invariably occurs, we will use deeper radiofrequency treatments intermittently to keep the appearance as beautiful as we can, without repeat surgery. Over many years, some patients may need a smaller lift. The magis is in the neck: the better the neck, the more beautiful the face:



How long will my face and necklift results last?

Years and years and years!! With minimal maintenance with fillers, lasers and radiofrequency treatments, and appropriate sunscreen and moisturizer, we can make these results look beautiful for many years.

Important: We tell all our patients that they have the right to have the surgery or not to have the surgery. The choice and decision is always yours.

Further Questions

Please be sure to ask us any questions you may have whilst you are being seen in clinic so we can help you understand the procedures. Our team of Abraham, Mike, Diana, Patricia and others in clinic will be delighted to help you. You may also contact us: Dena Magallanes (dena.magallanes@hsc.utah.edu or 801 585 6646) or Jill Streeter (jill.streeter@hsc.utah.edu or 801 585 6641).

Thank you for coming to see us.

Sincerely,



Prof. BCK Patel MD, FRCS

I certify that I have read and I understand what I should expect after surgery. All my questions and concerns have been answered.

Patient Signature / Date