

Face and neck lift

Patient information leaflet

Plastic Surgery

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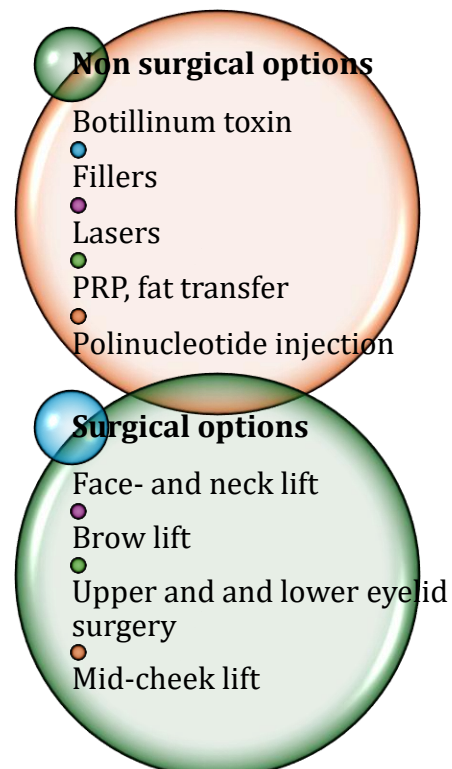


What does a face and neck lift surgery involve?

Modern facelifts and neck lifts remain the gold standard procedures for facial rejuvenation. They restore a more youthful appearance to the lower face and neck by removing major wrinkles and sagging skin. They will also improve a tired facial appearance by smoothing the skin and re-establishing defined contours along the neck and jawline. Considering having a facelift and/or a neck lift is a big decision, and therefore it should not be rushed. If you are thinking about either, it is important to have an understanding not only about the procedure and the operation itself, but also about what you can realistically expect from a facelift or a neck lift. All prospective patients face a dilemma when deciding about having this procedure due to their natural concern about a change in appearance influencing their identity. In addition, many people have at the back of their minds, the worry about the possibility of being left with a noticeable minor change or even some form of disfigurement. This information booklet has been written with that in mind, starting with an explanation about facial ageing. It then goes on to describe the different options in facelift and neck lift surgery, what to expect from them and the post-operative course. All operations carry a degree of risk, and facelifts and neck lifts are no exception. Therefore, the last section deals with possible complications from these procedures and what may need to be done about them.

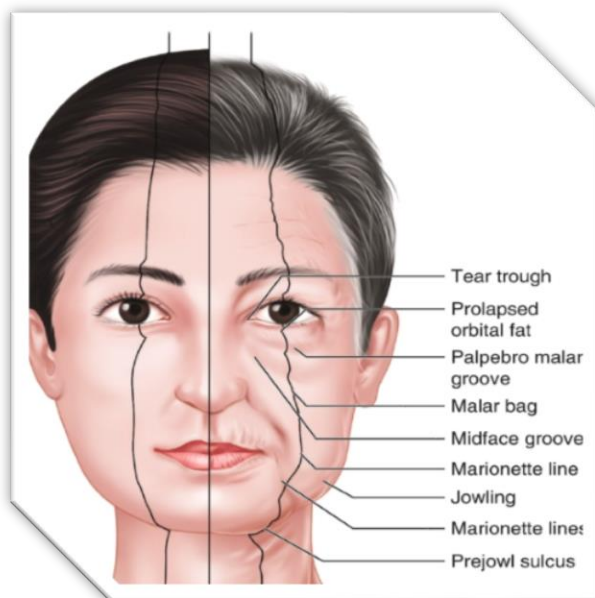
Facial ageing

We are all affected by ageing. Facial ageing can be defined as the irreversible process of tissue degeneration resulting in a loss of elasticity and stretching of the skin, its supporting suspensory ligaments and the underlying soft tissues. In addition to the skin of the face and neck losing its elasticity, there is a loss of volume in the mid-face as well as descent of the soft tissues because of gravity. The effect of this process is to cause



the cheeks to become less prominent, the nose to mouth lines to deepen, the jawline to sag (giving rise to jowls) and the skin of the neck to fall into loose folds. This changes the appearance of the face from being heart shaped, as it is in youth, to more square with age. Around the eyes the eyebrows may droop and the skin in the eyelids tends to drape giving a hooded appearance. Ageing changes also cause a loss of some of the individuality of our facial appearance. We start our adult lives with our own unique face, but as we get older, the visible changes of ageing are universal. They progressively conceal the shape of the unique face beneath, like a “mask of ageing”. Essentially, with ageing, people tend to become similar looking. The rate of this ageing process varies between individuals and depends on a person’s genetically determined constitutional clock. It is hastened by the effects of sun exposure, smoking and the stress of daily life. Because of gravity, it is first noted as fine lines, which go on to form wrinkles and then furrows in the forehead, around the eyes, lips and mouth. Bags develop about the eyes, deep creases form between the nose and mouth and jowls, and loose skin appears along the jawline and into the neck. Other folds and fat deposits may also develop in the neck. Patients usually refer to the result as a “tired, older depressed look”.

How can the ageing process be addressed?



There is nothing magical about cosmetic surgery - it cannot stop the ageing process. It cannot turn the clock back to make you look 21, but it can reset the clock and improve the most visible signs of ageing. It does this by combinations of tightening and repositioning the underlying supporting structures of the face, the removal of any excess fat, tightening of the underlying muscles and finally re-draping the skin of the face. The first signs of facial ageing appear in one's thirties, initially

with subtle changes around the eyes. This starts with a lowering of the outer eyebrow, and then later progresses with the development of bags under the eyes, and excess skin

on the upper lids. The initial signs of ageing can be tackled by non-surgical means: the use of muscle paralyzing agents (such as Botox®) and hyaluronic acid fillers (such as Juvéderm®) have revolutionised early facial rejuvenation. These work to stop the muscles that cause the wrinkles from working or by filling in the wrinkles themselves respectively. Facial peels and medical grade skin care can also help improve mild wrinkles and improve the texture and quality of facial skin. However, the masking effects of these agents have a limited timeframe. Eventually, as the underlying supportive framework of the face (known as the SMAS – see below) loosens and is affected by gravity, the only reliable way of addressing the problem is with surgery. The modern-day facelift accomplishes the effect of a fresh rejuvenated look, without changing the normal expression of the face.

What is the best age to have a facelift and/or a neck lift?

There is no specific age that is best for a facelift or a neck lift - we all age differently according to our individual genetic make-up and our environmental experiences. Facelifts and neck lifts can be performed from the early 30's through into the 70's. Usually a more youthful look is maintained for longer when a facelift or a neck lift is performed on a younger person whereas, in an older person a more dramatic change may be noticed. Facial cosmetic surgery will not stop the ageing clock but will reset it and although there are many factors that will affect the individual result, on average you can expect about 7 to 10 years of improvement with a standard facelift or neck lift. Smaller facelifts, “mini-facelifts” and “one-stitch facelifts” will last for shorter periods of time. This will depend on the extent of surgery undertaken as well as the quality of skin and the underlying supporting layer in every individual. Unfortunately, the ageing process is relentless and after several years you will again develop ageing facial features, which if you wish, can again be improved by a further facelift. A common misconception is that facelifts and neck lifts make one age faster and having had one, more will be needed. This is not true! Although ageing continues post-surgery as discussed above, it is not at an increased rate. In fact, the overall effects of ageing may be slowed after a modern-day facelift or neck lift as the deep supporting structures of the face and neck are tightened.

What makes a good facelift and neck lift?

A good facelift or neck lift should give someone the appearance of being refreshed, alert and confident, as people do when they have just returned from a holiday. A good facelift or neck lift could be described as returning the look of freshness and vitality that person had when younger. It is the overall facial appearance that registers with us, as our eye is not drawn to any single area of the face. A good facelift or neck lift reveals the original, individual face as it subtly lifts the mask of ageing and does not impose any change in natural appearance or leave any obvious traces of surgery.

Facial harmony

To achieve a refreshed and natural look, it is important to consider the effect of rejuvenating one part of the face on other areas of the face. For example, a facelift will improve the jawline, the jowl area and the cheek, but it will not influence the area around the eyes. Therefore, there is the possibility that facial “disharmony” may result in a youthful lower face, but an aged upper face. This may not necessarily be the case for everyone, but in many people, the most natural rejuvenation is achieved by balancing the shape and appearance of all areas of the face simultaneously. This is an important point, and one that Miss Kelemen will always refer to during a consultation. Consequently, Miss Kelemen will often recommend a combination of procedures to provide an overall or composite rejuvenation to achieve a balanced and harmonious look. This will vary from person to person but may involve combinations of surgery to reposition the brow, surgery to the upper and lower eyelids, surgery to the cheek area directly below the eyes and surgery to the neck. Sometimes these ancillary procedures may be performed on a separate occasion, and Miss Kelemen will be able to guide you to the best treatment plan to suit your individual needs. Additional treatments such as medical grade skin care products or facial peels can be very useful to improve the texture and tone of facial skin and the complexion in general and to provide “maintenance” of skin after facial rejuvenation surgery.

The SMAS (superficial musculoaponeurotic system)

Old fashioned facelifts and neck lifts worked by stretching out the wrinkles on the ageing skin of the face. The result of that traditional type of procedure is unnaturally tight skin

over flattened facial contours – the basis for the windswept look. A natural appearing facelift or neck lift is obtained by restoring the youthful shape of the face or neck. It is only the latest facelift and neck lift techniques that can reposition the underlying soft tissue facial framework that results in the youthful shape of the face being restored. This soft tissue facial framework is known as the SMAS. Knowledge and understanding of the role of the SMAS has revolutionised our approach to facelifts and neck lifts. We now appreciate that the SMAS is a structure that supports and maintains the position of the overlying skin and fat of the face. Therefore, if the SMAS descends (with age and gravity), it will result in the descent of the outward appearance of the face (i.e. give an aged and wrinkled appearance). Therefore, to rejuvenate the face, the position of the SMAS must be addressed. Modern facelift and neck lift techniques all work by altering the SMAS to effect a change in the outward appearance of the face.

How can I judge how I will look after a facelift and neck lift?

If you stand in front of a mirror and lightly pull the skin up and back in the temples and in front of the ears, you will get an indication of what a facelift will achieve. Another technique is to lie down with your head slightly hanging down over the edge of a bed and have a photograph taken. When the photograph is looked at the right way round, you have an idea of the effect of eliminating gravity from your jowls and neck. The aim of a facelift and a neck lift is a harmonious well-rested, fresh look from forehead to neck, whilst maintaining normal facial expression. A facelift and ancillary procedures will achieve this, but not all the wrinkles, furrows and folds will disappear - especially if they have been longstanding and permanent skin damage has occurred over the years. As stated above, the goal of a facelift and a neck lift is to reset the ageing clock. This will rejuvenate your face but will not stop the ageing clock ticking altogether. Ten years after the surgery you will of course look older but will always appear 7-10 years younger than you would have looked without surgery. In other words, if you are 55 and a facelift makes you appear 45, the biological ageing clock ticks away at the same rate but from your 45-year-old appearance, rather than your 55-year-old age.

What options are there in facelift and neck lift procedures?

All types of facelifts and neck lifts are directed towards producing the natural and refreshed look described above. However, a variety of facelift and neck lift techniques exist to achieve this goal, and whichever technique is chosen it should be tailored to suit your individual goals and desires.

Full facelift and neck lift

The scars for a facelift and neck lift are mostly within the hairline and hidden around the ear. The incision for the face extends down from the temporal hairline to the top of the ear and then travels for a short distance along the crease between the front of the ear and the cheek. It then turns backwards at the bottom of the ear to lie deep in the groove between the back of the ear and the side of the head. When it reaches the top of the ear at the back it turns to lie just within the hairline behind the ear. These scars are designed in such a way that you should be able to wear your hair in any style that you choose once the scars have matured. As outlined above, the SMAS (superficial musculoaponeurotic system) is the name given to the supportive framework of the face. The changes seen in the face with ageing are principally due to the loosening and loss of elasticity of this important layer. Therefore, for a facelift to have any long-lasting effect, and for it to give a natural appearance, the SMAS must be supported and re-suspended in its original youthful position. This may be done in several ways:

- the use of stitches (SMAS plication)
- the removal of a section of the framework and re-stitching it (SMASectomy)
- the complete repositioning of the supporting framework (SMAS flaps).

Miss Kelemen will be able to discuss with you the technique that best suits your face. Whichever SMAS technique is chosen, the full facelift tends to provide the most powerful effect on the neck and lower face, in terms of rejuvenation and in dealing with any excess skin. This is especially true concerning the neck.

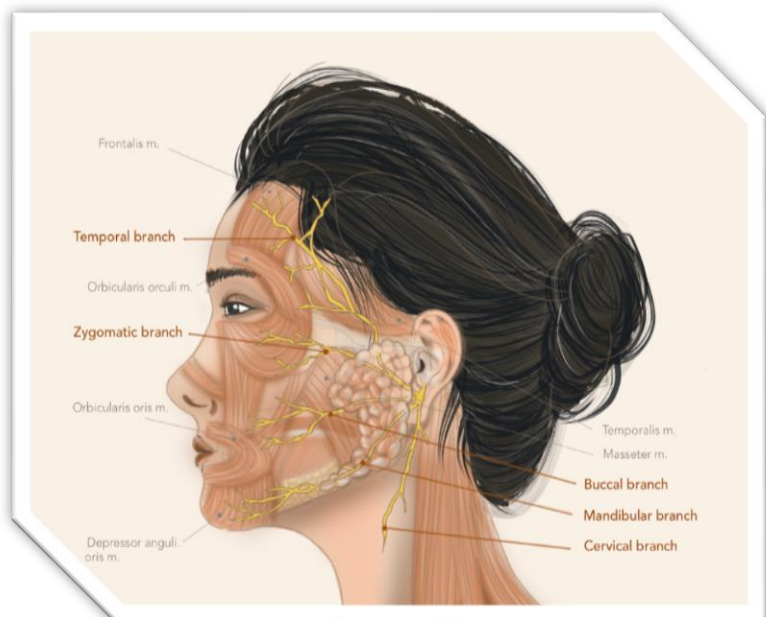
Extended combo “R” face- and neck lift



Miss Kelemen will see you on the day of surgery on the ward on draw on your face to re-assess skin laxity and to measure the exact amount of skin which needs to be removed. The extended combo “R” facelift involves raising and repositioning the skin and soft tissue of the face. During the operation, cuts are made on both sides of the face starting at the hairline, then in front of the ear around earlobe, into the crease behind your ear then to the lower scalp towards the neck. Miss Kelemen will also make small cut under the chin for the neck lift part of the surgery.

The extended combo “R” facelift includes raising skin and soft tissue flaps of the face. Miss Kelemen will excise the redundant skin from the front of your ear. As part of the extended combo “R” facelift a deep plane facelift is performed. This means lifting the whole soft tissue towards the centre of your face over the facial nerve (nerve that moves your face).

Also, it means to release all the strong tissues to enable lower cheek lift and jowl to be lifted. The extended- combo “R” deep plane facelift method of where Miss Kelemen can correct jowls and significantly lift the lower cheek and this provides a much better cosmetic result, than a conventional facelift. At this



stage Miss Kelemen is working near the nerve branches which close your eye, move your face, and make you smile. As part of the deep plane (combo) facelift Miss Kelemen will take great care not to injure the nerve branches, however there is a 1-5% risk of nerve injury. Usually, it appears in a form of nerve weakness and can result in temporary asymmetric smile. Once the facial skin and soft tissue is released, long lasting sutures are placed to secure the composite facial skin and soft tissue flaps, resulting in a youthful looking cheek and jawline. Occasionally these sutures can protrude and if they get exposed, they might need to be removed. The neck lift is performed as part of the extended combo “R” facelift and neck lift. The neck skin is raised, and the neck muscle (platysma) bands are divided. Then liposuction is performed to thin the skin under the jaw and neck. As the neck muscle is released, it is sutured together in the centre to act as a corset and to tighten the neck. Further sutures are placed securing the muscle to the hard fascia behind the ear to make sure a smooth neckline and highlighted jawline is developed. After the deep sutures, more sutures are placed to close the skin in layers. All sutures in the skin are dissolvable. Once you wake up from surgery, you will have a bandage around your head and neck. This will be removed the next day, and the suture strips will be kept in place. Usually, you can go home the next day following this surgery.

Short scar facelift

There are also facelifts in which the scar does not go behind the ear - short scar facelifts. Similar procedures are performed on the SMAS as for SMAS facelifts, but through a shorter scar. This type of facelift is usually more suitable if you do not have a significant degree of skin excess on your neck. The effect of this facelift concentrates on the jowl area, the jaw line and the middle part of the face. Therefore, if your neck is the problem area, this may not be the right facelift for you, and you may be more suitable for a full facelift. Miss Kelemen will explore all options with you and discuss your suitability for each facelift technique.

MACS facelift

The MACS (minimal access cranial suspension) facelift is a type of short scar facelift, often referred to as a mini facelift. It has been specifically developed to be a less invasive type of facelift, with less downtime and a quicker recovery. The MACS lift has a more subtle effect on the neck and is therefore not suitable for people with skin excess on their necks.

Furthermore, although not as powerful a technique as the other techniques described above, it still addresses the SMAS with special stitching techniques and has become a popular choice due to the shorter recuperation time. However, the longevity of the outcome will not match a full facelift.

Neck lift

A neck lift is usually performed in conjunction with a facelift as together they provide the most comprehensive facial rejuvenating effect and each compliments the effect of the other. On occasion when loose skin on the neck is the primary concern and relatively speaking there is less descent of the facial tissues in the jowl and cheek areas, a neck lift on its own is performed. This can be done via an incision behind the ear and in front of the lower part of the ear (the lower part of the full facelift and neck lift incision). Again, the underneath supporting layer of tissue in the neck is tightened and/or repositioned and the skin re-draped with the excess skin removed. This procedure tightens the loose skin on the front and sides of the neck and will improve the contour of the jawline and jowl appearances. The effect on the jawline is more powerful if combined with a facelift but will be improved with a neck lift. Liposuction may be done in the under-chin area in addition and an open neck lift may be incorporated

Open neck lift

An open neck lift combines the procedure of neck lift as described above with an incision underneath the chin, which is hidden in the natural crease present there. It is done when there is a significant amount of loose skin or fatty tissue under the chin area and additional tightening of the supporting muscle layer (a corset platysmaplasty) is needed in the centre to achieve the desired improvement in the appearance of the neck. If the salivary glands present under the jawbone have drooped downwards and are contributing to loss of definition of the jawline, these can be repositioned or in some cases partially removed via this incision. When a very large amount of loose skin is present under the chin or on the front of the neck, occasionally some is removed via a carefully placed extension of this incision. An open neck lift is almost always done in addition to a facelift, as it is unusual to need an open neck lift in the absence of ageing changes in the face and descent of the facial tissues as well.

One-stitch facelift

The one-stitch facelift has recently been developed as a minimal facelift performed through a limited incision either just in front of or just behind the ear. The SMAS is tightened by one or two strong internal sutures. It primarily addresses the jowl area. Because of the limited surgery performed, the recovery time is very quick, and risks are less. Also due to the limited surgery performed, the effects are subtle and do not last as long as those from more extensive facelifts. This facelift can be performed in the treatment room.

Mid-facelift

In some people, the mid-face is the main problem area – this is the area between the lower eyelids and the mouth. The nasolabial folds (the lines between the corners of the mouth and nose) become heavier, and there is a loss of volume and flattening of the cheeks. This is because the mid-face has lost its original position. To correct this, the mid-face needs to be lifted and re-suspended. This is done by performing a mid-face lift, usually through an incision under the eyelashes of the lower lids. This procedure may be performed in isolation, or in combination with other facelift techniques. As an isolated procedure, it is more often indicated in people in their forties, before significant changes are evident on the jowls and jawline.

Thread lift facelift

There has been a resurgence of thread lift facelifts in recent years. They are popular as they are non-surgical facelifts, so called “lunchtime facelifts”. Barbed threads are tunnelled underneath the skin and hitch it upwards. While they have very little downtime and recovery compared to facelift surgery, they also only have very mild effects on facial rejuvenation and the results do not last very long. In young patients with only very mild facial ageing, there may be a role for these lifts. In general, our experience with these lifts is that patients are disappointed with results. Because of this, Miss Kelemen rarely recommends a thread lift facelift.

Liquid facelift/8-point facelift

A liquid or 8-point facelift is another non-surgical facelift technique. The name comes from the fact that it is performed using hyaluronic acid dermal fillers (liquid). The facial

filler is placed carefully in very specific locations around the face (around 8 points each side) to achieve a rejuvenating and lifting effect. Again, the effect of this is much more subtle than facelift surgery and more suited to milder degrees of facial ageing. However, in someone who wishes to avoid surgery or to delay surgery to a later stage, this

lift can provide a very pleasing effect that can be repeated if desired.

As can be seen from the descriptions above, there are many options in facelift and neck lift surgery. Miss Kelemen will guide you towards the most appropriate technique for your individual circumstances. These modern techniques offer a longer lasting result than previously, due to the tightening of the deep supporting structures of the face and neck. All the procedures require a high degree of specialised surgical skill.

What can I expect when I see Miss Kelemen regarding a face and neck lift?

On meeting Miss Kelemen, she will endeavour to find out about your motivation for seeking facial rejuvenation. In addition to clearly establishing the various areas of your face that you may be unhappy with, Miss Kelemen will take a thorough medical history, including records of any medication you may be taking and any allergies you may have. As part of your facial examination, it would be very helpful if you could bring along a few photographs taken of you about 10-15 years ago for Miss Kelemen to look at. This will help her assess how your face has aged and what will be required to restore it to its more youthful appearance in a natural and subtle way.

What does Miss Kelemen examine for during the consultation?

The examination process encompasses a thorough evaluation of your face from forehead to neck and everywhere in between. During the examination process she will check the function of your facial nerve, examine the quality and amount of facial skin, your underlying bone structure as well as the potential effects of different facelift and neck lift techniques on your face. She will also examine other areas, such as your upper and lower eyelids, as part of a comprehensive facial rejuvenation examination. Miss Kelemen will

provide you with a professional and honest assessment and discuss the areas that could be improved, as well as the limitations of any procedure.

Photography

Miss Kelemen will always take pre-operative photographs from a variety of standardised positions. She will use these during your consultation as an aid to discussing your facial features and how they may be affected by facelift or neck lift surgery. In addition, the photographs form an essential part of your medical records. Your consent for the photographs will always be obtained.

How to prepare to a face and neck lift surgery?

People often ask if there is anything they can do to help prepare for a facelift or neck lift. Below are some recommendations:

1. **Stop smoking:** Due to the high risk of wound healing complications with smoking, it is important to stop smoking for at least 2 months prior to surgery. Smoking not only significantly increases your risks of complications, but the coughing post-operatively that it will cause makes it more likely that you will bleed following the surgery.
 2. **Avoid Aspirin:** Aspirin and non-steroidal medicines (such as ibuprofen) are blood-thinning medicines that will increase the risk of bleeding complications. You should ideally stop these medications for at least 2 weeks prior to your operation. These medicines may also increase the degree of post-operative bruising. Paracetamol is safe to take.
 3. **Check your blood pressure:** High blood pressure will increase the risk of bleeding during and after surgery. It may also increase your risk from the anaesthetic. If you have high blood pressure, it should be treated in advance of your planned facelift surgery. Once treated properly, your surgery can be safely undertaken.
 4. **Avoid Vitamin E:** Vitamin E may also increase a bleeding tendency, so it should not be taken for 2 weeks prior to surgery. Vitamin C is safe to take.
 5. **Do not drink alcohol:** Alcohol increases blood flow, and therefore the risks related to bleeding complications and bruising are increased if you drink alcohol the night before
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surgery. Therefore, Miss Kelemen advises that no alcohol should be drunk for at least 2 days prior to surgery.

6. Hair colouring products: It is best to avoid hair colouring products for 5 days prior to surgery and for 6 weeks after surgery. If you regularly have your hair coloured, Miss Kelemen suggests that you arrange a hairdresser appointment for a week before the planned surgery and then again for 6 weeks following the operation, once the wounds will be fully healed and the scars starting to mature. Prior to surgery you should consider hairstyles that allow coverage of your ears and if possible, forehead, to help conceal early bruising or incision lines. It is important to realise that hair is not shaved for the operation.

7. Colds, flu and other infections: If you develop any sort of illness prior to the operation please contact the team immediately, as you may need treatment prior to surgery, or alternatively your surgery may need to be postponed.

8. Hair and facial products: The night before surgery, shampoo (tea tree oil shampoo is recommended) your hair and cleanse your face thoroughly to remove all traces of make-up and moisturiser. Please do not apply any moisturiser or make up prior to surgery.

9. What to bring to hospital: Please ensure you have your normal toiletries and any regular medication you may take. Also, if you wish you can bring a pair of sunglasses or a head scarf to wear home.

10. Planning of the surgery: The hospital, admission date and admission time will be arranged for you. You will be asked to fast for 6 hours prior to the operation (i.e. do not eat anything for 6 hours before the planned time of surgery). Water may be drunk for up to 3 hours prior to surgery, however other drinks should be avoided. If you have any doubts or confusion, please ask.

11. Medical grade skin care programme in preparation for surgery: The use of prescription grade skin care in the run up to facelift surgery can improve the quality of your skin including its texture, tone and pigmentation. Facelift surgery then repositions the skin and underlying supporting tissue. The use of a combination of medical grade skin care and facelift surgery can give enhanced results in some patients. A skin care regime or facial peels can also be used to help maintain surgical results for longer afterwards.

What happens when I get to hospital?

When you arrive at the hospital you will be shown to your room on the ward and a nurse will go through a detailed questionnaire assessing your health, your allergies and other relevant details (much of which will have been covered before with Miss Kelemen). You will be asked to change into a hospital gown in preparation for surgery. Your anaesthetist will also visit you for an assessment prior to a planned general anaesthetic (going to sleep for your procedure). Some facelifts may be performed under local anaesthetic (while you are awake). This decision is made depending on the extent and type of surgery chosen and your wishes.

Do I see Miss Kelemen before my operation?

You will always see Miss Kelemen before your operation. She will spend some time reviewing everything you have discussed before and make sure you have no unanswered questions. Once you have confirmed you are happy to go ahead, she will ask you to sign a consent form unless you have done so already. She will then carefully draw important markings on your face in planning for your surgery. She may also take clinical photographs of your markings for your medical records.

What does the operation involve?

If you are having ancillary procedures, such as eyelid surgery, Miss Kelemen will usually perform these procedures first, before the actual facelift or neck lift. For the facelift or neck lift itself, before making any incisions, Miss Kelemen will inject your face with a solution containing local anaesthetic and adrenaline. This helps to minimise bleeding during the operation. The skin of the face is lifted from the incisions towards the cheek and/or behind the ear. Once sufficient skin elevation has been performed, Miss Kelemen will then be able to visualise your SMAS, which lies directly underneath the skin. She will then use a technique bespoke for your face, as determined by your pre-operative examination. This may involve lifting up the SMAS and repositioning it or removing a section of SMAS and re-stitching to reposition it, for example. Once the SMAS has been repositioned the skin is gently re-draped over the face and excess skin is removed. The

wounds are then carefully stitched up. Rarely, surgical drainage tubes may be placed. These help remove any wound fluid.

How long does the surgery take?

The length of time a facelift or a neck lift takes varies considerably depending upon what technique is used and what additional procedures are being performed. The range is usually from 1 hour up to over 7 hours, if multiple other procedures are being performed. The average is around 4 hours.

Will it be painful?

Facial cosmetic surgery, like any operation, will produce some pain, but it is usually only mild to moderate and should be easily relieved by mild painkillers. Stronger pain relief is always available if required. One of the temporary side-effects of facelift operations is the numbness felt in the cheeks and upper neck following surgery. This returns to normal over the next 2 to 3 months. However, the benefit of this side-effect is that the numbness reduces the amount of pain felt. With recent advances in anaesthetics and pain management, post-operative pain relief and comfort has been maximised, whilst keeping unwanted side effects of the painkillers, such as nausea, down to a minimum. The one caveat to the above is when a brow lift has been done in conjunction with the facelift: following a brow lift, it is common to experience a headache for 24-48 hours post-operatively.

What else can I expect after surgery?

Another sensation normally experienced, is a feeling of tightness around the jaw and the neck following surgery. This is normal, but initially can be distressing. It is only temporary but can sometimes make swallowing and chewing uncomfortable. You may find a cool (not ice cold) compress soothing and softer food more comfortable to eat during this time.

When will I leave hospital?

Following a facelift, a hospital stay of 24 to 48 hours is normal. Smaller facelifts such as a one-stitch facelift may be done as a day case procedure. If used, surgical drainage tubes are usually removed the day after surgery, and your hair will be washed with the help of the nurses on the ward. You will also be provided with a facial corset, which we recommend you wear for at least 3 weeks. When planning for discharge, it is a good idea

to have brought a light headscarf and a pair of sunglasses to hospital, so it is easier to hide some of the post-operative bruising and swelling, if you wish so. Upon leaving hospital, an outpatient appointment will be made for you to see the nurse to have the stitches from in front of your ears removed, usually done at 7 days following surgery. The remaining stitches or skin clips are usually removed at 2 weeks after surgery. A moisturising cream or oil can be gently massaged into the scars about 1 week following the removal of all sutures. This helps to soften the scars, and you should continue to do this until the scars lose their redness.

Do's and Don'ts after surgery

Do's	Don'ts
Try and keep your head always elevated. Ideally a triangular pillow is used to keep your back straight and avoids flexing your neck. Alternatively, a folded towel under the neck can be supportive and beneficial.	In addition, do not bend down if possible – if you need to, you should squat, keeping your head upright.
Applying a cool wet flannel to your face and forehead will reduce bruising and feel very refreshing.	Restrict your normal activities (do not “overdo it”). A balance between taking things easy and being up and about needs to be reached. As you recover, you will be able to increase the amount you do.
If you have had surgery to your eyelids in addition to your facelift, regular use of cold wet cotton wool eye pads will help to sooth any discomfort around your eyes as well as helping the swelling and bruising to resolve.	Avoid smoking, alcohol and stress, as these will all hinder the healing process.
Wash your hair every other day. This may be easier if you have someone to help you initially, or alternatively a hairdresser Tea tree oil shampoo is a good choice following surgery - this helps to keep the incision lines clean. Careful drying is important, so use a hairdryer on a cool setting around the scars.	Avoid aspirin, as this can increase your bruising and bleeding into the tissues.
A dry cotton bud may also be used to clean behind the ears after showering.	
After showering, very gentle moisturising of the cheeks may be started, avoiding the scars. If you start this gentle massaging early, it will help the sensation return to your face sooner. Avoid massaging the scars until 1 week after the stitches are removed.	
Analgesia or pain relief is often required at the beginning to manage the discomfort - initially with codeine-based medicines, and then paracetamol. There is no need to be in pain after surgery, so do not limit your painkillers unnecessarily.	
It is important to drink plenty of fluids and eat a balanced healthy diet.	
Relaxing in a darkened room with cooling pads on your eyes and your head elevated on several pillows is recommended as much	

as possible. If sleeping is difficult after surgery, sleeping tablets may be useful to regain your normal sleep pattern.	
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Generally, visible bruising is present for about 2 weeks. The swelling increases over the first 48 to 72 hours following surgery, stabilises, then generally subsides slowly, but can take up to 3 to 6 weeks to fully settle. The swelling and bruising drifts down from the face and into the neck over the first 2 weeks and often one side of the face is more bruised and swollen than the other. You need to be patient and give yourself time to heal. As discussed above, it is quite normal to experience tightness and reduced sensations to your face during the initial healing process. Another sensation that some people experience is formication – the feeling of ants crawling on your face or scalp. Again, this is only temporary and transient. In addition, most patients experience a roller coaster of emotions, with good days and low days. It is quite normal to have the occasional day where you think: “what have I done?” and experience feelings of guilt and low self-esteem. It can often take some time coming to terms with the “new you”. Fortunately, this passes quickly, especially once you resume your normal daily activities and start going out a bit more.

What is the recovery period?

As a rule, most people will have fully recovered and be back to doing all their normal activities (including sports) by 6 weeks. For the first 1 to 2 weeks, you will have to restrict your usual routines to allow you to recover from the effects of surgery. Between weeks 2 and 6 you will be able to increase what you do. The recovery is quicker with smaller facelifts.

How long before daily activities may be resumed?

Social engagements can usually be planned by weeks 3 or 4 after surgery, and any mild residual bruising can be easily camouflaged with make-up. Your hair can be worn down to hide scars that will be slightly red at this point. Driving may be commenced between weeks 1 and 2, if you have not had any eyelid surgery, otherwise it is best to wait until after week 2. Exercise should be avoided for 6 weeks after surgery.

Can anything help the swelling and general recovery?

Following a facelift some people find the sensations in their face uncomfortable. Partly this is due to the retained fluid in the tissues causing some swelling, but it is also due to the nerves re-growing. Nerves re-grow from the centre of the face towards the ears, so the part of the face that remains numb for the longest period is the area in front of the ears. Deep tissue massage can be used to help relieve some of the discomfort that may be experienced in this area. This can be started from 2 to 3 weeks following surgery, but the exact timing will be determined by your recovery. Please ask Miss Kelemen for further information on this.

How can I get the best scar possible?

First, as described above, your scars are designed to be hidden within the hairline and in areas that are naturally hidden from view. However, scars do exist after facelift surgery and there are a few strategies that can help scars to mature and soften quickly. The first, and most important of these is regular moisturising and massaging of the scar. This can usually be started from around 1 week after the stitches have been removed. A non-perfumed moisturising cream should be used, and the scars should be massaged for 5 to 10 minutes every day.

How to massage after a facelift?

Massaging should be done with the aid of a non-perfumed moisturising cream or oil. A combination of circular movements and upward strokes should be made. Start at the centre of the cheeks and use two fingers in circular movements. Use upward strokes with your hands starting at the jawline and working up to the temples. When massaging the scars, use small circular movements with one finger gradually working its way around the whole length of the scars. If your scars go behind the ears, use upward strokes starting from the base of the neck up towards the hairline. If you have had surgery to your lower eyelids, use a combination of small circular movements at the outer corner of the eye (often where there may be a small amount of lumpiness felt initially) and then upward and outward strokes with one finger. When massaging near the eyes, it can be a good idea to use the ointment that was prescribed to keep the eyes moist such as Lacri-lube or

Visco-tears (i.e. a product that is suitable for putting into the eye itself). Therefore, should you accidentally rub some of the moisturising agent into the eye, it is completely safe.

What other effects might there be after a facelift or neck lift?

It is important to consider how you may be indirectly affected by having a facelift or a neck lift – a new face does not guarantee a new life and will not change your personality. However, a facelift or a neck lift performed on a patient with realistic expectations can do wonders for self-esteem and confidence. A change in your body image physically will also change your mental body image and this is often associated with mood changes in the early post-operative period. The effects may or may not be noticeable, but importantly they are usually temporary and may be associated with sleep pattern interference. Taking some mild sleeping tablets for a few nights in the post-operative period may help this. As mentioned earlier, it is not unusual to have some mood swings, experiencing periods of feeling low and tearful in the days after your surgery as well as having times of elation. Being aware that this can occur and is quite normal reduces the chances of being affected by it. Before long, you will be back to normal and enjoying life with your new look.

Applying make-up after a facelift or neck lift

Make up should not be used in the first week after a facelift or neck lift. During the second week, concealer can safely be applied to the cheeks, avoiding the scars. No eye make up should be used (if you have had any eyelid surgery) for 4 weeks after surgery. This is to ensure that any inflammation around the eyes has settled as much as possible. In addition, the eyelids and eyelashes may be numb initially, which can make applying make up more difficult. Make up can be used normally across the whole face from 4 weeks onwards day.

Day of surgery	Review by Miss Kelemen for surgical planning and surgery itself
Day 1 after surgery	Review by Miss Kelemen, any surgical drains removed, outer bandage removed, surgical tape left in place. Decision by Miss Kelemen re. suitability for discharge from hospital

Day 2-3 after surgery	Review and discharge in hospital by Miss Kelemen, if still in-patient
Week 1 after discharge	Wash hair daily or on alternate days (Tea tree oil shampoo recommended), sleep with head elevated, regular daily use of eye ointment if periorbital surgery performed, appointment for removal of stitches in front of ears if needed
Week 2-3 after discharge	Further appointment for remaining stitches to be removed, may start to drive, start to moisturise and massage wounds if not already doing so (should be continued until scars fade)
Week 4 after discharge	Gentle exercise may start (e.g. light programme on exercise bike)
Week 6 after discharge	Exercise/heavy physical activity may gradually be started
Beyond 6 weeks	Longer term follow-up appointments will be arranged by Miss Kelemen to ensure you achieve the best possible outcome

What you need to know about the possible effects of surgery and potential complications?

Before you decide to undergo facelift or neck lift surgery, it is important that you are informed of the potential risks, complications and side effects. Complications may occur even with the best surgical care. For this reason, it is crucial that you carefully read and understand the following section. After a facelift or neck lift, there are a few side effects that are commonly experienced, as detailed below. In addition, unwanted and unforeseen complications may also happen. These too are discussed below.

Commonly experienced side effects after facelift and neck lift surgery

Swelling

This is normal following a facelift or neck lift and reaches a maximum about 3 days following surgery before starting to settle down. Sometimes it may last up to 3 weeks and very occasionally up to 6 or 8 weeks in some patients. Commonly, the swelling subsides at different rates on each side, which is quite normal, and nothing to worry about. Swelling in the neck below each ear is also common and temporary.

Alteration in skin pigmentation (discolouration and bruising)

Bruising usually comes to the surface within a few days and then gradually resolves over 2 to 3 weeks. Very occasionally extensive bruising can take many weeks to totally resolve.

These problems are more often seen in patients with thin, hypo-pigmented and transparent skin. Patients with darker complexions should be aware of the possibility of residual brown pigment being left behind if the bruising takes a long time to settle. Make up can be used to cover up the signs of bruising while it resolves. Arnica may be helpful to settle bruising quicker.

Loss of or increased sensation

It is usual to have a reduction in skin sensation after a facelift or neck lift. This can include the skin around the cheeks, chin and neck and it is also possible to have numbness of the lower portion of the ear and the hairline, both above and below the ears. Feeling will usually return over a period of 8 to 12 weeks but in some patients, this does take a little longer. A feeling of “ants crawling under the skin” (known as formication) can be experienced while the sensation is returning and although a strange sensation, this should be considered normal. On rare occasions sensation can be increased and this will slowly return to normal over a period of weeks to months. As discussed above, the sensation first returns to the cheeks below the eyes, and gradually spreads towards the ears. Therefore, the last area to regain sensation is the area near the scars just in front of the ears.

Feelings of tightness and headaches

When the SMAS layer of the neck is tightened, a feeling of tightness can be experienced. There can also be feelings of tightness on mouth opening, and in the first week or so after your surgery you may feel that you cannot open your mouth fully. These are not permanent problems as the SMAS and stitches on the inside tend to relax slightly and these feelings of tightness reduce. However, during the week or weeks that this is present, it can be disconcerting. The same applies to the area around the upper cheeks and temple and occasionally headaches or even vice-like feelings can be experienced. Again, these settle as the swelling reduces and the tissues soften and relax. Significant pain is not common in facelift surgery and if it is experienced, it is usually only temporary

Possible complications after a facelift or a neck lift

Early complications (within the first week of surgery)

Bleeding (haematoma)

Although extreme care is taken to minimise bleeding, occasionally a blood vessel will start to bleed after the operation producing a swelling or mass of blood (called a haematoma). The haematoma is usually noted within the first 24 to 48 hours after surgery and usually requires further surgical exploration to drain the collection of blood and stop the bleeding. Signs that a haematoma is developing include: the filling up of your drain bottle with blood (if there was one used), swelling of the side of the face, increasing pain and the development of severe bruising. Small amounts of bleeding may leave an indurated or thickened area for a few months, but this usually settles down with time.

Infection

Rates of infection in facelift surgery are low, despite the proximity of the hair to the wound. This is because the face has an excellent blood supply. Antibiotics are administered whilst you are asleep to further minimise the chances of an infection developing. If an infection does occur, further antibiotics will be prescribed. If minor wound infections occur, they can be dealt with using special dressings and antibiotics where appropriate. Very rarely, it may be necessary to go back to the operating theatre to clean out an infected area.

Blood clots

Blood clots in the veins of the legs (DVT - deep venous thrombosis) may occur after a facelift, which is why important preventative measures are taken (calf compression stockings and pneumatic calf pumps whilst in hospital). You should continue to wear the calf compression stockings for 2 weeks after discharge from hospital. If a DVT does develop, you will need various investigations and treatment as appropriate. A pulmonary embolus (PE) describes a blood clot that has broken off from the DVT and lodged in the blood vessels in the lungs. This can be serious, and again, appropriate investigations and treatment is instigated should this be suspected after your operation.

Nerve damage

Possible nerve damage involving sensory nerves to the cheek, neck and ear area has been covered above. However, damage to the nerves which supply the facial muscles can also occur infrequently (about 0.7% of facelifts). This may cause facial distortion - weakness of the eyebrows or around the mouth. This is usually transient and returns to normal over 6 weeks to 6 months. Occasionally it can persist as a permanent complication requiring further treatment.

Synkinesis

If a branch of the facial nerve is partially damaged it can sometimes result in a condition known as synkinesis. This describes involuntary movements of the facial muscles, seen as twitching. This is the result of miswiring of the nerves as they try to grow back. Occasionally other movements can occur. For example, voluntary smiling may induce an involuntary contraction of the eye muscles causing the eye to squint when smiling. Fortunately, this is a very rare occurrence in facelift surgery.

Intermediate complications (within 6 weeks of surgery)

Delayed wound healing

In some people the wounds take longer to heal than in others: this may be due to having had a mild infection of the wound, due to a reaction with the stitches or from “overdoing it” straight after surgery. Normally this is a minor inconvenience, which can be managed with special dressings as an outpatient. Occasionally it can lead to a more severe infection developing as described above. Delayed healing is more common in smokers.

Skin necrosis

Skin death or necrosis is fortunately a very rare complication of facelift or neck lift surgery. However, even with the best operating skill, it can occur. The area most frequently affected is the non-hair-bearing skin behind the ear. If necrosis occurs, it is usually allowed to heal on its own, or occasionally small skin grafts are used to speed up the healing process. If skin death does occur, additional scarring may result and present as a white scar. Usually as the tissues heal, the scar reduces in size and rarely leaves significant additional scarring. This complication is around 12 times more common in smokers.

Suture extrusion

Stitches (sutures) that are designed to dissolve sometimes do not dissolve as quickly as they are meant to. On these occasions, there is a chance that they can work their way out of the wound and appear as sharp prickly filaments, occasionally with a surrounding area of redness on the skin. Should this occur, it is nothing to worry about and can be dealt with simply in the outpatient clinic. Miss Kelemen can remove any sutures that are extruding of the wound in the clinic, and the wounds should then heal over these areas uneventfully.

Broken blood vessels

With any skin lifting surgery it is possible to cause some broken capillaries in the skin. This is more so if this condition already exists and can be noticeable on the lower cheeks and neck area. Skin treatment may be recommended if this is obvious.

Hair loss

This can occur around the temple or behind the ear. This is usually temporary with normal regrowth within several months.

Alteration of the hairline

This may occur, especially in the side burn areas. Male patients should be aware that the hairless area in front of the ear may be narrowed and that the beard pattern will possibly change, necessitating shaving closer to the ear at the front, and maybe behind the ear.

Seroma

After surgery, it is normal for the body to produce some fluid in the operated area. Normally this fluid stops being produced by the body shortly after surgery. Unusually in some people this fluid can build up again, accumulating in the wound. This is known as a seroma. If this occurs, you may experience discomfort and there is a chance that the fluid can become infected. Therefore, should you develop a seroma, it may be necessary for it to be drained. This involves a fine needle being passed into the wound and the fluid sucked out.

Asymmetry

No-one has absolute facial symmetry – there are always differences between right and left halves of our faces. This is predominantly due to differences in the bone structure but also contributed to by the overlying soft tissues. Following a facelift, sometimes these differences become slightly more noticeable as the soft tissues are lifted over the facial skeleton. It is important to be aware of this possibility prior to undergoing surgery.

Late complications (after 6 weeks from surgery)

Scarring

Scarring will occur whenever the skin is cut and of course, every effort is made to place scar lines where they will not be detected by the unknowing observer. Although scarring on average is minimal, scar maturation varies from person to person and occurs over 6 to 12 months, with scars passing through a red, itchy and lumpy phase, prior to settling down to thinner, softer less distinct lines. Visible lines may tend to thicken, particularly behind the ears, which may require steroid injections to help them settle down. In some cases, minor surgical scar revisional surgery may be needed. Whilst the scars are red they are easily camouflaged with make-up. Hypertrophic or keloid scars can occasionally occur – these are thickened and lumpy scars that are more common in people of Asian or Afro-Caribbean descent. Should these occur, Miss Kelemen will discuss with you the best ways of treating them.

Longevity of facelift and neck lift surgery

You will continue to age at the same rate and in the same way that you always would have. However, after facelift surgery, the earlier effects of ageing are removed, and your start point for future ageing is from a more youthful position. As the years go by, you may gradually develop further loose skin, but this will be to a lesser extent than if you did not undergo facelift surgery. In general, the more extensive the facelift performed, the longer the results will last.

The sub-optimal result

Despite every effort being taken to give you the best result possible, there will be some people who may be disappointed with the outcome of their surgery. This may result from www.noemikelemen.com

unrealistic expectations, from a post-operative complication or for some other reason. It is important to discuss any concerns you have with Miss Kelemen. If further procedures are warranted, there may be further costs involved, and this will be explained. Miss Kelemen will explain to you everything in detail at your initial consultation to ensure you understand what can be achieved by facelift and neck lift surgery. If you have any concerns, or feel that things need further explanation, please do not hesitate to ask.

Conclusions

By restoring ageing features, a facelift can have a dramatic effect on your appearance allowing you to outwardly show the energy and self-confidence you are truly feeling. We hope these notes have helped you. If you have any further queries, please do not hesitate to get in touch.

Thank you for taking the time to read this information leaflet.

- I acknowledge that I have read and understood the nature of the lower blepharoplasty operation.
- I have read the information leaflet provided to me and I understand the potential risks and complications associated with this procedure.
- I agree to follow the postoperative care instructions given to me, including attendance at the postoperative follow up appointments, compliance with instructions to stop smoking/nicotine products (when relevant) and cessation of exercise and heavy lifting during the recovery after surgery.
- I agree to communicate any concerns I may have in a timely manner and to inform Miss Kelemen of any changes in my health or circumstances that may affect my suitability for, or recovery from lower blepharoplasty surgery.
- Occasionally during surgery, unexpected events can occur or there are unexpected findings which affect or prevent performing the planned surgery or require

adjusting of the surgical plan or procedure. Should this happen, Miss Kelemen and/or the operating room team will carry out any emergency treatment required and will adhere as much as possible to the planned surgery if safe to do so. If this should occur, you will be informed of this, any consequences of this and if any further treatment or assessment is required at the earliest opportunity.

- I acknowledge that no guarantee has been given to me as to the result that may be obtained or maintained. I understand this will depend on several factors including but not limited to my preexisting health, my body weight, skin and tissue type, the procedure chosen and performed, how my body heals during the recovery period, my lifestyle and if a complication occurs.
- I agree that the procedure(s), recovery, after care, expected results, potential risks and complications and alternative treatments have been explained to me in a way that I understand. I understand that I have the option of not undertaking any surgery at all.
- I understand that this specific leaflet is a detailed guide only, providing useful information and is not replacing a thorough consultation outlining my specific needs and circumstances.
- I understand that I will be required to sign additional consent forms during my treatment course
- I consent and wish to proceed with the lower blepharoplasty surgery provided by Miss Kelemen.

Name:

Signature:

Date: