

Dr A Anzarut, MSc, CIP, MD, FRCSC

**Plastic and Cosmetic Surgery
ASSH Fellowship trained hand surgeon**



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P l a s t i c S u r g e o n

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EYE LIFT (BLEPHAROPLASTY)

WHAT IS BLEPHAROPLASTY?

Blepharoplasty is also called an eyelid lift or eyelid tuck. It is one of the most common cosmetic procedures performed in the Canada. Blepharoplasty is a surgical procedure which removes fat, excess skin and muscle from the upper and lower eyelid, to reduce puffiness below the eyes. Eye surgery can decrease wrinkles formed around the eyelids, and correct drooping of the upper lids. As a plastic surgeon Dr. Anzarut has trained in the art and science of aesthetic blepharoplasty. Dr. Anzarut has published his research on blepharoplasty surgery in the prestigious Journal of Plastic and Reconstructive Surgery.

Codner, MA, JN Wolfli, and A Anzarut. Primary Transcutaneous Lower Blepharoplasty with Routine Lateral Canthal Support: A Comprehensive 10-Year Review. Plastic & Reconstructive Surgery. 121: 241-250, January 2008

WHO IS A GOOD CANDIDATE FOR BLEPHAROPLASTY?

Candidates must be in good health, have no active diseases or serious, pre-existing medical conditions, and must have realistic expectations of the outcome of the surgery. Most individuals seeking Blepharoplasty are in their mid-to-late thirties. If saggy or fatty eyelids are hereditary you may wish to undergo this procedure at an earlier age. In extreme cases, where patients find that their sight has become impaired due to the drooping of the upper lids, surgery may improve vision.

NOTE: You may **not** be a candidate for surgery if you smoke, have recently quit smoking, or if you are exposed to second-hand smoke. Primary and secondary smoking decreases blood flow to the body's tissues. This can result in prolonged wound healing, skin loss, infection, increased scarring, and a number of other complications depending on the kind of procedure performed.

HOW IS THE PROCEDURE PERFORMED?

An incision is made along the lash line in the lower lid, and/or on the upper portion of the upper lid and smile creases. Excess fat, muscle and skin are removed. Fine sutures are then used to close the incision. Sutures will usually be removed within one week after the procedure. If you only have pockets of fat beneath your lower eyelids, and do not need to have any excess skin removed, I may recommend "transconjunctival" eyelid surgery. In this procedure, the incision is made on the inside of your lower eyelid, which leaves no visible scar. Transconjunctival blepharoplasty will not tighten skin, but will reduce puffiness in the lower eyelid region.

OPTIONS TO ENHANCE THE PROCEDURE

Some patients choose to have laser resurfacing or a chemical peel in addition to the blepharoplasty. This may minimize fine wrinkles near the eye. A forehead lift may correct sagging or abnormally positioned eyebrows. Prior to undergoing blepharoplasty the brows should be in the correct anatomic position.

PLANNING FOR YOUR SURGERY

First, schedule a personal consultation with Dr. Anzarut. Communication is vital in reaching your goals. You will have the opportunity to discuss your goals and the results you'd like to achieve. Dr. Anzarut will work with you to reach an understanding about what you can expect from this procedure and what long-term benefits you will experience. Every patient is different, and Dr. Anzarut will choose the surgical technique and treatment plan that is right for you. During your initial consultation:

- Provide a complete medical history. Include information about any previous surgical procedures; past and present medical conditions; and all medications or herbal supplements you are taking.
- Be sure to inform Dr. Anzarut about symptoms of dry eyes and eyeglass or contact wear.
- Expect your Dr. Anzarut to conduct a complete physical examination.
- Be prepared to discuss possible risks and complications of the procedure.

PREPARING FOR YOUR SURGERY

You will be given specific instructions on how to prepare for your surgery. Dr. Anzarut will instruct you on how to prepare for surgery, including guidelines on eating and drinking, smoking, and which vitamins and medications should be taken or avoided. You should arrange for someone to drive you home after your surgery, whether your surgery is done on an outpatient or inpatient basis. You may also want to make arrangements for someone to help you out for a day or two afterwards.

WHERE YOUR SURGERY WILL BE PERFORMED

Depending on the complexity of the procedure it will take place in the hospital, at a private surgical center or Dr. Anzarut's private office. The majority of these procedures are completed on an out-patient basis.

TYPES OF ANESTHESIA

You'll remain comfortable throughout the entire procedure. In most cases, local anesthetic is used; although general anesthesia or anesthesia intravenous sedation is also an option for some patients.