

Patient Information for Consent

CM01 Facelift

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What is a facelift?

A facelift is an operation to tighten and lift the soft tissues of your face and neck.

Your surgeon will assess you and tell you if a facelift is suitable for you. However, it is your decision to go ahead with the operation or not.

This document will give you information about the benefits and risks to help you to make an informed decision. If you have any questions that this document does not answer, ask your surgeon or the healthcare team.

Is a facelift suitable for me?

As you get older, gravity pulls down on your skin and soft tissues of your face, causing them to sag. The fat that was supported by these tissues drops down, making you look older.

A facelift will reduce the signs of ageing in your face and neck (see figure 1).

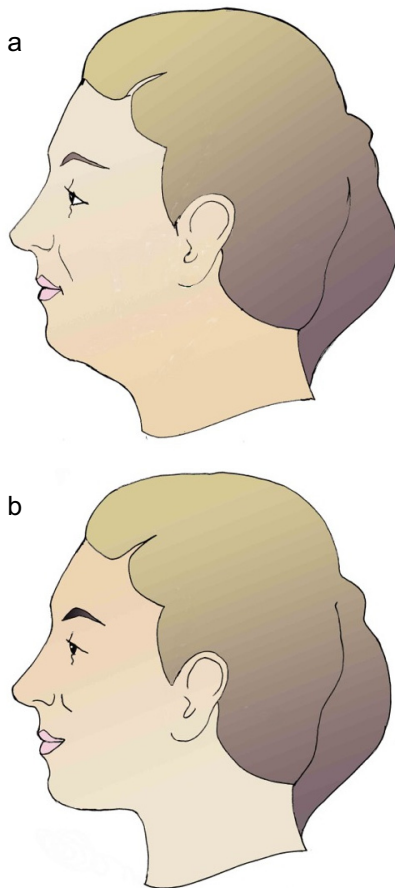


Figure 1

a Sagging soft tissues

b Reduced signs of ageing

You are most likely to benefit from a facelift if you have one or more of the following signs of ageing.

- You have deeper folds in your skin on the sides of your nose and mouth.
- Your cheeks have begun to sag.

- You have developed a double chin or folds in the skin of your neck.

If you have signs of ageing in other parts of your face, your surgeon may suggest that you consider treating these first or at the same time as a facelift. Treating droopy eyelids or eyebrows can often be the most effective treatment to make you look younger.

Your surgeon will carry out a detailed assessment before deciding if surgery is suitable for you. This may include taking photos for your medical records and asking you questions about your medical history. Your surgeon will examine your face. For the operation to be successful, you need to have a good bone structure and your skin should still be elastic (stretchable).

They will also ask you if you are planning to lose a lot of weight. It may be better to lose the weight before having surgery.

What are the benefits of surgery?

Your face should look younger. Most people who have a successful facelift are more comfortable with their appearance.

Are there any alternatives to a facelift?

A facelift is the most effective way to reduce sagging in your face and neck.

A facelift will not help to reduce fine wrinkling around your mouth, eyes and forehead as this is caused by the action of muscles. Your surgeon may be able to assess you for resurfacing or injecting Botox to smooth out fine wrinkles.

Deeper wrinkles can sometimes be filled out using fillers, fat injections or implants.

A thread facelift uses stitches to lift sagging tissue and does not involve any cuts. However this is suitable only for some people and the effects may last less than a year.

Droopy eyelids or eyebrows can be treated using other surgical techniques and you may want to consider these first or at the same time as a facelift.

Fat grafting involves injecting fat from other areas of your body into your face to make your face look more full. It can be performed instead of, or after, a facelift.

What will happen if I decide not to have the operation?

A facelift will not improve your physical health. Your surgeon may be able to recommend an alternative to reduce the signs of ageing in your face.

What does the operation involve?

The healthcare team will carry out a number of checks to make sure you have the operation you came in for. You can help by confirming to your surgeon and the healthcare team your name and the operation you are having.

The operation is performed under a general anaesthetic and usually takes two to three hours. You may also have injections of local anaesthetic to help with the pain after the operation. You may be given antibiotics during the operation to reduce the risk of infection.

The most common type of facelift is called the SMAS facelift. The aim is to raise and tighten the loose skin and tissue in your neck, chin, jaw-line and lower cheeks. The SMAS facelift also tightens the deeper layer of tough tissue under your skin (see figure 2).

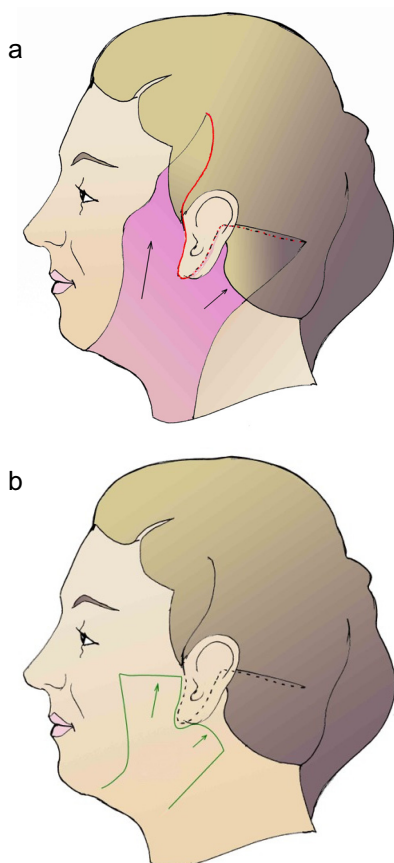


Figure 2

- a The SMAS layer lifted and tightened
- b The skin tightened and excess skin removed

• SMAS facelift

Your surgeon will need to make a cut on both sides of your face.

Each cut starts in the hairline above and to the front of your ear, along the natural creases of the skin in front of your ear, around your ear lobe and along the hairline behind your ear.

They will separate your skin from the SMAS layer in the area of your cheeks and neck. Your surgeon will cut under the SMAS layer, lifting it upwards and tightening it.

Tightening the SMAS layer can give a better facelift that lasts longer. Your surgeon will tighten your skin upwards towards your ears and remove any excess skin. Sometimes your surgeon may make a small cut under your chin to remove any excess fat and tighten the muscles.

Your surgeon will usually insert drains (tubes) in the cuts to help your wounds to heal. They will usually close the cuts with stitches or clips.

Your surgeon will usually wrap your face in bandages to help reduce swelling and bruising.

• MACS facelift

This is a variation of the SMAS facelift, where your surgeon tightens the SMAS layer with suspension stitches to avoid cutting underneath it (see figure 3). This involves less surgery but the results may not last as long.

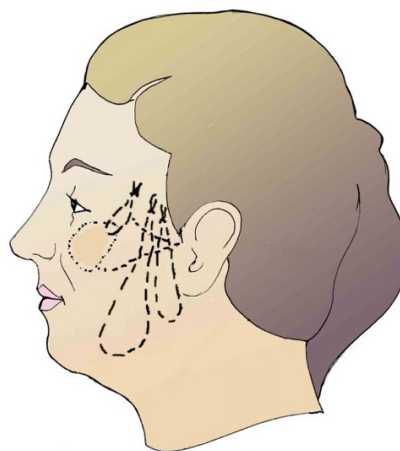


Figure 3

The SMAS layer tightened using suspension stitches

• Other types of facelift

These include the mid-facelift and composite facelift and involve lifting deeper layers of the face. These techniques may be more suitable if you have sagging of the cheeks and upper face.

What should I do about my medication?

Let your doctor know about all the medication you take and follow their advice. This includes all blood-thinning medication as well as herbal and complementary remedies, dietary supplements, and medication you can buy over the counter.

What can I do to help make the operation a success?

If you smoke, stopping smoking several weeks or more before the operation may reduce your risk of developing complications and will improve your long-term health.

Try to maintain a healthy weight. You have a higher risk of developing complications if you are overweight.

Regular exercise should help to prepare you for the operation, help you to recover and improve your long-term health. Before you start exercising, ask the healthcare team or your GP for advice.

You can reduce your risk of infection in a surgical wound.

- In the week before the operation, do not shave or wax the area where a cut is likely to be made.
- Try to have a bath or shower either the day before or on the day of the operation.
- Keep warm around the time of the operation. Let the healthcare team know if you feel cold.

What complications can happen?

The healthcare team will try to make the operation as safe as possible but complications can happen. Some of these can be serious and can even cause death. You should ask your doctor if there is anything you do not understand. Any numbers which relate to risk are from studies of people who have had this operation. Your doctor may be able to tell you if the risk of a complication is higher or lower for you.

1 Complications of anaesthesia

Your anaesthetist will be able to discuss with you the possible complications of having an anaesthetic.

2 General complications of any operation

- Pain is usually only mild and easily controlled with simple painkillers such as paracetamol. It is common for your face to feel numb because of temporary damage to superficial nerves. This helps to reduce any pain.

- Minor infection on the surface of your wounds. This is rare and easily treated with antibiotics. It is usually safe to shower after two days but you should check with the healthcare team. Let the healthcare team know if you get a high temperature, notice pus in your wound, or if your wound becomes red, sore or painful.
- Bleeding during or soon after the operation. You may need another operation to stop the bleeding. Rarely, you will need a blood transfusion. It is common for your cheeks and neck to be bruised, which usually fades over the next two weeks. If you have a mid-facelift, you may get more serious swelling that can take months to settle. Small collections of blood can develop and cause areas of unevenness in your face. This can take up to 6 weeks to settle. If a small collection of blood is noticed early enough, your surgeon may be able to remove the blood through one of the cuts.
- Unsightly scarring of your skin. The scars usually settle but can sometimes stay thick and red. Most of the lines of the cuts are usually hidden in the hairline. Follow the instructions your surgeon gives you about how to care for your wounds.
- Blood clot in your leg (deep-vein thrombosis – DVT). This can cause pain, swelling or redness in your leg, or the veins near the surface of your leg to appear larger than normal. The healthcare team will assess your risk. They will encourage you to get out of bed soon after the operation and may give you injections, medication, or special stockings to wear. Let the healthcare team know straightaway if you think you might have a DVT.
- Blood clot in your lung (pulmonary embolus), if a blood clot moves through your bloodstream to your lungs. Let the healthcare team know straightaway if you become short of breath, feel pain in your chest or upper back, or if you cough up blood. If you are at home, call an ambulance or go immediately to your nearest Emergency department.

3 Specific complications of this operation

- Loss of skin near the scars. The risk is higher if you smoke, are older or if you have a SMAS facelift. Separating a lot of skin from the tissue underneath and pulling it tight can damage the blood supply, causing an open wound. The wounds are usually hidden in the hairline and should heal in 4 to 5 weeks.

- Hair loss (risk: less than 2 in 100). The risk is higher if you have light-coloured hair and if you have a SMAS facelift. Pulling your skin tight can place tension on the scar, which can stretch over time, creating a bald strip. However, this is usually obvious only when your hair is wet or blows in the wind.
- Developing a collection of blood (haematoma) under your skin (risk for men: 7 to 9 in 100, risk for women: less than 3 in 100). You may need another operation to remove the blood. The risk is higher for men because they tend to have a greater blood supply to the face.
- Developing pale areas on your face. You will usually have some redness where your skin was separated from the tissue underneath. Over time, the affected areas can become pale. You should be able to cover it with make-up.
- Darkening in the colour of your face where the skin over your cheeks was separated from the tissue underneath. This usually settles within a few months. If you have dark skin, you may need to use special make-up to cover it. Some people get a lot of small broken veins in the cheek area, which cause red thread-like marks.
- Damage to the facial nerve. Branches of the facial nerve pass under the SMAS layer and control the normal appearance and expressions of your face. Any damage to the nerve can cause permanent loss of control of parts of your face and an unnatural appearance (risk: less than 5 in 200). The risk is lower if you have a MACS facelift because your surgeon will not need to cut under the SMAS layer. However, sometimes a branch of the nerve may get caught in an interweaving stitch, which may lead to temporary loss of control of part of your face. This usually gets better within a few weeks.
- Cosmetic problems. Minor areas of unevenness are common, particularly with the MACS facelift, and usually settle with time. It is difficult to predict exactly how your wounds near your ears will heal. Despite your surgeon planning carefully where they need to make the cuts, your ear lobes may get pulled slightly up or down as your wounds heal. It is possible to have these minor problems corrected by a small procedure under a local anaesthetic.

How soon will I recover?

• In hospital

After the operation you will be transferred to the recovery area and then to the ward.

Your face will look bruised and feel swollen. It may take up to two weeks for this swelling to settle. Your surgeon may give you a compression mask to wear or leave the bandages in place. You should be able to go home the same day or the day after. However, your doctor may recommend that you stay a little longer. If you do go home the same day, a responsible adult should take you home in a car or taxi and stay with you for at least 24 hours. Be near a telephone in case of an emergency. If you are worried about anything, in hospital or at home, contact the healthcare team. They should be able to reassure you or identify and treat any complications.

• Returning to normal activities

Do not drive, operate machinery or do any potentially dangerous activities (this includes cooking) for at least 24 hours and not until you have fully recovered feeling, movement and co-ordination. If you had a general anaesthetic or sedation, you should also not sign legal documents or drink alcohol for at least 24 hours. To reduce the risk of a blood clot, make sure you follow carefully the instructions of the healthcare team if you have been given medication or need to wear special stockings.

You should be able to return to normal activities after two to three weeks. The compression mask or bandages can be removed within the first week and your surgeon will then usually remove the stitches or clips.

You should be able to return to work after two weeks, depending on your type of work. Do not lift anything heavy or do strenuous exercise, such as vacuuming or ironing, for three weeks. You should be able to do a limited amount of activity, such as lifting young children, after about two weeks.

Do not have sex or bend down for two weeks. Sleep with extra pillows to keep your head raised. Be gentle with your face for at least another month. Do not drink alcohol for at least a few weeks, and keep your face out of the sun. Regular exercise should help you to return to normal activities as soon as possible. Before you start exercising, ask the healthcare team or your GP for advice.

Do not drive until you are confident about controlling your vehicle and always check your insurance policy and with your doctor.

• The future

The healthcare team will arrange for you to come back to the clinic regularly to check on your progress. It usually takes a few weeks for your face to look and feel more natural. The results of a facelift last for a long time. Your face will still continue to age but should always appear younger than if you had not had surgery.

Summary

A facelift is an operation to make your face appear younger. You should consider the options carefully and have realistic expectations about the results.

Surgery is usually safe and effective but complications can happen. You need to know about them to help you to make an informed decision about surgery. Knowing about them will also help to detect and treat any problems early.

Keep this information leaflet. Use it to help you if you need to talk to the healthcare team.

Acknowledgements

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This document is intended for information purposes only and should not replace advice that your relevant health professional would give you.