



Dr. Zenia Chow

M.B.B.S. (hons), F.R.A.C.S.

Facial Plastic & Reconstructive Surgeon
Otolaryngology Head & Neck Surgeon

Facelift - Face & Neck lift, Rhytidectomy

Over time, the long-term effects of aging, gravity, exposure to sun, dry air, smoking, high alcohol consumption, hereditary factors and general stress takes its toll on an individual's face and neckline. Jowls can develop under the jaw line forming folds and fat deposits. Sometimes creases begin to form between the nose and the mouth. The skin and contours may become less smooth, and the cheeks sag resulting in a droopy facial expression and "laugh lines". Skin, fat deposit and lax muscle under the chin can form a double chin or "turkey wattle" neck.

A Facelift (Rhytidectomy or Meloplasty) can considerably reduce these signs of aging by:

- Removing excess skin
- Tightening the underlying muscles and soft tissues
- Re-draping the skin around the neck and face

A facelift can affect one's appearance dramatically. A Facelift is a relatively safe, effective procedure performed to restore a more youthful appearance and a less fatigued look whilst maintaining or improving function. Increasingly women and men are seeking facelifts to restore a younger look to reflect their general health, corporate competitiveness and energy levels. Facelift surgery is effective in improving facial contours but it does not stop the body clock or the natural aging process. This natural aging process will continue after surgery. Most people who seek facelift procedures are aged between 40 and 65 years of age, but younger or older people also have facelifts. It is now one of the most requested facial plastic cosmetic procedures.

Overall a Facelift addresses "saggy" skin and skin resurfacing procedures addresses textural fine wrinkles and imperfections, whereas wrinkle relaxer and wrinkle fillers address wrinkles due to hyper dynamic lines and fine to moderate static wrinkles.

Facelift combined with other procedures

A Facelift can be performed as an individual procedure or in conjunction with another procedure such as:

- Browlift, Blepharoplasty, Neck Liposculpture
- Facial Resurfacing (chemical peel / Laser)
- Wrinkle relaxers / wrinkle
- Platelet-Rich Plasma
- Rhinoplasty (nose surgery), Otoplasty (ear pinning), Lip Surgery
- Chin implant - Mentoplasty, Genioplasty, Cheek implants

If the aging process is limited to the face, jowls or neck, an S Lift (Mini Facelift), Neck Lift or Liposculpture can be performed alone. However it is also important to understand there are limitations to certain procedures.

Understanding the Procedure

There are many types of Facelifts.

Mini facelift / S-lift / Short Incision or Minimum Incision facelift

Indications

- Mild to moderate face laxity – jowls
- Mild upper neck laxity with facial laxity
- Usually for younger person: 40-55 yrs old

A Facelift (limited to face only) has a number of variations include Mini-Facelift, Minimum / Short Incision Facelift, S-lift or MACS Lift (minimum access cranio-suspension). The incision is limited to the temple and in front of the ear. The underlying fat and SMAS can be tightened, lifted and resutured with any excess removed. These procedures have less down time, fewer complications, reduce cost and are suitable for mild to moderate facial laxity and aging. These procedures are very effective in younger age groups where people are not looking to obtain dramatic results, but just subtle changes and refreshed looks.

Most people can return to work in 7-10 days.

Face and Neck Lift

Indications:

- Moderate to severe face and neck laxity
- "Turkey wattle"- severe neck laxity
- Usually 50-65 yrs old

The typical Facelift and Neck Lift begins with an incision in the area of the temple hair, just above and in front of the ear, which then continues around the lobule, circling the ear, before returning to the point of origin in the scalp. The skin is raised outward separating it from the underlying fat, connective tissues and muscles. Dr

Chow will then reposition and tighten the underlying muscle and connective tissue with sutures (SMAS Lift, Deep Plane Facelift). Some fat and deep tissues may be removed, as well as excess skin. For men, the incision is aligned to accommodate the natural beard lines. There may also be a small incision hidden underneath your chin. The wound is closed with very thin sutures, and in the hairline with staples. A drain is occasionally inserted.

Endoscopic Facelift / Mid-Facelifts / Subperiosteal Mid-Facelifts

In some facelift cases an endoscope (a rigid small tube with light and video camera attached which can be viewed on a screen) is used. This is known as an Endoscopic Facelift. It is commonly used for Mid-Facelifts (for medial cheek laxity) or Subperiosteal Facelifts.

Neck Lift

A neck lift is commonly requested to correct loose skin under the chin, also known as 'turkey wattle'. The scar is limited from the ear lobe to the posterior scalp area, however, when excess neck skin is removed, the lax skin of the face bunches up in front of the ears and the look is unnatural. The incision is then extended to the tragus to remove the dog ear. Many patients are usually not satisfied with just a Neck Lift and are better off having a combination Face and Neck Lift.

In all cases, for camouflage reasons, incisions are placed where they will fall in natural creases in the skin. Any type of surgery leaves scarring and Dr Chow will close incisions in such a way that thin, virtually unnoticeable scars are well hidden. Incisions can be easily concealed by your hair or makeup. Dr Chow will discuss the most appropriate procedure with you.

A Facelift can be performed under IV (intravenous) sedation combined with local anaesthesia or general anaesthesia. Occasionally it can be performed under local anaesthesia alone. Modern anaesthesia is safe and effective. However there are some side effects and it is best that you discuss these with your anaesthetist.

Facial and cosmetic surgical procedures can help increase self-confidence because, generally when people look better, they feel better. However certain aspects of facial plastic and cosmetic surgery, which cannot be ignored, are the patient's mental and emotional attitudes. An initial consultation gives you and Dr Chow the opportunity to discuss your intended procedure/s in full.

Some of the questions you may wish to ask are:

- Am I a good candidate for this procedure?

- What is a realistic outcome for me after surgery?
- How long will the operation take?
- What is the recovery time?
- What are the risks involved?
- Is post-operative medication necessary?
- What is the charge for the procedure?

It is a good idea to write down the answers Dr Chow provides so that you can review these carefully later. The consultation also provides you with an opportunity to meet Dr Chow to determine whether your personality and hers are compatible and that you feel comfortable with her as your surgeon.

Medical History

It is important that you are candid with Dr Chow and her staff regarding your medical history so that she can plan the best possible treatment. This information is strictly confidential. Please inform her of any:

- Previous facial and/or cosmetic surgery (nose, eyelids, breasts etc.)
- Past and current medical conditions such as heart, lung and kidney disease, prolonged bleeding or excessive bruising, blood clots in the legs or lungs, or gastric reflux.
- Current medications especially Aspirin, Anti-inflammatories, Warfarin, Xarelto or Rivaroxaban, blood thinners, Insulin, and oral contraceptive pills. Over the counter products such as vitamins and herbal medications may also be important.
- Allergies or adverse reactions to antibiotics, anaesthetic drugs or other medications.
- Psychological and psychiatric illnesses
- Past keloid scarring or poor healing
- Connective tissue disorders such rheumatoid arthritis, lupus erythematosus, scleroderma or similar
- Previous radiotherapy to the head, neck or breast areas.

Dr Chow will then examine your features and after discussing options and specific risks and benefits will recommend the most appropriate procedure/s for you.

We respect your privacy. Please do not hesitate to seek another doctor's opinion if you are uncertain about Dr Chow's advice. You are the most qualified person to select a surgeon that is right for you.

Risks of Surgery

Modern surgery is safe but does have risks. Complications can occur despite the highest standards and world's best practice principles used by Dr Chow. It is not possible to list all the risks but you should be informed of the common side effects and benefits so that you can make an informed consent. Dr Chow will discuss these in greater detail at consultation. You should write down any particular questions or specific concerns.

The potential risks are

General risk of surgery

- Wound infection – may require antibiotics
- Bleeding, blood clots or seroma
- Chest infection
- Sore throat from the breathing tube
- Scars that become raised (hypertrophic or keloid)

Specific Risks

- Loss of skin due to impaired blood supply – worse in smokers.

Usually small and heal

spontaneously. Only very rarely is a skin graft required.

- Hair loss at site of incision – usually temporary but may be permanent
- Worsening and/or unsatisfactory appearance
- Nerve damage – numbness of cheeks and ears, usually temporary and takes a few months to recover.
- Facial nerve damage / paralysis– occasionally temporary, rarely permanent in 1 in 100 people. This can result in a lopsided appearance.
- Painful or unattractive scarring
- Deformity of ear lobes
- Slight asymmetry between left and right sides of the face
- Subjective dissatisfaction with final outcome
- Recurrence of the original condition which may require revision surgery

PREOPERATIVE (Before surgery) INSTRUCTIONS

- Please cease Aspirin, Aspirin-containing products, Plavix, Iscover and non-steroidal anti-inflammatories (such as Ibuprofen) for 10 days prior to and two weeks following your surgery. If you are on any medications that affect bleeding (such as Warfarin) please notify Dr Chow.
- Smoking tobacco and alcohol increase anaesthetic and surgical risks. Please cease them for two to three weeks prior to and three weeks following surgery. They cause delayed wound healing, skin loss or necrosis, skin redness and other complications.
- Please notify us of all your routine medications and significant

health history. You can remain on your daily medications, except for blood thinners unless instructed otherwise.

- Arnica, a natural herb that significantly decreases bruising, can be taken before and after surgery along with Vitamin C (ascorbic acid), which helps promote healing.
- If you are having a morning procedure you must not eat or drink after midnight the evening before. If you are having an afternoon procedure you must not eat or drink after 6.00am on the morning of surgery. You may, however, take your normal medications and brush your teeth.
- Please shower and remove any make-up and nail polish before arriving for your procedure.
- Unless you are remaining in hospital someone will need to drive you home after surgery and stay with you that evening.
- If you have any concerns please call the office. Remember, we are all here to give you the best possible care.

POSTOPERATIVE (After Surgery) INSTRUCTIONS

Wound care: After surgery your head will be wrapped in a soft bulky dressing. There will be a moderate degree of discomfort and some swelling and bruising. Ice packs on the area may help reduce any puffiness or swelling. You may have some drains in situ and these will normally be removed one day after surgery. The head bandage is removed after 1-3 days and the sutures are cleaned, hair is washed and showered. A facial corset is then worn for 1 week, then at night for further few weeks. Most of the sutures are dissolvable and staples will be removed within 7-10 days. Most people can return to work in 10-14 days.

The incisions should not be directly scrubbed or irritated. Applying Vaseline or antibiotic ointment four times a day to the sutures and staples is an essential part of the healing process. Sutures that have been kept lubricated with ointment are less painful to remove.

For patients who have a combination of procedures such as an Eye Lift and Rejuvenation, your vision may be cloudy from the ointment placed in your eyes at the time of surgery.

After suture removal apply Vaseline or antibiotic ointment at least 4 times a day. Bruising can be camouflaged with makeup after one week. Most of the swelling should resolve over the first 2 weeks but complete resolution may take 4 weeks. There will also be some numbness in the skin in front of the ears and this may take up to 6 months to get back to normal.

Always protect your face from the sun by wearing a hat and sunglasses. Following surgery, our staff will tell you when it is OK to

apply sunscreen, cosmetics and facial creams. Avoid unprotected prolonged sun exposure for three months following a Facelift to prevent pigmentation of incision lines.

Medications: Take what Dr Chow prescribes. Most patients complain of discomfort rather than pain. Do not take additional pain relievers other than what Dr Chow suggests or prescribes and start any antibiotics when you get home. You can take pain killers such as Panadol / Paracetamol, Panadiene forte, Tramadol or Oxycodone and antibiotic. Usually Dexamethasone 4 mg twice a day for 5 days is prescribed for swelling. Avoid Aspirin, Aspirin-containing products, Plavix and non-steroidal anti-inflammatories (such as Ibuprofen) for two weeks following your surgery. If you are on any medications that affect bleeding (such as Warfarin) please notify Dr Chow. Take Vitamin C (ascorbic acid) which helps promote healing, for two weeks following surgery.

Take Arnica, a natural herb that significantly decreases bruising for one week following surgery.

Activity: After surgery it is best to rest for the entire day. Sleep with the head of your bed elevated or use two to three pillows for one week after surgery. You should do nothing that involves excessive bending, lifting or straining. If you have small children, bend at the knees or sit on the floor and let them climb on to your lap. Swelling, bruising, mild pain and disrupted sleep are very normal postoperative symptoms and will decrease as the healing process occurs. Assistance with daily activities during the first two to three days after surgery is strongly recommended.

You can resume your normal daily activities a few days after surgery but do not smoke or consume large amounts of alcohol, as these will affect wound healing. Do not drive for one week following surgery. One to two weeks off work is recommended.

Diet: Advance your diet from liquids to soft foods (yoghurt, soup, pasta, oatmeal, French toast) to your regular diet as tolerated.

Final results following a Facelift are not fully apparent for 6/12 months following surgery. Most of the swelling will subside in 6 weeks to 3 months. There will numbness in front of the ear and this will improve with time. We recommend that you have follow up appointments for at least one year for assessment and postoperative photographs.

Please inform Dr Chow's office or the hospital where the procedure

was performed if you have the following:

- High fever, chills or a temperature of more than 38 degrees
- Heavy bleeding from the wound
- Severe pain or tenderness
- Significant redness, or discharge around the incision
- Significant swelling

If you have any concerns you can contact Dr Chow's office.
Remember, we are all here to give you the best possible care.