Upper Eyelid Surgery: Blepharoplasty and Ptosis
Frequently asked questions

This handout explains the difference between blepharoplasty and ptosis surgery and what to expect after.

**What is the difference between blepharoplasty and ptosis surgery?**
Blepharoplasty and ptosis (levator repair) surgery are two methods used to lift the upper lid to improve peripheral vision. With blepharoplasty, excess skin and fat are removed. In ptosis surgery, the muscle in the upper lid that helps lift is reattached with stitches to lift the height of the lid edge. Healing after surgery is similar for both and often they are done at the same time. They can also be done with other eyelid procedures as well.

**What happens during the surgery?**
For blepharoplasty or ptosis (levator) surgery you will be given medicine to help you relax. An incision is made in the crease of the eyelid and extra tissue is marked with a pen. The upper eyelids are then numbed and the tissues are removed as needed. During ptosis surgery, you may be asked to sit for part of the time. You may also be asked to look up and down so the height of the lids can be adjusted. You should not feel a lot of pain at any time.

**Will there be a patch or dressing on the eyes after surgery?**
There will be no patch over the eyes after surgery. You will be able to see, although the vision will be blurred due to the eye ointment and tearing.

**Should I expect pain after surgery?**
Pain is different for everyone. It often helps to rest, use ice, and avoid strenuous activity that could increase pressure in the eyelid area. You may also be given pain medicines. Please do not use ibuprofen or aspirin products for the first week as this can increase bleeding. The first 2 days are often the most painful, but it will slowly improve over the next week. If the pain gets worse, or causes a lot of nausea or vomiting, call the office or doctor on call to ask if you need to be seen before your scheduled follow up visit.

**When do I start the eye ointment?**
Ointment is placed on the skin stitches at the end of surgery. For the next 2-3 weeks, a small strip of ointment is placed on the incision with a clean finger or Q-tip, 2-3 times daily. The ointment often gets into the eye and can blur vision.

**What do the eyelids look like after surgery? Will they be bruised?**
The eyelids will be swollen and bruised, and may extend to the lower lids. Over the first two weeks, the tissues will become less swollen and red, and the sutures dissolve on their own. Please keep the sutures moist and soft so that they dissolve easily and do not become itchy. It often takes many months after the swelling and scarring has healed to see the final result.

To help with bruising and swelling, it is important to use cold compresses (wet wash cloth or gauze soaked in ice water) on the eyelids as much as possible while you are awake for the first 48-72 hours. If a bag of frozen peas is used, please
wrap it in a wet cloth. You do not need to use compresses while asleep at night. After 3 days, you may switch to warm compresses.

**What activities can I do after surgery?**
Avoid strenuous activity for one week after surgery or until you see your doctor. This includes bending, exercise, sports, and lifting more than 15 pounds. Anything that increases your heart rate too much may cause bleeding/hemorrhage or more swelling in the eyelids. This may slow healing or impact the final result.

**Will my eyes close normally after surgery? What if they feel dry?**
The eyes will close normally, but may feel tight for a while. Please use over-the-counter artificial tear drops, such as Refresh, Systane, or Optive (avoid Visine), 4-8 times a day as needed to help keep the eyes moist and comfortable. If the eyes burn, feel irritated, or scratchy, place a tear drop on them.

**What should I do if the eyelids suddenly become very itchy and swollen?**
If the eyelids become very swollen, red, and itchy a few days after surgery, you may be having an allergic reaction to the eye ointment. Please stop the eye ointment and keep the stitches moist with Vaseline instead. You can take Benadryl pills to help with the itching as well. Benadryl may cause you to feel sleepy and should not be taken before driving.

**Will the sutures need to be removed?**
No, the sutures will dissolve on their own within a week or more. Sometimes the surgeon may place blue or black stitches that will need to be removed at your next visit.

**When can I wear makeup?**
Do not wear makeup on the eyelids for at least one week. You can ask your doctor if you can wear eye makeup at your follow-up visit. Often light makeup can be applied after 1-2 weeks, but you should still be careful when taking the makeup off. Do not rub the incision.

**When can I wear my contacts?**
Do not wear contacts for at least one week to avoid pulling the stitches on your eyelids. You can check with your doctor if you can wear your contacts at your follow-up visit.

**Can I shower and get my face wet?**
You can shower after 24 hours. Let the water hit the back of the head rather than your face. Blot-dry your face gently at all times. Do not rub your face.

**Should I restart all my medicine(s) from before surgery?**
You should restart all your other medicine(s) after surgery. If you take aspirin, Coumadin, or other blood thinners, please check with your doctor before restarting these. Multivitamins and other herbal supplements should not be taken for one week after surgery.

**Will I be able to drive after surgery?**
Do not drive for the first few days due to the anesthesia. You may feel tired and not be able to react quickly enough. The eyelids may be swollen, and your eyes may be blurry and watery which can also make it hard to drive. Please use good judgement. Driving short distances and during the day is a good start.
At any point in your healing, if you get sudden, severe pain or change in vision, please call the clinic.

Thank you for placing your trust in our team at UW Health. If you have more questions, please let us know or call our Madison office at (608) 263-7171, or the Rockford office at (815) 399-1141.

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