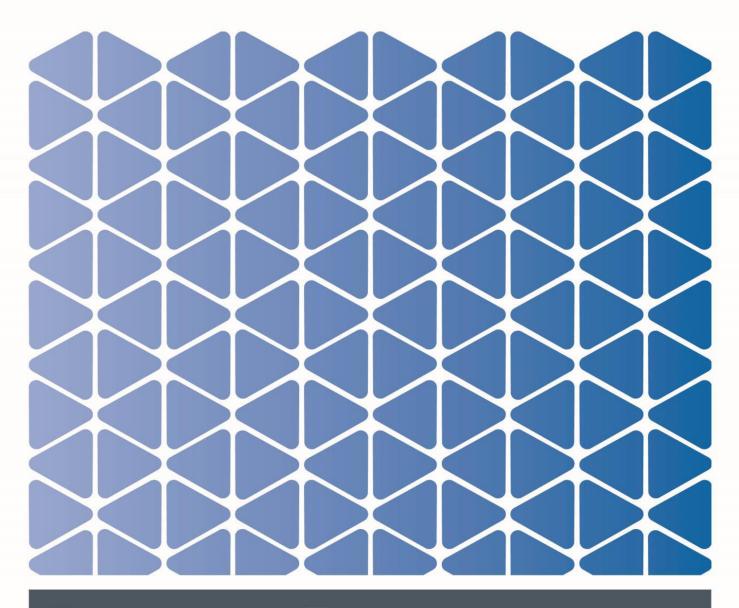




PATIENT INFORMATION

DIRECT BROW LIFT OPERATION (CORRECTION OF BROW PTOSIS)



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Introduction

'Brow Ptosis' means that the eyebrow area is drooping low. A low brow position may lead to excess skin causing a 'hooded' effect over the eye so that the upper part of the field of vision may be lost. We use the 'Direct Brow Lift' operation to try and restore a more normal appearance. The surgeon may also do an Upper Lid Blepharoplasty at the same time, in order to remove excess upper lid skin.

What does surgery involve?

The operation is usually performed under local anaesthetic, which means we give injections around the upper part of the face to make it numb. The operation is a day-case procedure, which means that you would not have to stay in hospital overnight.

What should I expect after surgery?

A firm pressure dressing (bandage) will be applied at the end of the operation in order to reduce swelling and pain. This dressing covers the eye and if we treat both sides of the face during the same operation, we usually only apply the dressing to one side so that you can still see. It is best to leave the dressing in place overnight.

- In the first few days there is usually significant bruising, tenderness and swelling of the eyelids and cheeks. Bruising sometimes spreads from one side of the face to the other, or spreads down to the neck.
- The eyelids may be difficult to open and / or difficult to close.
- The vision may be blurred.
- There will be stitches in the skin; these are not absorbable and so will need to be removed 10 to 14 days after surgery.

What would I need to do when recovering after surgery?

- Take regular simple painkillers, such as paracetamol (1g 4 times daily).
- Make a cold compress using a bag of frozen peas or an ice pack wrapped in a clean pillowcase or tea towel. Apply the cold compress for 10 minutes, 5 times daily for 3 days. You should apply the cold compress to an eye even while the eye still has a dressing over it.
- Remove the dressing about 24 hours after surgery.
- During the night, use extra pillows to raise your head above chest level, to try and limit the swelling.
- Clean your face using a clean, damp flannel or damp cotton wool pads. Do not put your face under water in a basin or bath. Do not shower your face.

What are the risks of surgery?

- Bleeding if you have severe pain after surgery, you should seek immediate help as this could be due to bleeding causing increased pressure within the orbit (eye socket). This might require emergency treatment.
- Infection.
- Your eyes might not close properly when you blink this might mean you would need to take lubricant eye drops during the daytime, possibly for many years.
- Your eyes might not close properly when you are asleep this might mean you would need to take lubricant eye ointment before sleep, possibly for many years.
- Numbness of the forehead.
- Asymmetry (difference in appearance between right and left sides).
- Need for further surgery.
- Permanent loss of vision (this is rare).

Do I have to have surgery?

No, you could continue without an operation. However, brow ptosis is very unlikely to get better without surgery, and could gradually get worse. Loss of upper visual field could make you at risk of accidents such as banging your head on a low door frame, and if you have a driving license you could lose it.

If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

Opening times:

The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.

If you are unable to understand this leaflet, please communicate with a member of staff.