



The operation of eye-lids is classified as operation addressing the changes caused by ageing, being a radical removal of such symptoms with a highly efficient result. It is performed either as a separate performance just on the lower or upper eyelids, or simultaneously, depending on the local finding. If the whole face ageing symptoms should be solved, firstly a face and neck operation is made, shortly after then followed by the eyelid operation. A personal consultation with an experienced plastic surgeon is the very first and important step. A good precondition for successful operation performance is a good health condition determining an upper age limit for that operation.

At the plastic operation of eyelids, it is necessary to remove not only the skin excess, but also fat prolapses. At upper eye-lids, where the movement extent is larger than on the lower eyelids, big skin excesses occur sooner or later, they can be caused also by other factors – type of skin, tendencies to eyelid swelling (e. g. by allergic symptoms, kidney illness, however, most frequently by an inborn disposition) and fat bags prolapses especially in inner edges of upper eyelids.



Skin excess is rather scare in case of upper eyelids, however, if a lower eyelid skin fall occurs up to the face border, a surgical intervention is much more difficult. That is why it is necessary to visit a surgeon in time. A plastic operation removes fat prolapses in the whole width of the lower eyelid, keeps a natural tonus of the lower eyelid skin and does not create ugly eye bags.

Where there is no excessive skin on the lower eyelids but only puffy bags, these may be removed with laser-assisted surgery via the conjuction without any scars on the skin.

However, it should be noticed the soft mimic wrinkles on the lower eyelid and inner eye edge cannot be removed by the operation. They are caused by the usual mimic of face muscles at every person individually, and, in practice, they are permanent. They are removed using laser or injections /botulotoxin, collagen, hyaluronan/.

The Operation and Post-operation Term

The operation is made under local anaesthesia. Complete anaesthesia is available following an agreement with the surgeon and anaesthesiologist in case the operation under local anaesthesia is not suitable. The price for operation is then increased by the price for general anaesthesia and hospitalisation, if this is the case, the patient can be released to home treatment in the evening or on the day following the operation.

Sections are conducted by the upper eyelids in the eyelid bend line, about 1.5 cm behind the outer angle, at lower eyelids, just below the lashes.

Eyelid swellings and subcuticular blood suffusions are common post-operation symptoms. In the period until the removal of stitches, a rest regime and careful cold compresses with elastic compression are recommended. **The stitches are removed on the 6th day after the operation**, and we recommend to continue to apply compresses over night for about further ten or fourteen days. Once the scars have healed perfectly, which is about **two weeks after the eyelid surgery**, **you should massage the scars**. Perform so-called pressure massages, that is, place your finger on the scar, push for five to ten seconds and repeat, massaging the entire scar. The scars will gradually soften and become light. Massages significantly speed up the healing process.

Patients can return to normal life regime after seven days from the operation, after 14 days they can start to apply usual cosmetics including make-up. A patient can return back to sports and physical load after 4 weeks.

The data presented is based on a common post-operation course. However, a recovery is an individual process depending not only on healing abilities of every individual body, but also on every patient's conscientiousness. The patient is expected to set such conditions for a period of several days after her operation to be able, in case of any subjective problems or complication, to come as soon as possible for examination to our department. A positive operation result and mutual satisfaction is in your interest as well as in ours. Mutual trust and co-operation of the patient with the surgeon is a vital precondition.