

## **INFORMATION SHEET REGARDING**

### **FACE LIFTS**

#### **THE AIM OF A FACE LIFT**

The face lift should tighten up the skin of the cheeks and neck (but not the skin around the mouth). This is done by tightening the deeper layer in the face and the removal of skin in front of and behind the ears.

The aim is to enhance somebody's appearance to make them look younger, to make them "look good," or to make them appear healthier. It should not produce a tight mask-like looking face, but should keep the natural animated appearance.

#### **THE AGING EFFECTS OF THE FACE AND WHY A FACE LIFT MAY BE NEEDED**

The face is made up of layers, as in any other part of the body. Bone, muscle, fascia, fat and skin. As we age the muscles lose their tone. The layer known as the fascia, which holds or packages everything together, slackens. The fat tends to droop down and accumulates near the jowls and skin loses its elasticity. Deep wrinkles and folds appear because of the disappearance of or redistribution of the fat. The surface texture of the skin also changes and fine wrinkles appear due to changes in the collagen structure of the skin. The water content and the ability of the skin to repair itself changes with age.

#### **WHAT IS DONE IN A FACE LIFT**

The skin is lifted off the muscles and fascia and then pulled upwards and backwards. The spare fat is sucked away where it has accumulated over the jaw in the jowl region and in the neck. The fascia underneath the skin is also tightened up. (The Americans call this the "SMAS Layer" which means the "superficial musculo-aponeurotic system").

The face is lifted in two layers, one deep and one superficial. It is possible to tighten the layer just over the cheek bones but this is more hazardous, technically difficult and can cause prolonged swelling.

#### **THE CUTS IN THE SKIN (INCISIONS)**

The incision should leave scars which are not noticeable in the long run. The usual cut starts up in the temple hair and then runs down to the front of the top of the ear; it then runs down the front of the ear where it joins the cheek; it then runs around the underside of the earlobe and then up the back of the ear to about two thirds of the way up the back. From there it runs across the bare skin between the ear and the hair and then across down and backwards within the hair to the back of the neck. There may also be a short cut underneath the front of the chin to help get rid of the fat there.

## **THE SCARS**

The cut in the temple hair leaves a narrow but hairless scar. It is visible if the scar stretches after the operation, especially if the hair is rather thin and fine. In the vast majority of people, however, it is not noticeable.

The cut in front of the ear leaves an inconspicuous scar in nearly everybody and this scar is the one which settles down most quickly. The cut around the earlobe is also seldom noticeable.

The scar behind the ear is usually narrow and trouble free, but in a small number of people can become rather swollen and itchy (hypertrophic). Occasionally the scar behind the ear needs treatment after the operation, such as the application of special ointments to make it less itchy or even injections occasionally.

The most obvious of all the scars following a face lift is the short scar in the hairless skin on the back of the upper part of the ear. This scar can be seen by your hairdresser or by other people, if you choose to wear your hair up. It isn't glaringly obvious, but it will certainly be noticeable for the first 2 to 3 months after a face lift. In general, therefore, it is sensible to wear your hair down for 3 months or so after the operation if you don't want the scar noticed.

The scar underneath the chin is usually difficult to see right from the start and very rarely causes any trouble at all.

## **THE FIRST CONSULTATION**

It is often worthwhile having more than one consultation when planning a face lift. It is very difficult for you to take in everything that you are told by the Plastic Surgeon and you need time to make your own plans about the timing of the operation. It is not a good idea to make these plans in a hurry until you have absorbed all the relevant information. I recommend that

**the first consultation should be one in which the basic outline of the operation is explained and photographs are shown so that you have a clear idea in your mind what sort of improvement is achieved by a face lift in someone of your age. You can then arrange a second consultation in which the details of the information sheet are gone through carefully and you can make any comments or ask questions as appropriate. It is important for the Surgeon to know whether or not you want cosmetic surgery to your eyelids or forehead as well. If this is done at the same time as the face lift, it will make the operation a lot longer.**

### **PLANNING THE OPERATION**

**Most people wanting a face lift need to plan this well in advance. The biggest problem about a face lift is that you should try to plan it so that it will not matter much if the bruising following the operation takes longer than usual to disappear. Unfortunately, the amount of visible bruising varies enormously from person to person. Provided you avoid taking Aspirin or medications with Aspirin-like action and if you know that you aren't particularly prone to bruising after minor injury, then it is reasonable to assume that nearly all bruising will have disappeared within 3 weeks of the operation.**

**Lucky people will show hardly any bruising for the first 3 or 4 days and it will then come out in the neck and cheeks and disappear within another few days.**

**Unlucky people bruise straightaway and bruising may remain visible for up to a month or occasionally longer. By bruising one means bluish or blackish or purple colour in the skin which eventually turns yellow and then disappears.**

**Bruising of itself is painless and won't affect the long-term appearance of the face or the neck. It is merely a nuisance. Once the worst of it has disappeared it can be covered by thick make-up. I have known some patients who have ventured out from their homes to do essential shopping by wearing dark glasses, thick make-up and a scarf within 3 days of the operation.**

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**However, most people choose to stay indoors at home for a week or so first and then come out only so that they can go to hospital to see the Consultant and have a hair wash and removal of stitches.**

### **THE COST OF THE OPERATION**

**The cost will depend upon several factors, such as whether you have other surgery done at the same time, how long you spend in hospital and how much the Surgeon and Anaesthetist charge. The hospital fee includes the cost of the operating theatre and the use of a private room for as many days and nights as you choose. Most people need only one night in hospital,**

although many prefer to reassurance of spending 2 nights in hospital. Face lift surgery is never covered by medical insurance, but the hospital usually arranges it on a “fixed cost basis” so that, if you develop an unexpected medical complication and have to stay in longer than expected, you will not have to pay extra.

## **POSSIBLE COMPLICATIONS**

There are 2 main groups of complications which you need to know about.

- 1) The complications which can occur after any operation.
  - a. Infection (in the face).
  - b. Haemorrhage (bleeding during or after the operation).
  - c. Deep Vein Thrombosis and Pulmonary Embolism.
  - d. Anaesthetic complications, such as chest infection.
  
- 2) The complications which can occur specifically from a face lift.
  - a. Bleeding and haematoma.
  - b. Nerve injury.
  - c. Skin damage.
  - d. Problems of wound healing and scars.

It is normal for there to be bruising and swelling in the face, neck and behind the ears and so these are not considered to be complications but simply part of the natural consequences of the operation.

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## **COMPLICATIONS WHICH OCCUR AFTER ANY OPERATION**

### **Infection**

Infection in the face is very rare fortunately, but if you have a septic spot on your face or neck it increases the risk of you developing infection after a face lift so it would be sensible for you to have a dose of antibiotic just before the operation.

### **Bleeding**

Bleeding, if it occurs, is never life-threatening after a face lift because the amount of bleeding is never very great. It can, nevertheless, pose considerable technical problems from the point of view of the success of the operation. If you bruise very easily, or are taking medicines containing Aspirin or a drug which acts like Aspirin, the amount you bleed or lose during the operation can be very difficult to control.

Under normal circumstances blood will clot within 2 or 3 minutes, but it can take a lot longer if you have taken any Aspirin during the period of 3 weeks before the operation. This effect can be brought about by taking only one tablet.

Therefore, please stop taking any Aspirin or Aspirin containing drug at least a month before any planned face lift. (Ask the secretary for a list of medicines to avoid if you are in any doubt).

### **Deep Vein Thrombosis**

Deep vein thrombosis means a blood clot in the larger veins deep inside the leg. A thrombosis can cause pain and swelling in the leg and can endanger life because if the clot breaks away in the vein, it can pass up to the heart and lungs and interfere with their function (this is a pulmonary embolism). Deep vein thrombosis forms as the result of reduced flow of blood in the legs during the anaesthetic and during the recovery period afterwards. Certain patients are at much higher risk than others. Patients over the age of 50 or patients who have had a history of a previous thrombosis or those women taking the contraceptive pill or hormone replacement should have special measures taken during the operation to prevent thrombosis. These measures are usually either the taking of a very low dose of Warfarin before, during and after surgery, or wearing special tight stockings during and after surgery, or having special pneumatic leggings during the operation.

### **Anaesthetic Problems**

Anaesthetic problems are fortunately very rare. You will talk to the Anaesthetist before your operation and so will have a chance to discuss any worries you may have about the anaesthetic. In the UK most face lifts are done under general anaesthetic, although it is possible to do a face lift under local anaesthetic. Most patients, however, prefer to be asleep. If a general anaesthetic is known to be hazardous for you this must be discussed very carefully in the planning stage.

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The type of general anaesthetic you would receive is one designed to minimise the risk of you feeling sick afterwards. We don't want you to retch or to feel sick after the operation because this makes it much more likely that you will bleed in the face and develop the problem of haematoma (swelling in the face due to a collection of blood underneath the skin).

The risk of chest infection after a face lift is very small indeed provided you haven't got a cough or a cold prior to the operation. If you are suffering from a cough or a cold, it is wise to delay the operation. If you have a chronic chest problem, such as bronchitis or asthma, this needs to be discussed in the planning stage and with the Anaesthetist immediately before the operation. It may be sensible for you to have an antibiotic to prevent infection.

## **COMPLICATIONS SPECIFIC TO FACE LIFTING**

### **Bleeding**

When the operation is over one hopes that none of the many blood vessels which have been cut underneath the skin will start to bleed again. The Surgeon spends a great deal of time and effort in trying to seal off all the blood vessels which have been cut during the operation.

Unfortunately, many tiny vessels often do bleed a small amount but usually the amount of bleeding is so small that it causes a slight bruise which is hardly noticeable. However, small collections of blood the size of a pea will develop under the skin in about 10% of patients

undergoing a face lift. These pea-size swellings often occur in more than one place. They aren't immediately visible when the bandages are removed on the day after a face lift, nor are they necessarily feelable, but they become visible and feelable a couple of days after the operation as the immediate swelling disappears. They can often be massaged away quite quickly and don't need any special treatment. They simply disperse by themselves. Occasionally larger ones take a bit longer to disperse.

Larger collections of blood clots underneath the skin can occur and these are at first quite firm and rigid and then after about 7 to 10 days become soft and fluid. It may be sensible to get rid of the fluid in the swelling by sucking out the blood through a fine needle. This is usually completely painless and speeds up the process of getting rid of the bruise.

The most serious form of bleeding, however, is a large collection of blood or haematoma appearing soon after the operation (within half an hour to 24 hours after the operation). This problem occurs in about 1 in 20 people, ie there is a 5% risk of you having this problem.

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A large swelling such as this needs to be treated by taking out some of the stitches and removing the blood clot straightaway. It is usually best to do this in the operating theatre and so a second anaesthetic may be wise if the haematoma stretches the skin and causes pain and this is probably what will alert you, the Nurse and the Surgeon to the possibility of a haematoma.

Some pain is usual after the operation and is usually located behind the ears and in the upper neck. However, haematoma pain is usually one-sided and more severe and not controllable by simple pain-killers, such as Paracetamol tablets.

If you have a pain much worse on one side of the neck than the other you must call a Nurse straightaway. She will assess the problem and if necessary call the Surgeon to come and examine you.

### **Nerve Injuries**

There are 2 main types of nerves in the face. There are those which are responsible for feeling in the skin and the other type produce movement of muscle.

The nerves which control feeling in the skin are always cut in the face lift and so the skin of the cheek which has been lifted will be numb immediately after the operation. So when you touch your cheek and neck it will feel peculiar as though it is no longer part of you. This shouldn't trouble you and it certainly won't hurt in any way and most of it will recover over the following few months after the operation.

In some people the feeling comes back more quickly than in others. In a very few people some feeling never recovers completely, so that there is a patch of skin just in front of the ear which will always feel slightly different. The skin of the earlobe and the lower half of the ear has its own special nerve. This is called "The Greater Auricular Nerve."

It runs up the side of the neck towards the earlobe just underneath the skin surface and unfortunately can be damaged rather easily when one lifts the skin off the muscles and the fat

of the neck. If the nerve is stretched or caught by a stitch accidentally it always recovers from this, but if it is cut it seldom recovers completely and the earlobe can remain numb.

It is very unusual indeed for the upper half of the ear to lose feeling as a result of a face lift because the nerves to this part are seldom damaged. The skin around the lips and nose hardly ever lose feeling in a face lift because the nerves to these parts are not cut in the operation.

Muscle movement in the face is controlled by one main nerve called the “7<sup>th</sup> cranial nerve” (or facial nerve). It has many branches which spread out like the branches of a tree from a central point deep below the earlobe on each side.

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This main nerve is very very rarely damaged in a face lift and so the risk of paralysis of the face as a result of a face lift is minute (perhaps less than 1 in 1,000). If it were to occur it would almost certainly be only temporary and would probably be the result of a rather large dose of local anaesthetic into the area.

The branches of the main nerve run along the surface of the muscles and so there is a theoretical risk that they could be damaged if one lifts the skin with too much fat, ie if one cuts slightly too deeply underneath the fat. Fortunately, most of the muscles of the face are served by 2 or 3 branches and so even if one branch is cut the muscle still works quite well. So it is very unusual to suffer any permanent muscle weakness after a face lift. If weakness does appear in the first few days after the operation it nearly always recovers within a few days or a week or so.

The nerves which seem to be most vulnerable are those responsible for fine movement of the lips. I have known of 2 patients of my own who have experienced a sense of weakness in the lips for a few days after the operation, but I am pleased to say that both recovered fully.

### **Skin Damage**

The success of a face lift depends upon tightening up the loose skin of the face. One has to separate the links between the skin and the face tissues underneath to achieve a long lasting tightening. These links provide the blood supply to the skin to keep it alive. So the amount of tightening has to be a compromise between pulling the skin too tightly risking skin death and leaving the skin too slack to ensure that it survives.

The quality of skin in the face varies enormously. Some people’s skin is elastic and supple and tolerates a great deal of pull. Other people have weather-beaten, wrinkled, leathery, inelastic skin which cannot stretch much. Tightening of the latter type of skin may be effective in flattening out wrinkles at first, but it is much more likely that this type of skin will slacken very quickly because of the lack of elasticity. The skin of long-term smokers is often less elastic than skin of non-smokers and the risk of skin damage is much higher in smokers.

Smokers must give up smoking 2 weeks before a face lift operation and should not resume it for at least 10 days afterwards. The reason for this is that the Nicotine in the smoke causes the tiny blood vessels in the skin to narrow and to limit the amount of oxygen being supplied to the skin.

If the blood vessels have been narrowed by the tightening process of the skin, the further insult of Nicotine will reduce the oxygen to dangerously low levels. It is therefore vital that you

should not smoke after the operation. If the advice is ignored there is a much higher risk of poor healing of the skin and possibly even losing a patch of skin, particularly behind the ears.

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Smokers also have a much more irritable lung and are much more liable to cough during the anaesthetic and to cough in the recovery phase and this makes it much more likely that a smoker will develop a haematoma.

In summary, give up smoking if you possibly can if you want a face lift.

It is extremely unusual for the skin in front of the ear to be damaged at all, but it is quite common for the skin to suffer minor problems in healing behind the ear. This usually consists of prolonged scabbing and thickening of scars behind the ear. Once in a while a patient can lose a patch of skin behind the ear because the skin is rather delicate and simply doesn't tolerate the pull that has been applied to it. If there is a patch of skin which is lost it is not a disaster, but simply means that the patient is going to take a lot longer to heal up and there may be a larger scar than there would otherwise have been.

#### **GENERAL THINGS WHICH YOU CAN DO BEFORE THE OPERATION TO IMPROVE THE RESULT**

1. Stop smoking at least 2 weeks before the operation.
2. Do not take any Aspirin for at least a month before the operation.
3. Lose half a stone in weight if you can, especially if you are at all overweight. If you lose weight before the operation, the skin will be slightly slacker at the time of doing the operation and it therefore makes it possible to remove a little bit more skin. You can then put the weight back on again after the operation and this again tenses the skin very slightly more and improves the overall effect.
4. Some Surgeons recommend the use of Retin A (Retinova) for 3 or 4 months before the operation. Retin A has an irritant effect on the skin and causes it to shed its outer layers more rapidly than usual. This helps to reduce the fine wrinkles in the skin and so enhances the surface effects of the face lift. It is usually advisable to stop using Retin A 2 weeks before a face lift.

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## **THINGS TO DO IMMEDIATELY BEFORE THE OPERATION**

You should wash your hair, but don't perm it on the day before the operation. You must remove all make-up before coming to hospital and do not even apply any moisturiser to the face.

Remove all nail varnish before coming to the hospital. (The Anaesthetist needs to assess your blood circulation by examining your finger tips and toes during the operation).

## **PSYCHOLOGICAL ASPECTS**

It is normal to be nervous before having any operation and particularly before a cosmetic operation. It is reasonable to take a sleeping pill or some alcohol the night before, if this is likely to help you get some sleep. A face lift can be quite an emotional ordeal as well as a physical one and so it is sensible to confide in someone who can be with you and help you before and after the operation. One of the medications given during the operation (Dexamethasone) helps to reduce facial swelling, but also has a "pep-pill" effect of giving you an emotional boost. This lasts for about 48 hours and is useful in helping you to get through the operation. However, it can be followed by a day of the "blues" in which you are inexplicably tearful and sorry for yourself. However, you will recover quickly from it. Quite a lot of people don't experience this mood swing at all, but a few are affected quite badly.

After the operation you don't feel or look at your best. You may have a bandage around your head and your hair looks a mess.

It is sensible to have a supervised hair wash a day or so after the operation to clean you up and to restore your self-confidence to make you feel a lot better. This is often arranged easily at the hospital to be done by a Nurse at your convenience. Alternatively, you can get a friend or relative or your hairdresser to do it for you at home.

You should avoid the use of perm chemicals and hot hair dryers at this stage. The scalp skin is rather sensitive at this stage and the numb skin of your cheeks and neck cannot detect the heat of the hairdryer and so there is a slight risk of you burning yourself.

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## **EMOTIONAL EFFECTS OF A FACE LIFT**

Everyone is different in their inner thoughts about themselves and what people think about them vary enormously. Some people feel guilty about having cosmetic surgery, but others are secretly or overtly proud of it. Other people's reactions to you having a face lift can be

**sympathy, jealousy, horror, scorn, amusement, pleasure or complete indifference. You may feel any of these emotions yourself at one time or another.**

**When you have recovered physically from a face lift and got through the phase of bruising, tightness and discomfort you should notice the marked improvement in your appearance. You should look less tired and generally healthier. Many people, whom you have not seen for some time, will probably either make no comment at all or will say: "How nice to see you; how well you look. Have you had a holiday?" They probably won't say: "You look so good you must have had a face lift."**

### **WHAT HAPPENS IN HOSPITAL**

**Most people should come into hospital 1 to 2 hours before the operation. This gives time for the paperwork to be sorted out, for a final chat with the Surgeon and for a proper discussion with the Anaesthetist. You should also familiarise yourself with the layout of your hospital room and its facilities.**

**The Surgeon may want to make some "guide marks" on your face and neck with a pen marker and may want to shave away a small line of hair in the temple where the incision is to be made. The Surgeon may use some rubber bands to bunch the hair on the either side of this strip to stop it getting in the way of the surgery later.**

**A nurse will probably run through a check list of questions and will take your temperature and blood pressure.**

**Most hospitals insist upon patients wearing an identity bracelet around their wrist.**

**The Anaesthetist will have asked you about false teeth, crowns, braces, etc. It is usually best to leave your false teeth in your room just before you go to the operating theatre. In this way they won't get lost and can be put back in again as soon as you return to your room.**

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**You will be taken to the operating theatre on your bed where your identity will be rechecked. You will then be taken to the anaesthetic room where a small needle will be placed into a vein in the back of your hand or wrist. You will then be given the anaesthetic drugs which will help you to drift off to sleep.**

**You may dream during your operation, but you certainly won't wake up until the end of the operation.**

**The operation takes anything between 2 to 3 hours depending upon the difficulty of the operation. It may take a lot longer if you have your eyelids dealt with at the same time.**

**You wake up slowly at the end of the operation and go through a phase of slight confusion and not knowing what is happening to you and where you are. Your eyes may well be covered by light wet gauze pads which help to reduce any eyelid swelling. These can be removed at any time and you can simply ask the nurse to take them off if you want.**

**Some ointment may have been put into your eyes to protect them during the operation and this, of course, will blur your vision for an hour or 2. Nevertheless, it is reassuring for you to know that you can see after the operation.**

**When you have come round fully from your operation and both the Surgeon and the Anaesthetist are happy with your immediate recovery, you will be taken back to your room on your bed.**

**You will spend the rest of the day dozing or sleeping. Your neck will be stiff and the area behind your ears will feel rather tight and possibly painful.**

**You may well need some pain killing tablets or possibly an injection, but we avoid the use of very powerful injections which might run the risk of making you feel sick.**

**It is probably reasonable for you to have one visitor that day, but you won't feel well enough to see or be seen by anybody who isn't your nearest or dearest and you shouldn't engage in long conversations with anybody that day. You will be drowsy and won't want to talk much. You will be able to drink water or other soft drinks when you want to and can probably eat something later on that evening, provided that it is soft and doesn't need to be chewed. You will not be allowed to smoke at this stage.**

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**The nurse will come to check your progress at regular intervals and to measure your blood pressure and pulse. You should let her know if you have any worries or pains or other wants.**

**Some face lift patients manage to sleep through the night after their operation very easily but most people, unfortunately, don't manage this and have rather a restless and fitful sleep. It takes several days to get used to the tight strap-like feeling in your neck, but this eases over the week or so after the operation so that most people are less conscious of it after a week or so. Within 2 to 3 weeks they hardly think about it at all.**

**The morning after the operation you will probably feel quite well enough to get up and go to the lavatory and wash. The Surgeon will come to see you and remove the bandages to check for the amount of bruising to make sure that you are fit to return home. Some patients prefer**

to go without any dressing at this stage, but others like to have a dressing and bandage round their head.

One of the main difficulties you will experience is trying to sleep comfortably because you will find that if you lie on your side, the tenderness in your ear area will make it very uncomfortable for you to sleep with your head on one side and you may be forced to sleep on your back. Some people have told me that it is more comfortable, in fact, to go to sleep in a reclining chair with soft pillows on either side. Another recommendation I have heard, although not everybody confirms this, is that the pillow should be of a springy, sponge-like type rather than the traditional feather pillow type. You will be able to test this out while you are in hospital.

Before you leave hospital, make sure you have a supply of Paracetamol, Warfarin tablets if you have taken them before the operation, and any antibiotics if they are needed. You will be given some ointment to put onto the stitch line behind your ears and in front of the ears once or twice a day after the operation.

You should also make sure that you know the time and date of your next visit and the telephone number to contact the Surgeon if there are any problems.

When you get home you should rest for the first 2 to 3 days and try not to do too much. You should eat soft, non-chewy, non-crunchy foods and try not to talk very much. This is to avoid unnecessary jaw movements. Remember that you may have the “blues” after a couple of days, but this will clear up very quickly.

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You can wash your hair gently, as often as you like, after the operation but once every other day is usually enough.

The first lot of stitches are removed from the cheeks and eyelids on the fifth day. Most of the remaining stitches or clips are removed on or about the tenth day after surgery, although the timing of this is not critical. Some Surgeons favour the use of buried, dissolvable stitches in certain circumstances. These have the advantage that they don't need removal, but the disadvantage is that some occasionally irritate the skin 3 or 4 weeks after the operation. This is because they take this length of time to dissolve.

### **FOLLOW-UP CONSULTATIONS**

You will need to come back to see the Surgeon on at least 2 occasions for the removal of stitches and it is usually sensible to arrange to see him at monthly intervals for 3 or 4 months, to make sure there are no other serious problems. It is often worthwhile taking photographs

for review purposes about 1 to 2 months after the operation and these can then be compared with the pre-operative appearances.

**NB: It is important to realise that every patient is different and the severity and type of their problem may be different and there may be several possible ways of treating the condition.**

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#### **AFTER A FACE LIFT**

1. Expect swelling, puffy eyelids, tenderness and pain.
2. **REPORT:** Pain which is not controllable by ordinary painkillers or pain which is increasing, especially if associated with enlarging swelling.
3. Don't chew unless you have to (for about 5 to 6 days).
4. Don't massage your face for at least 5 days.
5. Wash your hair as often as you want to, but don't use any new shampoo; stick to the one you use normally.
6. Use a clean sponge or cotton bud to clean off the ointment along the stitch lines and reapply some new ointment sparingly, about once or twice a day.
7. Wear dark glasses/scarf if you want to go out to the shops while you are still bruised and swollen. If challenged, say you have had some dental treatment.

8. **Expect the bruising to last up to 3 weeks, but hope that most of it will be gone within 2 weeks.**
9. **Make sure you know Mr Henderson's telephone numbers:-**  
**Office: 0116 265 3043**  
**Mobile: 0797 164 3177**
10. **Start using make-up when eyelid stitches/face stitches have been removed, if you want to.**
11. **Small lumps under the cheek or neck skin may become noticeable as the swelling goes down after 4 or 5 days. Don't worry about these, but mention them to your Surgeon when you have your stitches removed. They are usually small blood clots under the skin which disperse quite rapidly.**
12. **The cheeks will be numb for several weeks. This is normal. Some numbness is permanent, but usually only in a small area in front of the ears.**