

MATTHEW POTTER

CHIN AUGMENTATION

Benefits

To alter the position of the chin. To either reduce or increase its profile in relation to the other facial parts or to decrease or increase its height. This improves harmony with other facial parts and improves the aesthetic profile.

Risks

1. Infection/wound break down. This is exceptionally rare within this operative area. The mouth heals well. Exceptionally rarely the bone moved can be come infected.
2. Pain (Mr Potter injects the area during the procedure with local anaesthetic to limit the post operative pain). You will be given oral pain killers for 3 days after the procedure.
3. Swelling/bruising - all post surgical wounds and sites will swell after the procedure - this should settle within a week if not less. Rarely the area may swell and this may take time to settle. You should avoid any coughing or straining during the early post operative course to minimise this.
4. Bleeding / haematoma - this is a collection of blood that can occur within the operative site that may well mean a return to theatre to remove the blood and stop any bleeding sites. This complication is rare.
5. Change in lip or overlying chin skin sensation. It is common to be left with altered sensation around the operative site. This should resolve with a few weeks. Occasionally patients are left with a numb part of the chin or lower lip which takes longer to return to its normal sensation.
6. Asymmetry.
7. Facial Palsy. This is an exceptionally rare complication caused by a weakness of the nerves that supply the muscles of the lower lip. This is often due to a pulling on the nerve and associated inflammation. This should settle within a few weeks but could take longer.
8. Clots in the legs and or lungs (deep vein thrombosis, DVT and pulmonary embolus, PE). Any operation runs the risk of such clots. You will be given specialist stockings to wear over the course of your inpatient stay and injections to thin the blood to decrease this risk. This is a rare complication.
9. Over/ underdone.
10. Redness/bruising. This is expected and should settle at a week.
11. Further procedures - if there are any imperfections or adjustments to be made Mr Potter and the hospitals in which he practices are more than happy to facilitate (where appropriate) any further surgery to be sure you are happy with your final result.

The procedure

You will be admitted to the ward the day of your procedure where you will be seen by the anaesthetist and Mr Potter. Your face will be marked and you will have the opportunity to discuss the operation further if needed.

The procedure takes approximately 2-3 hours and is under General Anaesthesia with you asleep for the whole process.

All wounds are closed with dissolving sutures within the mouth/gum.

There are no post operative dressings or supportive garments. You will be given a soft diet whilst in hospital.

Inpatient course

You will recover on the ward for the post operative day and night.

There are no post operative dressings or supportive garments.

You will be given a soft diet whilst in hospital.

You are likely to be discharged after one night's stay in hospital. →

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On the first day following the procedure your wound sites will be checked.

You will be asked to shower the morning after the procedure.

Post-operative care

The jaw line will swell initially and worsen after two days. This will settle after a week.

You will need oral pain killers for a week.

You will be advised to shower and wash the area every day.

It is advised to sleep using three pillows and if possible facing up.

Most people leave two weeks after this procedure before returning to work.

Most patient undertake a softer diet initially after this procedure until the swelling and pain has reduced and the strength in the jaw returns

Post operative follow up

You will be reviewed at 7 days within your original hospital where the wounds and operative sites are checked. All sutures used will dissolve this may take up to a month.

Mr Potter will review you after two weeks to assess your progress and he will give you regular reviews until all has fully settled and healed.

Do's and Don'ts

You should only return to driving when you have the strength to perform an emergency manoeuvre.

You should maintain a soft diet that puts minimal strain on the bone until the pain and swelling subsides.