

MATTHEW POTTER

FACE / NECK LIFT

Benefits

To rejuvenate the face and neck by tightening the deeper structures within the face and volumising the face with lipofilling. This has the benefits of improving wrinkles within the facial skin as well as the removal of Jowls and the excess skin and tissue above and below the jaw line. It will increase the cheek volume, elevating the cheek and providing an harmonious rejuvenation.

Risks

1. Infection/wound break down. This is exceptionally rare within this operative area due to the beneficial large blood supply.
2. Scarring. These scars run from within the temple hair line to pass about the ear and then behind the ear to finish within the hair line behind the ear. The incisions about the ear will be placed within any present skin folds. The scars will be puckered but this will settle to flat scars after approximately a month. Abnormal lumpy or raised scarring can occur in some patients. This is rare.
3. 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.
4. 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 striking during the early post operative course to minimise this.
5. 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. At the time of the operation if the operative site is very oozy we may well insert drains to decrease the chance of this complication.
6. Change in skin sensation. It is common to be left with altered sensation around the operative site. This should resolve with time. Occasionally patients are left with a numb part of the ear which takes longer to return to its normal sensation.
7. Alteration in hair line. As the incisions pass into the hair line this can occur in front of the ear and behind the ear. This is rare.
8. Hair loss. Any sutures placed in hair bearing skin can cause a loss of hair around the suture line. Once the sutures have been removed and the wounds healed and recovered, hair growth often fully recovers.
9. Asymmetry.
10. Facial Palsy. This is an exceptionally rare complication caused by a weakness of the nerves that supply the muscles of the face. This may affect the muscles around the eye, those that produce a smile or those that depress the lip. When this does occur it often only lasts for a few weeks due to swelling subsiding about these nerves, Occasionally this may last for 6 months or even permanently.
11. 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.
12. Over/ under resection. With all aesthetic surgery Mr Potter is more likely to under-resect than over-resect the tissue. If underdone this is far more straight forward to correct than an over-resected area.
13. Redness/bruising. This is expected and should settle at a week.
14. 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 any further surgery to be sure you are happy with your final result.



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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 6-7 hours and is under General Anaesthesia with you asleep for the whole process.

All wounds are closed with sutures. These covered with an antibiotic ointment. This allows for ease of washing and wound care. There are no tapes or bandages applied to any facial wounds within the temple or around the ear. If there is a surgical site under the chin this is likely to have sutures used to close and this is simply dressed with skin coloured tape that peels off after a few days. This is designed to get wet and air dry the day after the procedure and every day from then on.

All wound edges will be slightly raised due to underlying deeper sutures. Such raised wound edges will flatten at about two to three weeks. This, long term, will give better scars. The areas in the leg used to get the fat will be closed with absorbable sutures if needed and dressed with skin coloured medical tape that is designed to be showered after a day.

Inpatient course

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

You are likely to be discharged after one or two night's stay in hospital. On the first day following the procedure your wound sites will be checked, and drains removed if used.

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

All wound tapes should get thoroughly washed and allowed to air dry.

Post-operative course

You should rest quietly for at least three days after the procedure. You will be given compression stockings to the legs whilst as an inpatient and during the first night after the operation you are likely to wear inflatable compression cuffs to the ankle/calf. You may well be given an injection of blood

thinning medication the day after the procedure and daily thereafter until discharge. Patients on average spend one to two nights with us in hospital.

You will be discharged with oral pain relief which on average is only needed for two - four days. This varies from patient to patient but normally consists of baseline Paracetamol 1g to be taken fastidiously four times per day. Break through pain is commonly controlled with Ibuprofen and or Codeine Phosphate.

Any tapes applied to the wounds will simply start to peel off after a few days and these can be trimmed at home with ease. These tapes are commonly applied to the incision that lies under the chin.

We will give you enough medicated moisturising lotion to apply to all other surgical sites. This is to be used twice daily for two weeks.

Return to work depends on your individual recovery and the work to you undertake. On average time off work varies from 2-4 weeks.

Post operative swelling normally peaks at 3 days.

You will be instructed to sleep flat on your back without a pillow

You should avoid food that is too salty or difficult to chew. You should abstain from alcohol and citrus drinks for 2 weeks if possible.

You should shower and shampoo the area from the first post operative day.

All sutures are removed at a week after the procedure and not later.

Areas of the scalp and the face are highly likely to be numb after the procedure and therefore one should be careful with shower water and hair dryers that could be too hot.

You should not "perm", tint, dye, highlight, colour or otherwise chemically treat hair for two weeks after the



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procedure. Hair curlers and curling irons must be used with care for several months to avoid any burning.

Return to social interaction

It is likely that you may return to work after 2-3 weeks following the procedure. Be wary of special occasions or important meetings booked soon after this period. You may well be able to undertake light work after 1-2 weeks depending on the degree of bruising and swelling.

It is likely to take 2-3 months to look good in a photograph. It is also likely that altered sensation and firmness should take 6-9 months to settle

You should not drive for 10 days at least following the procedure. You are able to drive once you can safely perform an emergency manoeuvre. This includes being able to suddenly turn the head and being off pain killers.

Post operative follow up

You will be reviewed at 7 days within your original hospital where the wounds and operative sites are checked and sutures removed. All sutures used will dissolve internally.

Mr Potter will review you after three 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 avoid straining being down and lifting for at least two weeks

You should avoid strenuous exercise for 6 weeks.

Dressings

We don't use any facial dressings for face lift patients other than a hat, scarf and sunglasses.