



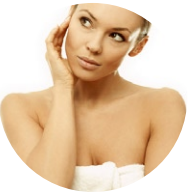
## *brow & forehead lift* *(endoscopic lift)*

The drooping or lowering of the eyebrows is frequently one of the earliest signs of aging. This is a result of skin laxity and fat loss around the brow, forehead and temple areas. Additionally, horizontal wrinkles and vertical frown lines between the brows can make you look angry and gloomy.



### *about browlift surgery*

The brow or forehead lift is the procedure that raises the eyebrows to give you a rejuvenated look and help you get rid of the angry one. It aims to elevate a brow lying in a low position, or to deal with cases that cannot be dealt with by Upper Blepharoplasty alone.



Here, at Surgical Art we recommend our patients the endoscopic technique as well as open techniques such as pretrichial incisions, as two of the most popular and less invasive techniques in cosmetic surgery.



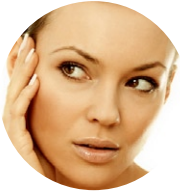
These approaches to eyebrow lifting have the additional benefit of also “lifting” the forehead and the upper lateral facial tissues. It is for this reason that these techniques are performed for both cosmetic and functional reasons.



The endoscopic approach accomplishes the eyebrow and forehead lifting through a series of five or six very small incisions just posterior to the hairline. Your surgeon will pass an endoscope/camera through the incisions to visualize and aid in the dissection. Instead of trimming a flap of tissue, the permanence of the lift is accomplished by various fixation techniques whereby the forehead flap is lifted superiorly and secured to the skull, usually with screws.

The pretrichial eyebrow and forehead lift involves placing an incision across the entire length of the forehead just in front of the hairline. Typically, the incision is carried laterally, either as a continuation in front of the hairline or as a continuation of the previous incision that extends posterior to the hairline and then inferiorly to the top of the ear. The scalp incision is full-thickness, and is typically carried down to or through the periostium.

Your surgeon will then undermine the forehead and eyebrow tissues and lifts them away. He will release deep attachments and advances the entire flap superiorly, then trims the excess tissue. This is followed by a layered closure of the wound.



The operation requires only a subcutaneous dissection that preserves the hair follicles; the hair grows through the incisions after just a few weeks.

Dr. Eleftheriou will utilize these techniques depending on the case. Treatments are customized to fit patients' needs.

## *your consultation*

First and foremost, you need to be in a good health state, and must have realistic expectations from the outcome of your surgery. Communicating well with your surgeon is crucial in reaching your goals. The first consultation is your chance to voice your desires, discuss your goals so that your surgeon can tell you what can realistically be achieved.

Your surgeon will address any concerns you might have, the risks associated with a brow lift, and the techniques and incision placements or methods that may be most appropriate for you. He will discuss with you all aspects of surgery, and if a brow lift only will rejuvenate your appearance. You may consider other procedures such as a fat grafting or a chemical peel for increased rejuvenating properties.

In case of excessive sagging skin all over the face and below the brow, your surgeon might suggest other rejuvenating procedures such as a face lift, platysmaplasty (neck lift) or blepharoplasty as beneficial.

## *preparing for surgery*

Now is your chance to talk to your surgeon about your goals. He will take a full medical history and will ask you about any allergies that you may have, disorders, past illnesses, if you are a smoker or on any medications. This includes vitamins, herbal supplements, and over the counter medications.

Before your surgery:

- You must stop eating and drinking 6 hours before your surgery appointment.
- You should not take aspirin or anti-inflammatory medicines such as ibuprofen for 3 weeks before surgery.
- Avoid alcoholic beverages for 24 hours prior to surgery.
- Stop or reduce smoking for at least 2 weeks prior and after surgery.
- You must arrange for someone to take you home and make sure you are comfortable.
- You must also arrange for a responsible adult to stay with you for the first 24 hours following surgery.



- Wear loose and comfortable clothing on the day of surgery.
- Do not wear any contact lenses, jewellery, makeup or nail polish.
- Please bring your prescription medication (pain medication, nausea medication, antibiotics, etc) with you on the day of surgery.

## *your operation*

A brow lift normally takes between 1 and 2 hours to perform, depending upon the technique. Your surgeon may choose to perform the operation in conjunction with a face lift, eyelid surgery or by itself. Most brow lift procedures are performed under “twilight” and local anesthesia.

Your surgeon will mark the incision placement areas. He will then separate or follow along natural lines of cleavage the tissues from your underlying structure, depending upon the type of lift and desired results. This is like separating the skin and muscle from your skull. He will then proceed to both trim excess, loose skin and suction or remove excess fat in the brow line manually or possibly atrophied muscle. Underlying structures are then suspended by permanent sutures or barbs if you opted for this procedure.

The surgeon will then lift your skin to the desired level of lift after trimming about 1 to 3 cm of skin, and either apply a tissue glue or more than likely sutures and staples. Your surgeon will then apply a dressing to your face and head to protect your wounds, and keep the tissue in the proper place during recovery.

After you wake up, your forehead and scalp may feel tight, hot and quite tender as the anesthesia wears off. If you feel any discomfort you can take a pain reliever which you will more than likely have been asked to bring with you.

You should not be driving home by yourself, as you will not be able to see.

## *recovery*

The first two weeks after your surgery, you will need to rest and take it easy.

- Keep your head elevated for several days.
- Take your antibiotics on time to avoid infection.
- Use cold compresses to keep swelling and bruising to a minimum.

Any discomfort should be alleviated by your prescribed pain medication if you have excessive pain, redness, pus or other symptoms that do not appear normal, contact your surgeon immediately.



Your forehead will look even more swollen in the first 3 days. There may be a lot of bruising, but this will go away, as well. Bruising and swelling are a normal occurrence in most surgeries, as they are part of the natural healing process.

Your stitches will be removed after 7 days. Your scalp takes longer to heal. It will be numb - don't be afraid or worried, this is quite normal, remember your nerves and all have been partially separated from their source.

Even though you may feel better, you must take it easy for the first 3 weeks.

- Be careful not to bend over or lift heavy objects.
- Do not raise your blood pressure for at least 3 weeks as this could cause internal bleeding at your treatment area.
- Do not participate in contact sports for at least 6 to 8 weeks, although ask your surgeon what he recommends specifically.
- Please continue to avoid alcohol and aspirin containing products for a few weeks as this could cause bleeding. Also you are going to be bruised and swollen for quite some time.

Gradually you will notice a change in your eyebrow's appearance, odd sensations of tightness, tingling, the sporadic sharp pain, or pulling, burning, and cold sensations. These usually subside within the first few weeks. Your swelling will fade away as well, revealing a more rejuvenated appearance.

## *risks and complications*

Knowledge of the path of the frontal branch of the facial nerve and avoidance of excessive dissection in its pathway minimizes the occurrence of complications. The key is to develop and maintain a plane of dissection deep to the nerve. The most likely areas of damage are in the temporal regions where the facial nerve travels in the superficial temporal fat pad. By developing and maintaining a plane of dissection just superficial to the deep temporal fascia, your surgeon will minimize the risk of nerve damage.

Of course there is some risk regarding anesthesia and complications because of it, such as allergic reactions. Other risks may be hematoma, seroma, asymmetry, infection, nerve damage, and tissue necrosis.

A very common after effect is temporary alopecia - loss of hair, along the incision lines and even hair of the head in general or facial hair, such as eyelashes or eyebrows sometimes because of the anesthesia and medications such as antibiotics and pain relievers.



There may also be some degree of temporary sensation loss with each technique because the nerve's branches are transected in the full-thickness procedures, and stretched or bruised during the endoscopic ones. Postoperatively, your surgeon will instruct you to be very careful with hot hair dryers and curling irons, since they could severely burn your scalp without you feeling it.

The aesthetic complications are perhaps the most difficult to avoid and manage, but they need not be. Preoperatively, your surgeon will discuss exam findings as well as postoperative expectations. He will make you aware of any facial asymmetries that you might have without you even realizing. Simply pointing them out before a lifting procedure can help you understand why you may see them after surgery. Of course, the procedure will focus on the correction of any existing asymmetry, as well as the restoration of a more youthful appearance.

There is also a risk of failure where the sagging brow returns to its prior position, or lapses. The risk of brow asymmetry is a reality, but very low. Usually, a minor touch up can be performed with local or regional anesthesia, in-office.