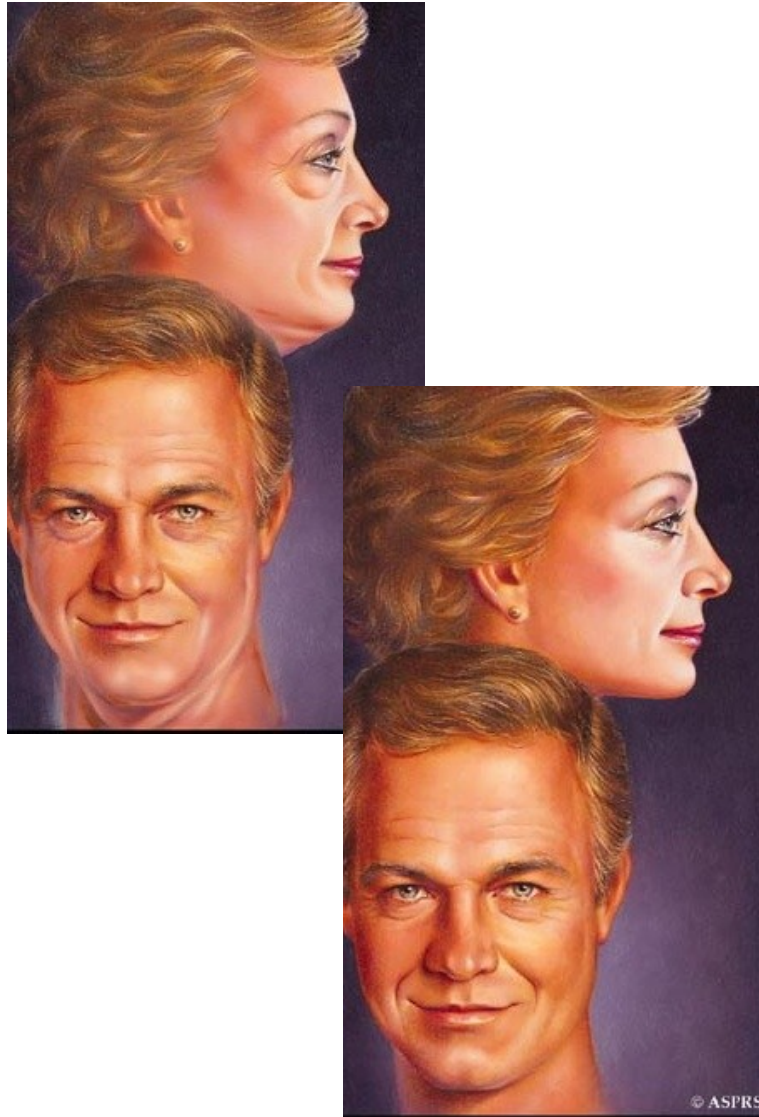


# Facelift Surgery



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## Facelift surgery: General information

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Facelift surgery is very popular, with almost 138,000 procedures performed by plastic surgeons in 2006. A person might undergo a facelift procedure for a number of reasons. Frequently the “jowls” are concerning. Sometimes the neck doesn’t look right, or the line that runs from the edge of the nose to the corner of the mouth is too deep. Whatever the reason, a facelift can enhance the appearance of the face and make it appear refreshed and rested.

This booklet is designed to provide you with information about facelift surgery. It will describe the general technique of the procedure, outline some of the risks involved, and provide information about what to expect after surgery. The booklet is not intended to take the place of a formal consultation with Dr. Kunkel. The consultation is the best way to determine what may work best for you.

Some people want to have other procedures performed at the same time as an rhinoplasty. For instance, procedures to enhance the appearance of the eyelids and forehead may be done during the operation. If you have given consideration to these or other procedures, the consultation is a good time to learn more about them. On occasion an additional office visit may be necessary to help provide you with a thorough evaluation and discussion about additional procedures.

Our goal today is to provide you with enough information about facelift surgery that you will have a thorough understanding of the procedure, and you will be able to make good decisions that work well for you. Feel free to contact our office at any time if you find that you have additional questions!

The drawings and pictures in this booklet are used to help illustrate general ideas about facelift surgery. They do not illustrate *exactly* what may be required for *you*. The diagrams and illustrations are not intended to imply or guarantee a particular result, but rather are provided to help give you a better overall understanding about facelift surgery.

## Facelift surgery: How is it done?

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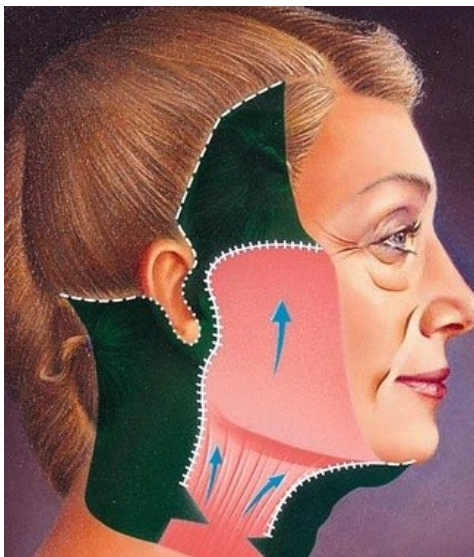
The first step is to identify the areas that bother the patient the most. One person may not like her jowls, while another may be unhappy with her jowls, loose skin, and the deep lines that run between her nose and mouth. One of the most important things you can do to obtain a great result is to communicate clearly the issues that are most concerning to you.

The drawings below and on page 3 represent some of the operative steps in facelift surgery. Other steps may be involved, depending on your desires and your physical attributes. Dr. Kunkel will discuss this with you during your consultation.



The incisions used for a facelift vary from person to person. In the drawing to the left, incisions are indicated by the dotted white lines. Note that her incisions go into the hair above the ear and behind the ear. In many cases today the incision goes directly along the hairline in front of the ear and behind the ear as well. If the neck is going to be addressed, often an incision is placed just below the jaw line centrally in the neck.

After making the incisions, the skin is then elevated off of the underlying tissues. The area elevated is indicated in green in the drawing to the left.



A significant amount of the work performed during a facelift is actually accomplished on the tissues that lie below the skin. In the drawing to the left, these tissues are indicated by the pink color. This layer is frequently referred to as the SMAS. Sometimes this tissue is moved up and back and tightened, while other times part of this tissue is removed.

Altering the shape and/or position of the SMAS can help provide major changes in the results of a facelift, and can add to the duration of the results as well.

## Facelift surgery: How is it done? (continued)

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After repositioning the SMAS, the redundant skin is then pulled up and removed. The blue arrows in the drawing to the left represent the direction the skin is pulled to tighten the skin. The green area represents the skin that is removed.



The closed facelift incision is illustrated in the drawing to the left. The actual scars that result from a facelift depend on a number of factors. The drawings on this page and page 2 show one pattern of incisions; the exact incisions will vary depending on a person's specific findings and desires. The scars, while usually inconspicuous, could be visible to some people (hair dressers, for example). The more skin that is removed the tighter the closure is, which places more tension on the skin, with resulting stress on the incision and potentially a more visible scar.

## Facelift surgery: the risks

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Facelift surgery is typically accomplished safely, and patients tend to be extremely happy with their results. However, problems may arise, and you should be aware of them. Some of the potential complications are listed below.

**Bruising**– Most people do not have too much bruising. The bruising that occurs is usually most noticeable in the lower neck. This resolves in about 3 or 4 weeks.

**Numbness**– Your facial skin will probably be numb for a few weeks. It is possible that you could lose some of the feeling on part of the skin permanently. The scars will always be numb.

**Asymmetry**– Most people have some asymmetries between the right and left sides of the face without ever undergoing any type of surgery. The right and left sides of the face may not look exactly symmetrical after facelift surgery.

**Deep vein thrombosis**– Also known as blood clots. These may develop in a leg and could require hospitalization and anticoagulation for treatment. Clots may move to a lung, and this could be a fatal event. Deep vein thrombosis is rare after facelift surgery.

**Bleeding**– You could have problems with bleeding after surgery, which could result in a localized collection of blood called a hematoma. If this occurs, you could require more surgery to drain or remove the hematoma. This is an uncommon event after facelift surgery. Do not take aspirin for 7-10 days before surgery and about 7 days after surgery (aspirin makes you bleed more easily).

**Infection**–A possibility with any type of surgery, infection is rare in facelift surgery. If infection occurs, more surgery may be necessary or you may require intravenous antibiotics.

**Failure to achieve your desired goals**– It is possible that the results of the facelift do not meet your expectations. The skin could look tighter than you thought, or perhaps not as tight as you want. The scars could be more visible than you desire.

**Injury to nerves**–It is possible to have temporary or permanent injury to nerves that allow movement (motor nerves) or sensation (sensory nerves) of parts of the face and neck. If a motor nerve is injured this could result in an inability to elevate an eyebrow, for instance, or to smile symmetrically. If a sensory nerve is injured, this could result in a loss of feeling over part of the cheek or around the ear, and it could result in long-term pain at the site of the injury. While permanent injury to nerves is not common with facelift surgery, it is a remote possibility.

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### Revision Surgery Policy

While significant problems are not common after facelift or blepharoplasty surgery, they may occur. If you undergo a facelift operation by Dr. Kunkel and experience some type of problem that requires additional surgery, Dr. Kunkel will not charge for his services for 10 months after the original operation. However, you will be responsible for the costs of the anesthesia and the surgical facility that may be required for revision surgery. Additionally, it is probably best to wait *at least* 4-6 months after the original surgery before proceeding with revision surgery. This allows some resolution of the swelling and softening of the skin before undergoing the revision.

## **What you need to know:**

### **The day of surgery and the first few days after surgery**

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**The facility-**facelift surgery is usually performed at an ambulatory surgery center or hospital. The facility will have a waiting area for anyone who wants to stay there during your surgery.

Each facility has its own policy about when they want the patient to arrive before surgery. Typically the facility will want you to arrive 1½ to 2 hours before surgery. Arriving this much before the scheduled surgical start time allows you to be evaluated by the nursing staff and the anesthesia staff. It also allows them to do any appropriate lab work (pregnancy test, for example) and still have the operation start on time.

**What to wear to surgery-**On the evening before surgery, remove any fingernail polish. On the day of surgery, do not apply make-up or any type of hairspray or mousse. If you wear contacts, leave them at home and wear glasses instead. Do not take any jewelry to the surgical facility. You should wear a shirt or blouse that buttons or zips up the front; do not wear a pull-over shirt or sweater.

**Anesthesia-**Dr. Kunkel performs facelift surgery with the patient undergoing general anesthesia. You will be put to sleep for the operation. An anesthesiologist with or without a nurse anesthetist will be take care of your anesthesia.

**Length of surgery-**It usually takes about 4-5 hours for a facelift by Dr. Kunkel. Sometimes it may take a little longer. Actual anesthesia time (being put to sleep, keeping you asleep, and waking you up) may be around 4½ to 5½ hours.

**Overnight stay?**-Many people find the convenience of staying overnight at the surgical facility to be well worth the additional cost. It may be a little uncomfortable waking up from the anesthesia, feeling tired and “groggy”, possibly nauseated, and having some general discomfort. The nursing staff is available for those who stay overnight to provide intravenous pain medication and nausea medication, and they can get you up and start moving you around.

If you elect to go home on the day of your surgery, you will need someone to drive you home and stay with you overnight.

**Keep your head elevated-**For about a week after surgery it is a good idea to try to keep your head elevated at night. However, you do not want to use pillows that bend your head forward at the neck. Ideally the neck is kept straight or even a little extended. Placing several pillows behind your lower and upper back and head will help elevate your head without bending the neck forward. Some people sleep in a recliner for a few days.

**Wound care-**You should gently wash the facial and neck incision sites with a mild soap and water once or twice daily, then apply an antibiotic ointment like Neosporin, starting one or two days after surgery. If any areas of dried blood accumulate, you might consider using a combination solution containing 1 part water to one part peroxide to gently remove the blood, then apply the antibiotic ointment.

**The drains-**You will probably have one or two drains. The nursing staff will show you how to use these before you leave the facility. Empty the drains twice daily. The drains will be removed 1 to 3 days after surgery.

**What to eat/drink-**Do not eat or drink anything beginning midnight the evening before your surgery. After your surgery, start with clear liquids (Sprite, Gatorade for instance). If that goes well, you

## The day of surgery and the first few days after (continued)

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might try some saltine crackers or a light salad (no creamy dressings). Starting the next day you can eat or drink whatever you want, but it is advisable to go slowly with this. Milk and citrus products frequently make nausea worse, so you should probably avoid those for about 24 hours after surgery.

**Medications**-In most cases two medications are prescribed. The antibiotic (usually cephalexin or Zithromax) should be taken beginning the evening of your surgery. A narcotic pain medication is prescribed (usually hydrocodone or propoxyphene) and may be taken every 4 to 6 hours as needed. However, narcotics may cause or increase nausea, so it is best to stop taking these as soon as possible. You should take acetaminophen (Tylenol) or ibuprofen (Advil, Motrin) instead of the narcotic as soon as you think this will provide adequate relief.

**Activity**-You should sit up in a chair and walk a little on the evening of your surgery. On the first day after surgery you should walk even more, then progressively increase your activity level as you feel more comfortable. Do not lean over, and do not bend your neck down to read a book or to tie shoes. Also, do not do any strenuous activity (sports, lifting, yoga, gym) until you discuss this with Dr. Kunkel.

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## What you need to know: After the first few days

**Swelling**-The face will *look* swollen for about 3 weeks. Usually after about 3 weeks the face does not look so swollen, but it *feels* swollen for about 3 months. It actually takes at least 6 months before a significant amount of the swelling goes away. Keeping your head elevated at night may help reduce the swelling more quickly.

As the swelling subsides you will notice areas of firmness under the skin. This is expected and resolves over time.

**Activities to Avoid**-You should avoid all strenuous activity for at least 4 weeks. Do not start running, swimming, or other significant physical activity until you discuss this with Dr. Kunkel after surgery. You also should not smoke for at least 3 weeks after surgery. Smoking may cause problems with wound healing and this could significantly affect your result.

**Back to work/school**-You may return to work or to school as soon as you feel comfortable with your appearance. Most people will probably want to take about 10-14 days off from their normal routines. Activity restrictions are as listed above.

**Make-up**-You may begin to wear make-up after about 10 days. However, you should discuss this with Dr. Kunkel before you start.

**Hair care**-You may start washing your hair the first day after surgery, using a mild shampoo. It is okay for the shampoo to get on the incisions; it just helps clean them. You should probably wait about 3-4 weeks before you have your hair colored or styled. If you color your hair, you may want to do this about 2 weeks before your surgery.

We hope you have found this booklet to be informative. All of the questions you have cannot be answered here; a consultation is the best way to do that. The rest of this page has been left blank so that you may take notes or write down questions. Do not hesitate to contact our office if you have questions or want more information.