

Face Lift FAQ

Frequently
Asked Questions - Facelift

Introduction

Surgeons have been performing facelifts since the turn of the century. While initially it may have been a procedure performed only on wealthy women, many thousands of men and women have turned to plastic surgeons to try to reverse their aging appearance. While as recently as 10 or 15 years ago, women were very secretive about having their face lifted, today it is so common, it is openly discussed among friends. In the early 20th century, the procedure involved simply removing skin from around the ears and pulling the facial skin back. As with many cosmetic procedures, facelifting has evolved into a very complex and sophisticated procedure. Surgeons have studied in significant detail the anatomy of the face from skin to bone. We also better understand the aging process and the changes that take place. When we look at anyone's face we get a sense of their age. To do this, we all focus on the skin; the wrinkles, the sagging, the age spots, etc. As we age the skin becomes thinner, it loses elasticity, and it becomes separated from the fatty tissue beneath it. However, one's facial appearance depends not only on the skin but also on what is beneath it: fat, muscle, and bone. These all have a tremendous influence on our appearance. As we age the fatty tissue thins and descends, the muscles become lax, and even the bone atrophies. In order to "reverse" the aging process, surgeons have begun to look past the skin and try to reverse the aging process as it affects the deep structures as well. As a result, these more complex procedures result in a more natural (less pulled) look which lasts longer than the traditional "skin only" facelift. At the same time, as the procedure has become more complex, the risk of serious injury is increased. Surgeons vary not only in their abilities, but in their comfort in doing the "latest" procedures. For this reason, what one surgeon performs as a "facelift" may be very different from another. The procedure ranges from a very simple skin tightening to more complex procedures. It is for this reason that, if you decide to have a facelift, you see a physician who can explain to you what he does, why he prefers that procedure, and what his experience is in whichever procedure he does. Remember that the same surgeon may alter the procedure on different patients depending on their needs and desires. The ultimate goal is to "set back the clock" as we obviously cannot stop the aging process.

Who is a candidate for a facelift?

Both men and women may be candidates for a facelift. Patients may request a facelift beginning in their forties all the way up to their eighties. In general, patients want to have a facelift to look younger. That is certainly nothing to be ashamed of. Patients often tell me they feel young, healthy, and energetic but look much older. They may feel or even be told that they look tired, angry, or displeased when in fact they feel energetic and happy. It is becoming more common that men will see me because they are concerned about job security. While on

the one hand, they are being as productive as ever, on the other, they appear old, and possibly, less productive as compared to their younger colleagues. While age discrimination is illegal, unfortunately, it is common. In addition, men in their late forties or fifties who lose their job and are looking for a new one, often find it is much harder than they expected. Unfortunately, but realistically, part of the reason may be their age or aged appearance. If a man feels comfortable with the idea of having a facelift and feels it may help his career, there is nothing wrong with going ahead with it. Age discrimination certainly occurs with women as well, and the same hold true for them. A facelift can make you look younger, fresher, and more energetic. Your self confidence may be boosted. However, a facelift is not going to solve significant personal or interpersonal problems. It will not save a marriage or other relationship, it will not improve your sex life, it will not guarantee you that raise, promotion, or job you've been waiting for, and it will not treat other health problems in your life. If you are considering a facelift, think about your true motives and whether a facelift is the answer. Be honest with your surgeon so that he may advise you with your decision.

Who should not have a facelift?

A facelift is a lengthy and complex procedure. It also demands relatively healthy skin if serious complications are to be avoided. Because of this, patients with any significant medical problems including heart, lung, or kidney disease, vascular disease, diabetes mellitus, or autoimmune diseases should in the majority of cases, not have this procedure performed. There are a few rare skin disorders where facelifts should also be avoided. These include progeria, werner's syndrome, and Ehlers-Danlos syndrome. Smokers, no matter how few cigarettes they smoke, should not have a facelift performed unless they completely abstain from cigarettes both before and after surgery. The length of time to abstain will vary depending on the surgeon but will be at least two weeks before and two weeks after surgery. A nicotine patch is just as harmful as a cigarette and cannot substitute for abstinence. A smoker who wishes to have a facelift must be honest with themselves and their surgeon or horrible complications can result including loss of a large portion of the skin on the face requiring reconstructive surgery. Finally, patients with unrealistic expectations should avoid this procedure. As discussed above, a facelift is not the answer for major problems occurring in your life. In addition, while it may make you look younger and refreshed, you will not look like a teenager. In addition, it will not make you more beautiful or attractive than you ever were. It simply reverses some of the changes that have occurred because of aging. The only way to know if you are being realistic is to talk honestly and openly with your surgeon. You do not want to go through the expense, pain, and risk of surgery only to find that you did not achieve your goal.

What do I need to do before the surgery?

You will consult with Dr Wigoda and discuss exactly what about your face bothers you. Even if it is a minor problem, mention it beforehand. Dr Wigoda will explain the options, discuss exactly what he plans on doing and what you should expect after surgery. Dr Wigoda will take photographs of your face and may review your

photographs with you to make sure you are both in agreement with the goals of the surgery. You may consider letting your hair grow long to help hide the scars while you heal.

What do I need to avoid before surgery?

You will need to avoid aspirin and aspirin containing products for 2 weeks before surgery. Also, completely quit smoking at least four weeks before surgery. You should avoid getting a suntan as well. If you use skin rejuvenation creams like Retin-A or Renova, stop using these 1-2 weeks before surgery.

What are the potential risks for this procedure?

The most common significant complication of a facelift is a hematoma - a collection of blood under your skin that develops from a bleeding vessel. It occurs in 1-5% of facelifts. Dr Wigoda will try to keep your blood pressure low during and after surgery to try to prevent this from happening. He will also try to keep you relaxed and comfortable. If you do get a hematoma you may have to go back to the operating room to remove the blood collection. The most dreaded complication of a facelift is an injury to the facial nerve. This nerve stimulates all of the muscles in your face which allow you to make facial expressions: smiling, frowning, kissing, etc. The most common injury is to a branch of the nerve which allows you to smile. The majority of the time, the nerve injury is temporary. It may take anywhere from a few days to a year for the nerve to recover depending on the extent of injury. If the nerve is cut, the injury will likely be permanent. Luckily, this complication is rare and usually resolves with time. Other potential complications with this procedure are uncommon but can include infection, loss of skin, unattractive scars, asymmetry, pulling the earlobe down, and deep scar formation. Dr Wigoda has developed his facelift procedure whereby he remains fairly distant from the facial nerve with a minimal risk of causing injury to it.

What type of anesthesia is used?

Dr Wigoda uses general anesthesia for this procedure. You will be completely asleep and not feel anything. Some surgeons are comfortable doing the procedure under local anesthesia with sedation. There may be some discomfort when the surgeon injects the local anesthetic and it may be difficult to lay still for many hours at time.

Where is the incision made?

Incisions are generally made starting approximately 1 inch above your ear, going down in front of your ear, around to the back of your ear, and then into your hair. The incision in front of the ear is often partly hidden by placing it behind the tragus. (The cartilage "bump" in front of the ear opening). The incision behind the ear is sometimes continued along the hairline in cases where a lot of skin is removed from the lower face and neck. These incisions are made on both sides of the face. Often, an additional incision is made under the chin to tighten the

muscles in the neck and remove some of the fat in the neck. All of these incisions will leave scars. However, if placed well, they are often difficult to see.

What are the different techniques used?

Each surgeon uses his own technique; the one he is most comfortable with. However, there are basic principles and philosophies which are followed. Basically, the surgeon needs to decide what the "problem areas" are and how he will improve them. All surgeons will remove some extra skin and tighten the remaining skin. What varies, is what, if anything is done to the deeper structures. The primary deep structure which the surgeon will address is called the SMAS (SubMuscular Aponeurotic System) This is a fascial layer under the skin. Today, most surgeons will tighten the SMAS with the belief that this gives a better and longer lasting result. Even though more structures are being pulled, the patient is actually left with a less "pulled look" (which nobody wants). In previous years, when only the skin was pulled, surgeons would put a lot of tension on it, worried that the skin was going to stretch back some. Now, since the deeper structures are pulled as well, the skin does not have to be pulled as much. The "pulled look" is avoided and the patient looks better. Surgeons who claim they can get you back to work in a few days or a week may be telling the truth, but you may have to come back every year or two to get redone because the technique does not produce long lasting results.

How long does the surgery take?

A facelift will take anywhere from 2 to 6 hours depending on how much is done and the surgeon's experience. A faster facelift is not necessarily a better one.

When will I see the final results?

Depending on the technique used, you may have swelling and bruising for as little as two weeks or up to a few months. Most of the swelling, regardless of technique, will resolve in the first month. For the techniques in which the goal is to obtain a long lasting result, where the deeper structures are manipulated, the swelling will last longer. Therefore it may take anywhere from one month to six months to really see the final result.

Are drains placed?

Yes. Dr Wigoda will place one or two drains. The drains come out in the hair behind the ears. The drains are usually removed after 24 to 48 hours.

What happens after surgery?

You will go to the recovery room for 1 to 2 hours. Your vital signs will be monitored. Once you are stable you will be taken

home (or to a hotel) by your friend or family member. You will want to stay relaxed and primarily in bed for the first few days. You will need to keep your head elevated and relatively still. You do not want to use any pillows directly behind your head for a few days (that flex your head down onto your chest). You should, however, begin to start walking, eating, and using the restroom the day after surgery. Your dressing and drains will be removed after 1 or 2 days. Your activity can slowly increase each day but it will take up to 2 weeks before you start to feel like your old self again. You should avoid any strenuous activity for 4 weeks.

How much bruising, swelling, and pain is there?

There may be some bruising, primarily in the neck region. The bruising will usually last 2 weeks but becomes less noticeable each day after surgery. The majority of swelling will be in the face. The swelling will last anywhere from 3 weeks to 3 months depending on the technique used. The majority of the swelling, however, will be gone by 3 to 4 weeks. There may be some pain after surgery, but this is usually controlled with pain pills. By the third day, you may not need anything stronger than tylenol. You should expect that your face will feel and look very different at first. Your facial features will be distorted or masked by the swelling and your face will feel stiff. You will find that you get tired quickly. Try not to get upset or anxious as all of these changes are expected and will resolve in a short period of time. Lastly, you may experience some itching around your incision sites. This is not unusual and can be treated with medication. This too will go away after a short time period.

When can I get back to work?

You should plan on being off work for at least 2 weeks. If your work is strenuous, you will need more time off. After 2 weeks, it may still be obvious that you had surgery (depending on what was done). If you don't want anyone to know you had surgery, or you at least want all the bruising and swelling gone before going back to work, ask Dr. Wigoda what the average time for this to occur is in his patients.

Will I have to change any bandages?

Dr Wigoda will change your dressings during the first week after surgery. In the second week, most patients no longer require dressings.

How long should the results last?

This depends on what is done, on the patients skin and tissue quality, age, habits (sun exposure and smoking) and overall health. When the deeper structures are tightened, the results are longer lasting. In my opinion, this is what the goal should be for the vast majority of patients. Everyone will continue to age, but will always look younger than had they not had the procedure.

What happens before I have the surgery?

You will first have a consultation with Dr. Wigoda to discuss your particular case. Once you have decided to proceed with the surgery and have scheduled a date, you will return for a second visit at which time Dr. Wigoda will review the surgery with you, photos will be taken, consent forms will be signed, and further instructions and prescriptions will be provided. Full payment is made prior to surgery (or financing is arranged). You will have lab tests drawn and an electrocardiogram done by your primary care physician (or we will recommend where to do this) one to two weeks prior to the surgery. A medical clearance may be needed.

What happens on the day of surgery?

You will arrive at the office surgery center. You will not have eaten or drunk anything since midnight the night before. You will be checked in and your vital signs will be taken. You will put on a gown. An intravenous line will be started. Dr Wigoda will mark your face with a marker. You may be given a sedative in your I.V. to help you relax before you are taken back to the operating room.

What happens after surgery?

Bandages and dressings will be placed. You will recover for 1 to 2 hours in the recovery room. You will then be driven home by a friend or family member. Your activities will be limited for the first few days. It is advisable that you not drive for at least 7 days after surgery. As the pain and swelling decreases you will be able to resume normal activities.

How much bruising, swelling, and pain is there?

After surgery, it is expected that the face will have a moderate amount of swelling. Most of the swelling will resolve over 2 to 4 weeks. The amount of pain post-operatively is very patient dependent. Some patients will experience mild discomfort. It is unusual to have significant pain. The vast majority of patients report the pain as tolerable. For the most part, all of the pain and discomfort resolves completely with time, generally 1 to 2 weeks.

Will there be stitches that have to come out?

Dr Wigoda will remove the sutures after approximately 7 days.

When can I resume sexual relations?

You may want to wait at least two weeks until your incisions are well on their way toward healing. Early sexual activity may

prolong your soreness and discomfort.

When will I see the final results?

It will take 3 to 4 weeks for most of the swelling to resolve and probably 3 to 6 months for all of it to resolve. After this you should have a reasonably good idea of what the final look will be..

What is different about the way Dr. Wigoda does the surgery?

Dr. Wigoda was fortunate to train with many pioneers of facelift procedures in Dallas. He has combined the best aspects of each technique to create his own facelift procedure. The technique he uses causes minimal pain, has natural results, and is long lasting. The vast majority of patients are quite surprised afterward at how little discomfort they have and how quickly they return to normal activity. Most patients have minimal bruising. Finally, with Dr. Wigoda's technique for skin closure, scars are typically minimal and are often difficult to see once they have fully matured.

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