



Information about facelift and necklift surgeryPart 1 of 3

This leaflet explains facelift surgery and necklift surgery. **It is important that you read this information carefully and completely. Please initial each page** to show that you have read it. For information on the risks and complications of face and necklift surgery, and care after a facelift and necklift, see parts 2 and 3.

What is facelift and necklift surgery?

A facelift is an operation to tighten and lift the loose skin of your face below the eyes. (Anything above the eyes is a browlift.)

A necklift tightens and lifts the skin of the neck.

Why have a facelift or necklift?

As you age, your skin gets less elastic and droops, and your facial muscles slacken. The natural fat under the skin also sags, making you look older. The rate this happens at varies from person to person, and is probably determined by your genes.

The stresses of daily life, the effect of gravity and exposure to the sun also affect your face. Drastic weight loss can also age the face.

The rate your face ages does not necessarily reflect the rate that the rest of your body and mind is ageing, and you may feel that the face you see in the mirror is not the one you should have.

A facelift gives the best results if your face and neck have started to sag but your skin still has some elasticity and your bone structure is strong and well defined. Most people who have facelifts are in their 40s to 60s, but facelifts can be done successfully on people in their 70s or 80s.

It should not be obvious that you have had a facelift, but you should look younger, healthier, lively and cheerful.

What will happen before my operation?

You will meet your surgeon to talk about why you want surgery and what you want. The surgeon will make a note of any illnesses you have or have had in the past. They will also make a record of any medication you are on, including herbal remedies and medicines that are not prescribed by your doctor.

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Your surgeon will examine your face and neck, and may take some photographs for your medical records. They will ask you to sign a consent form for taking, storing and using the photographs.

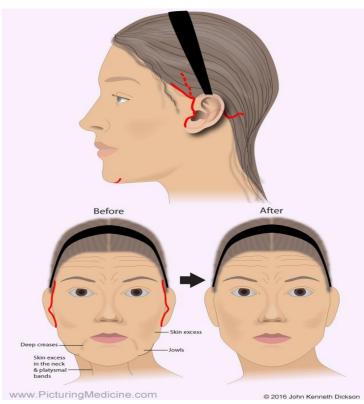
The surgeon will measure your height and weight to make sure that it is safe to do an operation. If you are overweight, or planning to become pregnant, your surgeon may suggest delaying your operation.

A facelift improves the lower half of the face, particularly the jawline. If you have sagging eyebrows and wrinkles on your forehead, your surgeon may suggest a browlift. Loose skin with fine wrinkles, freckles and rough areas will benefit more from a chemical peel or laser resurfacing, which can be performed with a facelift, browlift or necklift.

How is the surgery performed?

A facelift involves raising and repositioning the skin and soft tissue of the face. During the operation, cuts are made on both sides of the face in front of the ear, extending up along the hairline, just in front of or behind the cartilage, and around behind the earlobe, into the crease behind the ear and then into the lower scalp. Occasionally, the surgeon may need to make a small cut under the chin for the necklift part of the surgery.

- Sometimes only the skin above the neck is lifted (a facelift only).
- Sometimes the neck muscle and the skin over it is just tightened by stitching them together (a necklift only).
- Sometimes the neck muscle and the skin over and above it are tightened and then lifted and stitched tightly to the solid structures in front of and behind the ear (a facelift and necklift).



Excess skin is then removed, and the remaining skin is sewn into position.

Fat and tissue is redistributed, and is sometimes added to the face.

The standard facelift helps the lower half of the face, but modifications of the procedure can improve the upper face by lifting the outer angle of the eye and reducing crow's feet (also known as laughter lines).

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Your initials







Choosing a surgeon

If you decide to have a facelift or necklift surgery, only go to a surgeon who is properly trained and on the specialist register held by the General Medical Council. They will talk to you about what is possible for you or might give the best results. Members of several different organisations do cosmetic surgery, so your general practitioner (GP) is the best person to advise you on who to see. You should talk to your surgeon before your operation about when and how to pay.

Nobody needs an urgent facelift or necklift. If you are not given time to think about it, you should look elsewhere.

How can I help my operation be a success?

Be as healthy as possible. It is important to keep your weight steady with a good diet and regular exercise. Your GP can give you advice on this.

If you intend to lose weight, you should do so before the operation. This allows the surgeon to remove more skin and so achieve a better result. You should avoid taking tablets containing aspirin, as well as non-steroidal anti-inflammatory drugs, such as Voltarol and Indocid, for at least two weeks before the operation as they increase the risk of bleeding.

If you are planning to have your hair permed, bleached or coloured, do this before your operation as fresh scars are sensitive to these chemicals for a few weeks.

If you smoke, stopping at least six weeks before the operation will help to reduce the risk of complications, particularly the risk of the flaps of skin behind the ear losing their blood supply.

Do not worry about removing hair near where we will be making cuts, but do have a bath or shower during the 24 hours before your operation to make sure that the area is as clean as possible.

To find out more, visit the websites below.

Contact us:

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Information on cosmetic surgery

www.baaps.org.uk/safety-in-surgery

www.bapras.org.uk/public/patient-information/cosmetic-surgery/considering-cosmetic-surgery www.gov.uk/government/news/recommendations-to-protect-people-who-choose-cosmetic-surgery

General Medical Council (GMC) plastic surgery specialist register

www.gmc-uk.org/doctors/register/LRMP.asp

Anaesthetics

www.rcoa.ac.uk/patientinfo

Your initials

Disclaimer

This document is designed to give you useful information. It is not advice on your specific needs and circumstances. It does not replace the need for you to have a thorough consultation, so you should get advice from a suitably qualified medical practitioner. We – The BAAPS and BAPRAS – have no liability for any decision you make about the surgery you decide to have.

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