

Rhytidectomy (Facelift)

Postoperative Instructions and Information

The following instructions are based on Dr. Alford's experience with many facelift operations. The handout will attempt to answer every question that may arise regarding the "do's" and "don'ts" after surgery. You and your family should read them several times so that you will become thoroughly familiar with them. Attempt to follow them **faithfully**. Those who do so generally have the smoothest postoperative course.

❖ PLANNING BEFORE SURGERY

- If you live in another city, we prefer you to stay in town with a friend or at a hotel for 5-7 days after discharge from the hospital. Please make these arrangements and let Dr. Alford's nurse where you will be staying.
- Schedule your postoperative visit for 1 to 4 days after your surgery. Arrange for someone to accompany you to Dr. Alford's office and take you home following your appointment.
- Arrange to have frozen pea packs available for your use for at least the first 24 hours after discharge from the hospital (see "Frozen Pea Packs" below).

❖ SWELLING

Every operation, no matter how minor, is accompanied by swelling of the surrounding tissues. The amount varies from person to person, but it always seems more dramatic in the face. The swelling is usually greatest on the second or third day after your operation. It is usually more pronounced along the jaw line and is generally worse when you first arise in the morning; therefore, we suggest that you keep your head elevated as much as possible. The swelling itself is normal and is not an indication that something is wrong with the healing phase of your operation.

Your face and neck will remain swollen with varying amounts of discoloration for several days. The most important thing to remember is that such swelling always subsides. Some tips to shorten the duration of the swelling include:

1. **STAY VERTICAL. IMPORTANT!** Sit, stand and walk around as much as is comfortable beginning on your second postoperative day. Of course, you should rest when you become tired but keep your upper body as upright as possible.
2. **AVOID TURNING YOUR HEAD** or bending your neck. When you must turn, move your shoulders and head as one unit or as though you had a "stiff neck." This protects the soft tissues of the face, allowing them to heal quickly, smoothly and securely to the facial skeleton. This will result in a longer lasting facelift.
3. **AVOID BENDING OVER OR LIFTING** heavy things for one week. In addition to aggravating swelling, bending and lifting may elevate blood pressure and start bleeding.
4. **AVOID HITTING OR BUMPING YOUR FACE AND NECK.** It is wise not to pick up small children and you should sleep alone for one week after your operation.

❖ **SWELLING** (continued)

SLEEP WITH THE HEAD OF THE BED ELEVATED 30-40 degrees both while you are in the hospital or surgery center and for 1-2 weeks following your surgery. To accomplish this, place two or three pillows under the head of the mattress and one or two on top of the mattress. Try not to roll on to your face; this tends to weaken the supporting stitches used under the skin of your face. Therefore, it is necessary that you sleep on your back for 30 nights. Some patients find a reclining chair placed at a 45-degree angle to be more comfortable than a bed.

5. SUPPORT THE SWOLLEN TISSUES with a chin sling worn according to the directions we will give you. Wear it constantly until one week has elapsed from the day of your operation; then it should be worn during sleep for another two weeks.
6. AVOID STRAINING DURING ELIMINATION. If you need a laxative, we recommend Correctol™ (your pharmacist will give it to you without a prescription). Proper diet, plenty of water and walking are strongly recommended to avoid constipation.
7. AVOID SUNNING of your face for one month. Ordinary sun exposure is not harmful but always use a sunscreen with SPF15 or above.

❖ **DISCOLORATION**

It is not unusual to have varying amounts of discoloration about the face. Like the swelling, it may become more pronounced, especially in the neck, after the first day or so. Remember this is normal and temporary. It usually lasts no more than two weeks, all the while decreasing in intensity. The measures previously described that help the swelling to subside will also help diminish discoloration; however, there is no medication that will cause it to disappear rapidly – only the natural course of time.

You can camouflage the discoloration to some extent by using make-up (several specific products are available for this purpose – Linda Meason can provide valuable assistance in this area). Do not apply make-up over the incisions themselves until one day after the sutures have been removed; however, you may bring make-up to the line of the incisions.

❖ **ANTIBIOTICS**

You will take an oral antibiotic for 7 to 10 days following your surgery. All antibiotics should be taken with food or liquids to prevent nausea and promote proper absorption of the medication (do not consume milk or dairy products when taking your antibiotic as they can inactivate many medicines). Take your antibiotic as instructed by your physician until medication is completely gone. Do not forget to take your antibiotic and do not stop taking it because you “feel better.”

❖ **MEDICATIONS**

In addition to antibiotics, you will be given two new prescriptions at the time of discharge. The first will be Phenergan suppositories for treatment of nausea; the second will be a pain reliever (generally, Loratab® or Tylenol-3,® if you have no history of sensitivity to these products). These prescriptions should be taken only when needed (see “Pain”). **Avoid taking medications on an empty stomach.**

❖ **PAIN**

There is usually little pain following a facelift but you may experience a deep bruised sensation as a result of the swelling. Patients often comment, “...my face feels heavy.” As is usually the case with such things, this seems worse at night when you are tired.

❖ **PAIN** (continued)

For the first 24 hours following discharge from the hospital, take the prescribed pain medication given to you at the time of your discharge and rest as much as possible in a sitting/head elevated position. On the second postoperative day, most patients feel ready to start moving about and do not need prescription-strength pain relievers. If you still feel the need for pain relief try applying cold compresses (see “Frozen Pea Packs”). If you do not experience sufficient relief, take Extra Strength Tylenol[®] according to the package instructions. *Under no circumstances should ASPIRIN or medication containing aspirin or salicylates be taken (See comprehensive list of medications to be avoided, which you received with “General Preoperative Surgical Instructions”).* If you are not sufficiently relieved of pain, try alternating doses of Extra Strength Tylenol[®] and the pain medication prescribed by Dr. Alford. *(We recommend alternatives to prescription-strength pain relievers because they can cause sensations of light-headedness, particularly in the immediate postoperative period and, consequently, seem to make recovery more difficulty).* If the pain is severe, notify the nurse so that appropriate steps can be taken.

❖ **FROZEN PEA PACKS**

Frozen English peas (from your grocer), placed in ZipLock[®] bags, provide the simplest and most effective cold compresses to reduce swelling, bruising, and discomfort following surgery. During your waking hours, apply the pea packs to the face, neck, eyes, and jawline for 20-30 minutes each hour for at least 48-hours following surgery. You may continue to use the pea packs as much as you like for up to 7 days after your surgery.

❖ **REMOVAL OF DRESSINGS**

A pressure dressing will be applied immediately after surgery. It is to remain in place until the following morning and should not be adjusted or removed by anyone except Dr. Alford or his nurse. You should be as quiet as possible during this time. A great deal of talking or too many visitors is discouraged. If your dressing begins to feel excessively tight or uncomfortable, ask the nurse to report it to Dr. Alford.

A light facial wrap will be placed on the second day following surgery. This should be worn at all times, except when bathing, for 7 days after your surgery. Use of this wrap is important in achieving an excellent result from your procedure.

❖ **BLEEDING**

If bleeding or a sudden painful swelling should occur, go to bed, elevate your head, apply frozen pea pack compresses to your face and neck, and call us immediately. You will probably be told to come in to the office so that Dr. Alford can examine you.

❖ **TEMPERATURE**

Generally, the body temperature does not rise much above 100 degrees following facelift surgery. Patients will often think they have increased temperature because their face feels warm; however, this rise in temperature is an appropriate part of the healing process. You should check your temperature by mouth three times per day. If you have a persistent temperature above 101.5 degrees that is not relieved by Tylenol[®], call Dr. Alford’s office.

❖ **WEAKNESS**

It is not unusual for a patient to feel weak, have palpitations, break out in “cold sweats,” or get dizzy following the administration of anesthesia or any type of surgical procedure. Within a few days these feelings will generally disappear without medication. Returning to a normal diet and light activity will shorten the duration of these feelings.

❖ **INSOMNIA**

When there is excessive difficulty in sleeping during the postoperative period, we will prescribe a mild sedative. It should be remembered that such drugs also tend to make some people feel light-headed and weak and should be taken only if needed.

❖ **NUMBNESS**

Parts of the face, neck, and ears sometimes feel weak or “numb” after the facelift operation – these feelings are temporary and, if they occur, generally last less than 6 weeks. In some cases, this sensation may last as long as six months but this is an extremely rare occurrence.

❖ **TIGHTNESS OF THE FACE**

The skin of the face may feel tight following surgery and you may feel that it interferes with your smile – this is temporary and will disappear within a few weeks. Keeping the head of your bed elevated and following the recommendations outlined in the “Swelling” section of this handout will shorten the duration of this sensation.

❖ **THINNING OF THE HAIR**

There may be transient thinning of the hair in areas adjacent to the suture lines in the temple and behind the ear. Should this occur, do not be concerned, as the hair almost always grows back to its normal thickness and distribution, ultimately covering the incision lines and scars. Rarely, the hair does not return and this may require revision of the scars or placement of hair grafts.

❖ **IF YOU INJURE YOUR FACE**

Some individuals may sustain accidental hits of the face during the early postoperative period. Usually, one need not be concerned, unless the blow is hard or if bleeding and/or considerable swelling occurs. Report the incident at the next office visit or immediately by telephone, if you are sufficiently concerned.

❖ **RESUMING ACTIVITIES**

1. **DO NOT SMOKE & AVOID ALCOHOL CONSUMPTION** for 3 weeks. Both of these activities significantly slow the healing process.
2. **WEARING GLASSES AND CONTACT LENSES.** Eyeglasses may be worn as soon as the bandages are removed. Wear glasses over the facial wrap. Contact lenses may be inserted the day after surgery, if no eyelid surgery was performed.
3. **HAIR AND BODY CARE.** You may wash your hair with Neutrogena™ shampoo and tepid water in a shower and comb it out with a large-toothed comb on the second day after surgery. You may use a blow dryer on **cold setting only**.

You may have your hair washed at a salon one week after your surgery, but do not sit under a hair dryer – use a hand blow dryer on cold setting. Be careful not to rest your neck or the area of the incisions on the rim of the wash bowl. Hair coloring should be delayed until six weeks after your surgery.

WASH YOUR FACE gently with a mild soap (Neutrogena™) twice daily after the first week, using a gentle, upward motion. As mentioned, you may take a shower by the second postoperative day but **NOT** on the day when you have your sutures removed.

Do not **TWEEZE YOUR EYEBROWS** for one week following surgery.

4. **HOUSEHOLD ACTIVITIES.** On your second postoperative day, you are encouraged to be up and around the house with your usual activities except those specifically outlined previously (no bending, no heavy lifting, etc.). No strenuous activity.

❖ **RESUMING ACTIVITIES** (continued)

5. **PULLOVER CLOTHING.** For 1 week following surgery, you should wear clothing that fastens either in the front or at the back rather than the type that must be pulled over the head.
6. **ATHLETICS.** No swimming, strenuous athletic activity or exercises that involve turning the head for 4 weeks.
7. **KEEPING A “STIFF” FACE AND NECK.** You should not move your face and neck excessively until the skin heals to the underlying tissues. This includes:
 - a) **AVOID EXCESSIVE GRINNING AND SMILING.**
 - b) **DO NOT TURN YOUR HEAD** without turning your neck and shoulders as one unit, for two weeks.
 - c) **DO NOT BEND YOUR HEAD FORWARD OR EXTEND YOUR NECK BACKWARD** for two weeks.
 - d) **AVOID GUM OR FOODS THAT ARE HARD TO CHEW.** Soups, mashed potatoes, stewed chicken, ground beef, or any easily chewable food is permissible. Steaks, French bread, etc. should be avoided for at least one week.
 - e) **AVOID YAWNING WITH YOUR MOUTH OPENED WIDELY** for two weeks.
8. **RETURNING TO WORK AND RESUMING SOCIAL ACTIVITIES.** When you return to work depends on the amount of physical activity and public contact your job involves and also the amount of swelling and discoloration you develop; the average person is ready to return to work or go out socially 2-3 weeks following surgery.
9. **DO NOT DRIVE A CAR** for two weeks. Also, do not drive while taking any sedative or prescription pain medications.

❖ **SCARS**

Remember that whenever an incision is made in the skin, healing results in the formation of a scar. Dr. Alford's goal is for these scars to be almost invisible. After all stitches have been removed, the incision lines will appear a deep pink color. There will be varying amounts of swelling in and around the incision lines themselves. With the passage of time, the pink will become pale and fade to white, the firmness of the scar will soften, and the scars will become almost invisible. Each individual varies with respect to healing, but it takes approximately one year for these changes to occur in most scars.

❖ **DAILY CARE**

1. Go over your suture lines 2-times daily with hydrogen peroxide on a cotton swab around the front and back of your ear. Apply a small amount of Bacitracin Ointment™ to the suture lines around the front and back of the ear.
2. Do not disturb stapled incisions.
3. Never wash your hair the day of suture/staple removal. Wash it the following day, using Neutrogena™ shampoo only.

❖ **YOUR FIRST POSTOPERATIVE OFFICE VISIT**

On the occasion of your first postoperative visit to Dr. Alford's office, a few of the skin sutures may be removed and the progress of your healing will be checked. Removing sutures is quick and uncomplicated because it is done with small delicate instruments to minimize discomfort. You will probably feel much better after your first office visit. Similar treatment will be given during subsequent office visits. Ordinarily, all sutures are removed within two weeks from the day of your surgery. During the interim, do not disturb sutures/staples yourself. Occasionally, crusts will develop around the sutures; these can be softened and removed with applications of hydrogen peroxide on a cotton swab.

❖ **CONCLUSION - SUMMARY**

Remember the things you were told before your surgery:

1. When the bandages are first removed, your face will appear swollen and there will be varying amounts of discoloration. This swelling will subside to a very large extent within two weeks; however, it will take 6-8 weeks for all the swelling to totally disappear and for your face to reach its final contour.
2. The discoloration will gradually disappear over a period of 10-14 days, in most cases. We have yet to encounter a case where it persisted permanently.
3. Call Dr. Alford's office if you experience:
 - a) a persistent temperature above 101.5 degrees that is not relieved by Tylenol®
 - b) signs of infection such as excessive swelling, redness or drainage, or persistent temperature above 101.5 degrees
 - c) excessive bleeding that persists after applying pressure for 20 minutes
 - d) discharge from the wound or other evidence of infection
 - e) development of any drug reaction

Of foremost importance, BE PATIENT during the healing process. Remember, there is no such thing as a bad question. If you still have questions after reading the materials we have provided, please feel free to call the office and speak with Dr. Alford or Linda Meason, R.N.: 713/796-2001.

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Postoperative Time Table

- ❖ Day 1 - Surgery
- ❖ Day 3-5 remove eye stitches
- ❖ Day 5-7 remove ear stitches
- ❖ Day 7-10 remove stitches behind ear
- ❖ Day 10-14 remove staples