

# Genioplasty (Chin Reshaping Surgery)

*(Surgical Repositioning of the Chin Bone)*

A guide to your procedure, consent, and recovery

## Introduction

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This leaflet has been prepared to help you understand the procedure you have been recommended — a genioplasty, or surgical repositioning of the chin bone. It is designed to support your consent process and to provide guidance for your recovery after the procedure.

Please read this leaflet carefully before your appointment. You are encouraged to write down any questions you may have and raise them with Mr McDonald during your consultation. Mr McDonald will discuss your individual circumstances, the proposed treatment plan, and any specific considerations that apply to you.

## What Is a Genioplasty?

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A genioplasty is a surgical procedure designed to improve the aesthetic balance and profile of your face by repositioning the chin bone (mandibular symphysis). The bone is precisely cut, moved into a pre-planned position, and secured with small titanium plates and screws. This can create a stronger jawline, improve facial harmony, and bring better balance to your profile.

The surgery is performed entirely through an incision made inside the lower lip, meaning there is no visible external scar. The procedure is carried out under a general anaesthetic and typically takes between around two hours.

## Why Has This Been Recommended?

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Genioplasty may be recommended for one or more of the following reasons:

- To improve the projection, height, or width of the chin
- To correct facial asymmetry involving the chin
- To improve the overall balance and harmony of the facial profile
- As part of a combined surgical treatment plan involving other facial or jaw procedures

Mr McDonald will discuss what is most appropriate for you during your consultation. It is important to note that a genioplasty changes the position and shape of the chin bone only. It will not alter the appearance of your lips, nose, cheeks, or neck in isolation. For optimal facial balance, it is sometimes recommended alongside other procedures such as a face and neck lift or neck liposuction.

## About the Procedure

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### Type of Anaesthesia

Genioplasty is performed under a general anaesthetic. You will be asleep throughout the procedure and will not feel anything.

### What Happens During the Procedure?

The surgical steps typically involved are as follows:

- A local anaesthetic is injected into the chin area to reduce bleeding and discomfort during recovery, even while you are under general anaesthetic.

- An incision is made on the inside of your lower lip. There is no external skin incision and no visible scar.
- The chin bone is precisely cut using a fine surgical saw. The bone segment is then moved into the pre-planned new position.
- The repositioned bone is held in place with small titanium plates and screws, which are designed to remain in place permanently.
- The incision inside the mouth is closed with dissolvable stitches, which typically dissolve within two to three weeks.

The procedure typically takes between one and two hours.

## Risks and Complications

As with all surgical procedures, genioplasty carries some risks. Your surgeon will discuss these with you in detail, particularly any risks that are specific to your situation. It is important that you understand these risks before consenting to treatment.

### Common (Affecting More Than 1 in 10 Patients)

- **Swelling and Bruising:** Significant swelling and bruising of the chin, lower lip, and neck are expected and can take several weeks to resolve. The majority of swelling subsides within a month, but subtle changes can continue for up to a year.
- **Numbness or Altered Sensation:** Numbness of the lower lip, chin, and gums is very common due to stretching of the sensory nerves during surgery. This usually improves over several weeks to months.
- **Pain and Discomfort:** Discomfort is expected and is usually well-controlled with prescribed pain medication. You may experience tightness and some initial difficulty with lip and mouth movements.

### Less Common (Affecting 1 in 10 to 1 in 100 Patients)

- **Infection:** The risk of infection is low but is present with any surgery. Infections related to the internal incision or the plates and screws may require antibiotics or, occasionally, removal of the hardware once the bone has healed.
- **Bleeding (Haematoma):** Minor oozing is normal. Significant bleeding after surgery is uncommon but can occur, potentially requiring a return to theatre to address it.
- **Injury to Teeth or Roots:** The surgery is performed close to the roots of the lower teeth. While every care is taken, damage to tooth roots is a rare risk.
- **Dissatisfaction with the Aesthetic Result:** While the goal is to achieve a result that meets your expectations, perfect symmetry is not always possible. Some patients may feel the change is too subtle or too pronounced. Final bone healing and soft tissue settling take many months, so the final result is not immediate.

### Rare but Serious Risks

- **Permanent Altered Sensation:** In rare cases, numbness of the lower lip, chin, or gums may be permanent due to nerve injury.
- **Bone Healing Problems (Non-Union):** Rarely, the bone may not heal as expected, which could require further surgery.
- **Hardware Prominence:** The plates and screws are designed to remain in place permanently. Occasionally they can be felt under the skin, become prominent, or cause irritation, requiring removal in a minor procedure after the bone has fully healed (typically 6–12 months later).

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## Consent

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Consent for surgical treatment must be given freely and without pressure. Mr McDonald will ensure that you:

- Understand the nature of the proposed procedure
- Are aware of the likely benefits and relevant risks
- Have been informed of reasonable alternative treatments
- Have had the opportunity to ask questions

You have the right to withdraw your consent at any time before the procedure begins. If you have any doubts or concerns, please discuss them with Mr McDonald before signing the consent form.

If you would like a second opinion, your surgeon will support this and can provide relevant clinical information to assist you.

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## Preparing for Your Procedure

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### Before the Day

- Inform Mr McDonald of all medications you take, including blood-thinning medicines (e.g. warfarin, aspirin, clopidogrel, apixaban), as these may need to be adjusted. Do not stop any medication without medical advice.
- Inform Mr McDonald if you have any allergies, medical conditions, or if you are pregnant or breastfeeding.
- Specific fasting instructions will be given to you in advance of your general anaesthetic. Follow these carefully.
- Arrange for a responsible adult to accompany you home. You must not drive, operate machinery, or make important decisions for 24 hours after a general anaesthetic.
- Wear comfortable, loose-fitting clothing. Avoid wearing nail varnish or heavy makeup.
- If you smoke, you must stop completely for at least six weeks before surgery. Smoking significantly increases the risks of poor wound healing, infection, and bone healing complications.
- Maintain excellent oral hygiene before surgery to minimise infection risk.

### On the Day

- Take any regular medications as advised by your surgeon (with a small sip of water if fasting).
- Brush your teeth before attending.
- Bring your current medications.

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## Post-Operative Care Instructions

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Following your operation, it is important to follow these instructions carefully to support healing and reduce the risk of complications.

### Immediately After the Procedure

Some oozing of blood from the wound is normal for the first 24–48 hours. Sit upright or semi-reclined rather than lying flat. Avoid rinsing, spitting, or sucking through a straw for the first 24 hours. Gently applying a cold compress (wrapped in a cloth) to the outside of

your chin and jaw during the first 24 hours can help reduce swelling. Keep your head elevated, including for the first few nights, to minimise swelling.

### **Pain and Swelling**

Take painkillers as prescribed or recommended by Mr McDonald. Ibuprofen can be taken three times a day and paracetamol four times a day. If you are still in pain, dihydrocodeine can be taken four times a day (constipation is a common side effect). Appropriate painkillers will be given to you on discharge. Swelling typically peaks at 48–72 hours and then gradually subsides. Significant swelling is expected and normal — it will improve steadily over the coming weeks.

### **Eating and Drinking**

You must follow a soft diet for the first two to four weeks. Avoid hard, crunchy, or chewy foods that require significant biting force while the bone is healing. Avoid hot food and drinks for the first 24 hours. Keep well hydrated with cool or lukewarm fluids. Avoid alcohol for at least 48 hours, or for the duration of any antibiotic course.

### **Oral Hygiene**

Continue to brush your other teeth as normal from the evening of the procedure, avoiding the surgical site initially. From 24 hours after surgery, gently rinse with warm salty water (one teaspoon of salt dissolved in a glass of warm water) after meals and before bed. Do this for at least 5–7 days. If prescribed a chlorhexidine mouthwash, use it as directed.

### **Activity and Lifestyle**

Rest for the remainder of the day following your procedure. Avoid strenuous physical activity, heavy lifting, and vigorous exercise for at least four to six weeks, as this can increase swelling and risk of bleeding. Do not smoke for at least six weeks after surgery — smoking significantly impairs bone and wound healing. Do not drive, use public transport alone, operate machinery, drink alcohol, or make important decisions for 24 hours after your general anaesthetic. Most patients feel well enough to return to desk-based work after one to two weeks. More physical occupations may require a longer recovery.

## **When to Seek Help**

Please contact the Duty Sister at Albyn Hospital (01224 595993) or seek medical attention if you experience any of the following:

### **Contact Us or Seek Urgent Help If You Have:**

- ⚠ Heavy or persistent bleeding that does not stop with pressure after 40 minutes
- ⚠ Severe or rapidly worsening pain not controlled by prescribed analgesia
- ⚠ Signs of infection: increasing swelling after day 3, foul taste, discharge from the wound, fever

- ⚠ Difficulty swallowing or breathing
- ⚠ Sudden marked change in the position of your bite or jaw alignment
- ⚠ Any other symptom that concerns you

## Medications

You may be prescribed one or more of the following after your procedure:

- Analgesics (painkillers): Ibuprofen and/or paracetamol are usually sufficient. Take as directed. Do not exceed the recommended dose.
- Antibiotics: These are not routinely prescribed but may be recommended if there is a specific clinical indication. Complete the full course.
- Chlorhexidine mouthwash: Use as directed to help keep the area clean and reduce infection risk.
- Dexamethasone (steroid): This is given during the procedure to reduce post-operative swelling.

Always take medications as directed. If you have concerns about any medication, contact the clinic or your GP.

## What to Expect During Recovery

| Timeframe          | What Is Normal  |
|--------------------|---|
| <b>Day 1</b>       | Numbness from anaesthetic, mild to moderate swelling and discomfort beginning as the anaesthetic wears off. Some oozing from the wound is normal.   |
| <b>Days 2–3</b>    | Swelling typically peaks during this period and may feel worse before it improves. Bruising may appear over the chin, lower lip, and neck. Pain should be manageable with prescribed analgesia.                 |
| <b>Days 4–7</b>    | Swelling and discomfort gradually begin to improve. You may notice it becomes easier to open your mouth and move your lips normally.  |
| <b>Weeks 2–3</b>   | Swelling and bruising will be improving but some will still be present. Dissolvable stitches inside the mouth will fall out. You can gradually return to a soft but more varied diet.                           |
| <b>Weeks 4–6</b>   | Most patients feel well enough to return to light exercise. Nerve sensation in the chin and lower lip continues to improve for many patients during this period.  |
| <b>Months 3–12</b> | Final bony healing takes several months. Subtle soft tissue changes and nerve recovery can continue throughout this period. The final aesthetic result is typically appreciated from around six months onwards. |

## Follow-Up

A follow-up appointment will be arranged at around six weeks following your procedure to review your healing, check the position of the chin, and assess nerve recovery. If you do not receive an appointment automatically, please contact Albyn Hospital.

## Alternatives to Surgery

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In some situations there are alternatives to a genioplasty, and these will be discussed with you during your consultation. Options may include:

- Non-surgical treatments — such as dermal filler injections to the chin, which can provide a temporary improvement in chin projection without surgery.
- Chin implant — in selected cases, a solid implant placed over the chin bone may be considered, though this is generally less versatile than a genioplasty for correcting asymmetry or height.
- No treatment — if your condition is not causing significant functional or aesthetic concern, no treatment may be appropriate.

Mr McDonald will advise you on whether any of these alternatives are suitable in your specific case.

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