

PATIENT INFORMATION LEAFLET

Facelift Surgery

(Rhytidectomy)

A guide to your procedure, consent, and recovery

Introduction

This leaflet has been prepared to help you understand facelift surgery (rhytidectomy). It is designed to support your consent process and to provide guidance for your recovery. Please read it carefully before your appointment and write down any questions you would like to raise with Mr McDonald during your consultation.

What Is a Facelift?

A facelift is a surgical procedure designed to lift and rejuvenate the mid and lower face, reducing jowling and restoring a more youthful contour to the cheeks, jawline, and upper neck. It is often combined with complementary procedures such as neck liposuction and fat transfer to the midface to achieve the most complete result.

There are several facelift techniques, and Mr McDonald will discuss which is most appropriate for your anatomy and goals at your consultation. These range from the MACS lift and deep plane facelift, to the 'VR' facelift, in which hidden deep stitches are used to elevate the face and neck, reducing the risk of complications and shortening recovery time.

Why Has This Been Recommended?

Facelift surgery may be recommended for one or more of the following:

- Loss of definition along the jawline and the development of jowls
- Descent of the soft tissues of the mid and lower face
- A desire to restore a more youthful and rested facial appearance

It is important to understand what a facelift can and cannot achieve. A facelift addresses the midface, jowls, and upper neck. It will not improve the forehead, eyelids, nose, lips, chin, or nasolabial folds in isolation. The addition of complementary procedures — such as brow lifting, blepharoplasty, neck liposuction, or fat transfer — is often recommended to achieve the best overall result, and Mr McDonald will discuss this with you at your consultation.

About the Procedure

Type of Anaesthesia

Facelifts are usually performed under deep sedation with local anaesthetic, though general anaesthesia is used in some cases. Mr McDonald will discuss the most appropriate option for you.

What Happens During the Procedure?

The surgical steps vary according to the technique used, but typically involve:

- An incision made in front of the ear, often extended along the hairline towards the temples and around and behind the ear, where it is well concealed.
- The skin and underlying deep tissues are carefully lifted and repositioned. In the 'VR' facelift, hidden deep stitches are placed to elevate the deep structures of the face and neck while leaving the skin attached to the deep tissues.

- Excess skin is removed.
- Fine stitches are placed underneath the skin to close the wounds. These dissolve over a few weeks; certain techniques use permanent deep stitches.

If neck liposuction is performed at the same time, a small additional incision is made beneath the chin.

Risks and Complications

As with all surgical procedures, facelift surgery carries some risks. Mr McDonald will discuss these with you in detail before you consent to treatment.

Common (Affecting More Than 1 in 10 Patients)

- **Swelling and Bruising:** Bruising always occurs to some degree around the face, neck, and eyes, and may spread down towards the chest. Most bruising resolves within three weeks. While most swelling settles quickly, the earlobes can remain swollen for longer. Full healing and the final result may take between two and six months.
- **Tenderness and Discomfort:** Some discomfort is expected immediately after surgery and is normally controlled with simple painkillers. Tenderness in front of the ears and over the cheeks may persist for several weeks.
- **Numbness:** Numbness around the earlobe area is common after facelift surgery. This usually settles within three to six months but can, on some occasions, be permanent.
- **Bleeding:** Some minor bleeding and blood-stained discharge is normal in the first 48 hours and may continue for up to two weeks.

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

- **Scarring:** Scars are placed in well-concealed locations and typically heal to a fine, unobtrusive line. Infection or poor healing may result in a more noticeable scar. If neck liposuction is performed, a small additional scar will be present beneath the chin.
- **Significant Bleeding (Haematoma):** While uncommon, significant bleeding can occur and may require a further procedure under anaesthesia to manage it. A pressure dressing is sometimes used after surgery to minimise this risk.
- **Skin Colour Changes and Infection:** The blood supply to the skin may be altered by surgery, causing temporary changes in skin colour — particularly in response to temperature change. This usually improves with time. Wound infections are uncommon but can occur, and should be assessed promptly to avoid wound breakdown.
- **Deep Stitch Complications:** Some techniques use permanent deep stitches. There is a small risk that these become infected, cause a reaction, or become visible through the skin, requiring removal.

Rare but Serious Risks

- **Facial Nerve Weakness:** The facial nerve controls all the muscles of facial expression. The risk of weakness depends on the technique used, but permanent facial nerve injury is a rare complication of facelift surgery.
 - **Dissatisfaction with the Result:** Every effort is made to achieve a result that meets your expectations, but perfect symmetry is not possible and healing varies from side to side.
-

Consent

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 alternatives, and have had the opportunity to ask questions. You have the right to withdraw consent at any time before the procedure begins.

Preparing for Your Procedure

Before the Day

- Inform Mr McDonald of all medications you take, including blood-thinners (e.g. warfarin, aspirin, clopidogrel, apixaban). Do not stop any medication without medical advice.
- Inform Mr McDonald of any allergies, medical conditions (especially high blood pressure or diabetes), or if you are pregnant or breastfeeding.
- If having sedation or general anaesthesia, specific fasting instructions will be given to you. Follow these carefully.
- Arrange for a responsible adult to take you home. You must not drive or operate machinery for 48 hours after sedation or general anaesthesia.
- Stop smoking at least six weeks before surgery. Smoking significantly increases the risk of complications, poor wound healing, and skin loss.
- Do not wear makeup on the day of surgery.

On the Day

- Take regular medications as advised by your surgeon.
- Wear comfortable, loose-fitting clothing.
- Bring your current medication list.

Post-Operative Care Instructions

Following your operation, it is important to follow these instructions carefully to support healing and minimise complications.

Immediately After the Procedure

Some bleeding and oozing is normal in the first 48 hours. Rest with your head elevated — sitting upright or semi-reclined rather than lying flat. Avoid bending, straining, or any activity that increases blood pressure to the head. A pressure dressing may be applied to your face and neck to minimise swelling and reduce the risk of haematoma; this should be kept in place as instructed.

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. Applying a cold compress (wrapped in a cloth) to the face during the first 24 hours can help with swelling. Swelling and bruising typically peak at 48–72 hours and then gradually improve. Most is resolved by three weeks, though subtle changes continue for up to six months.

Eating and Drinking

Eat soft foods for the first week, avoiding anything requiring vigorous chewing. Avoid hot food and drinks for the first 24 hours. Stay well hydrated with cool or lukewarm fluids. Avoid alcohol for at least 48 hours, or for the duration of any antibiotic course.

Wound Care

Keep incisions clean and dry as instructed. Do not apply makeup to or around the incision sites for at least one week after surgery. Skin stitches are usually removed at around seven days. If you have a dressing, keep it in place until advised otherwise.

Activity and Lifestyle

Rest for the remainder of the day following your procedure. Avoid strenuous activity, heavy lifting, and vigorous exercise for at least four to six weeks. Do not smoke for at least six weeks after surgery. Avoid direct sun exposure to incision sites for three months, and use a high-factor sunscreen when outdoors. Most patients can return to light desk-based work within two to four weeks. More physical roles may require a longer period of rest.

When to Seek Help

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

Contact Us or Seek Urgent Help If You Have:

- ⚠ Heavy or rapidly increasing bleeding or swelling on one side of the face
- ⚠ Severe pain not controlled by prescribed analgesia
- ⚠ Signs of infection: increasing redness, warmth, swelling or fever after day 3
- ⚠ Any new weakness of the face or difficulty closing the eye
- ⚠ Difficulty swallowing or breathing
- ⚠ Any other symptom that concerns you

Medications

You may be prescribed one or more of the following:

- Analgesics (painkillers): Ibuprofen and/or paracetamol are usually sufficient. Take as directed.
- Antibiotics: May be prescribed if there is a clinical indication. Complete the full course.
- Dexamethasone (steroid): May be given during the procedure to reduce post-operative swelling.
- Tranexamic acid: A medication that can help reduce swelling.

What to Expect During Recovery

Timeframe	What Is Normal
Day 1	Numbness and tightness from the anaesthetic and dressings. Mild to moderate swelling and bruising beginning to develop. Some oozing from wound sites is normal.
Days 2–3	Swelling and bruising peak during this period and are typically at their most noticeable. The face may feel tight and movement may be limited. Pain should be manageable with prescribed analgesia.
Days 4–7	Bruising and swelling begin to improve. Skin stitches are removed at around day 7. The face becomes more comfortable and mobile.
Weeks 2–3	Most visible bruising has resolved. Swelling continues to reduce. Many patients feel comfortable returning to light work and social activities during this period.
Weeks 4–6	The majority of swelling has resolved. Most patients can return to exercise. Scars continue to mature and soften.
Months 3–6	Subtle swelling continues to resolve and soft tissue settles fully into its new position. Scars continue to fade. The final result is typically appreciated from around three to six months onwards.

Follow-Up

A follow-up appointment will be arranged at around six weeks to review your healing and result. Skin stitches are typically removed at around seven days — this appointment will be arranged for you. If you do not receive appointment details, please contact Albyn Hospital.

Alternatives to Surgery

Non-surgical alternatives such as injectable treatments and skin tightening procedures can provide some improvement to facial laxity, but are generally less effective and less durable than facelift surgery for significant skin excess and jowling. MyEllevate® neck lift is a minimally invasive option that may be appropriate in selected patients, particularly for improvement of the neck and jawline definition. Mr McDonald will discuss all relevant options with you at your consultation.

Mr Chris McDonald MBChB BDS MFDS FRCS(OMFS) RCS Ed

Consultant Oral & Maxillofacial Surgeon | www.surgeryaberdeen.com