

PATIENT INFORMATION LEAFLET

# Brow Lift Surgery

*(Forehead Lift)*

A guide to your procedure, consent, and recovery

## Introduction

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This leaflet has been prepared to help you understand brow lift surgery (forehead lift). 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 Brow Lift?

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A brow lift, also known as a forehead lift, is a surgical procedure to raise the position of the eyebrows and reduce the appearance of deep horizontal forehead wrinkles, giving the eye area a more open, alert, and youthful appearance. It is frequently performed alongside upper eyelid surgery (blepharoplasty), as the two procedures complement each other and together can achieve a more complete rejuvenation of the upper face.

## Why Has This Been Recommended?

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Skin loses elasticity with age. In the forehead and brow area this causes:

- The eyebrows to lower and droop (brow ptosis), which can make the eyes appear heavy or hooded
- Excess skin to accumulate on the upper eyelids, worsened by brow descent
- Deep horizontal wrinkles to form across the forehead
- A tired, stern, or aged appearance to the upper face

Brow lift aims to address the position of the eyebrow and improve the appearance of the upper face. It is important to understand that while it can improve the appearance of the upper eyelids, further surgery (blepharoplasty) is often needed to fully address excess eyelid skin. Laughter lines at the corners of the eyes and folds of excess skin extending onto the cheek will not be improved by brow lift alone.

## About the Procedure

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### Type of Anaesthesia

Brow lift can be performed under local anaesthetic, intravenous sedation, or general anaesthetic. Mr McDonald will discuss the most appropriate option based on the technique used and your individual circumstances.

### Surgical Techniques

There are several approaches to brow lifting, and Mr McDonald will discuss which is most suitable for your anatomy and goals:

**Direct Brow Lift:** An incision is made at the upper border of the eyebrow. Skin is removed and the brow is lifted and sutured into its new position. This technique gives very predictable results and is particularly effective for significant brow ptosis, but leaves a scar immediately above the eyebrow. This scar typically settles well over time but should be discussed with your surgeon.

**Gliding Brow Lift:** One longer incision (4–5 cm) or two smaller incisions are made high in the forehead, at or within the hairline. The skin above the brow is freed and lifted, and sutures are placed above the brow to hold it in position. Further rows of sutures running up the forehead (usually three or four rows) are placed and removed two to three days after surgery. This technique places the scar at the hairline where it is less visible and allows good control over where the brow is repositioned. Swelling and bruising is much more pronounced than with direct brow lift.

## Risks and Complications

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Complications following brow lift surgery are uncommon, but it is important that you understand the relevant risks before consenting to treatment.

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

- **Swelling and Bruising:** Swelling and bruising around the forehead and eyelids are expected and are most noticeable in the first 24 hours. Occasionally the whites of the eyes may appear red or blue. Cold compresses and sleeping propped upright help to minimise swelling. Most bruising resolves by the end of the second week.
- **Itching and Numbness:** The forehead may feel itchy and numb for several weeks after surgery as the nerves recover. This is normal and expected.
- **Temporary Tightness:** The forehead and brow feel tight following surgery. This improves as swelling subsides and the tissues settle.

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

- **Scarring:** All surgical incisions produce scars. Brow lift scars are placed at or within the hairline where possible, and in most cases become very difficult to see with time. The direct brow lift produces a scar above the eyebrow which, while usually inconspicuous, is more visible than hairline scars.
- **Deep Stitch Reactions:** Deep stitches are often used to hold the brow in its new position. Occasionally these can cause a reaction, become infected, or become visible through the skin, requiring attention or removal.
- **Infection:** Infection is uncommon and can be minimised by good wound care and antibiotic ointment as directed.
- **Bleeding:** Minor bleeding is usually easily managed. Significant bleeding is uncommon.

### Uncommon but Serious Risks

- **Permanent Altered Sensation:** Numbness or altered sensation of the forehead can, be long-lasting or permanent due to nerve injury.
- **Nerve Damage Causing Muscle Weakness:** Injury to the nerve supplying the forehead muscles or eyelid is rare but can cause weakness of the forehead or difficulty lifting the eyelid. This is usually temporary but can in rare cases persist.
- **Asymmetry or Brow Position Dissatisfaction:** Perfect symmetry is not achievable. In some cases the position of one or both brows may not meet the patient's expectations.

## 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 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 or medical conditions — particularly thyroid disease, high blood pressure, diabetes, or eye disorders such as glaucoma or a detached retina.
- If having sedation or general anaesthesia, fasting instructions will be provided. 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.
- 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 reduce the risk of complications.

### Immediately After the Procedure

Swelling and bruising of the forehead and around the eyes is expected. Rest with your head elevated — sitting upright or semi-reclined rather than lying flat. Apply cold compresses (wrapped in a cloth) gently to the forehead during the first 24 hours. Avoid bending forwards or any activity that increases pressure to the head.

### Pain and Swelling

Discomfort after brow lift is usually mild to moderate. Paracetamol can be taken four times a day and ibuprofen three times a day. Swelling and bruising peak in the first 48–72 hours and then gradually improve. Most bruising has resolved by two weeks. If sutures are placed in rows up the forehead, these will be removed two to three days after surgery.

### Wound Care

Keep incisions clean and dry as instructed. Do not apply makeup to or around the incision sites for at least 48 hours. Hairline stitches are typically removed at around seven days. If rows of forehead sutures are used, these are removed at two to three days as arranged.

### Activity and Lifestyle

Rest for the remainder of the day of your procedure. Avoid strenuous exercise and heavy lifting for at least two to three weeks. Avoid direct sun exposure to incision sites and use

a high-factor sunscreen when outdoors during the healing period. Do not smoke for at least six weeks after surgery. Most patients feel comfortable returning to light desk-based work after one to two weeks.

## 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
- ⚠ Severe pain not controlled by prescribed analgesia
- ⚠ Signs of infection: increasing redness, warmth, discharge, or fever
- ⚠ New weakness of the forehead, brow, or eyelid
- ⚠ Inability to fully close the eye
- ⚠ Any change in vision
- ⚠ Any other symptom that concerns you

## Medications

- Analgesics: Paracetamol and/or ibuprofen as directed. Do not exceed the recommended dose.
- Antibiotic ointment: Apply to incisions as directed to reduce infection risk.
- Lubricating eye drops: Use if eyes feel dry or irritated following surgery.

## What to Expect During Recovery

Timeframe	What Is Normal
<b>Day 1</b>	Tightness, swelling, and bruising of the forehead and upper face. The eyes may feel heavy or appear partially closed due to swelling. Some oozing from wound sites is normal.
<b>Days 2–3</b>	Swelling and bruising are at their most pronounced. Forehead sutures (if used) are removed at this stage. The brow position may appear over-elevated initially — this settles with time.
<b>Days 4–7</b>	Bruising and swelling begin to improve. Hairline stitches are removed at around day 7. The forehead feels more comfortable.
<b>Weeks 2–3</b>	Most bruising has resolved. Swelling continues to reduce. Many patients feel comfortable returning to light work and social activities.
<b>Weeks 4–6</b>	Numbness and itching of the forehead continue to improve. The brow settles into its new position. Exercise can usually be resumed.
<b>Months 2–6</b>	Scars continue to mature and become less visible. Sensation in the forehead continues to normalise. The final result is fully appreciated from around three to six months.

## Follow-Up

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A follow-up appointment will be arranged at around six weeks to review your healing and the result. Forehead sutures (if used) are removed at two to three days and hairline stitches at around seven days — these appointments will be arranged for you. If you have any concerns in between, please contact the clinic or Albyn Hospital.

## Alternatives to Surgery

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Non-surgical treatments such as anti-wrinkle injections to the forehead and brow can temporarily lift the brow and reduce forehead lines, but the effect is modest and requires ongoing maintenance. For significant brow ptosis or excess upper eyelid skin, surgical treatment offers a more lasting and effective result. Mr McDonald will discuss all relevant options with you at your consultation.

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