EYE BEA

the surgeon to ask the patient to o and close his or her eyes, to get be

ques are commonly used to create double eyelids - the incision al technique and the non-incisional suture technique

THE INCISIONAL TECHNIQUE

In this procedure, the eyelid is marked according to the anatomy of the eye and based on the proposed height of the desired crease. An incision is made and small strips of muscle and fat are and small strips of muscle and fat are then removed. According to Dr. Wu, "The amount and location of removal (muscle and fat) has significant influ-ence on the height, shape, and depth of the new crease."

The wound is closed with tiny The wound is closed with tiny sutures, which create an attachment between the aponeurosis (layers of flat connective tissue separating muscles from each other) and the dermal layer (layer of skin beneath the epidermis that consists of connective tissue) of the skin. According to Dr. Wu, the sutures are remov ed approximately one week later, and the final height and

very year, thousands of people choose double eyelid surgery to improve the way they look. Known as Asian blepharoplasty, double eyelid surgery is an extremely popular request amongst Asians as almost 50 percent are born without a fold in the

upper eyelid.

According to Singaporean plastic surgeon Dr. Woffles Wu, "Double eyelid surgery is the single most sought after procedure among Asians worldwide.

The Asian eyelid is an eyelid without an upper crease; hence, the purobt an upper crease, leave, the pur-pose of the procedure is to change the appearance of the upper eyelid by creating an eyelid crease. According to Dr. Wu, "Many opt for this surgery as single or droopy eyelids can impair vision, and make a person look older



and inattentive Double evelid surgery is a simple and quick procedure that is usually performed under local anaesthe sia, with the patient awake throughout the experience. "A small amount of local

THE CREASES WILL IMPROVE OVER THE CREASES WILL IMPROVE OVER TIME AND GRADUALLY ASSUME THEIR FINAL POSITION AFTER ABOUT FOUR MONTHS. "THE NEW CREASES ON THE EYELIDS WILL ALWAYS LOOK TOO HIGH, TOO DEEP OR ASYMMETRICAL UNTIL SWELLING RESOLVES," POINTS OUT DR. WU.

tion," explains Dr. Wu. He says this is important as the surgeon will need to verify the shape and position of the eyelid crease during surgery – being conscious during the procedure allows

shape of the crease are the result of both selective tissue removal, and pre-cise internal tissue rearrangement.

The advantage of this method com-pared to the less invasive suture tech-

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nique is that it allows the surgeon to address anatomical impediments to crease formation by altering and rearranging internal cyclid ti sue layers. This technique also allo more variation in the final height a

of the crease.

However, one disadvantage is that this technique can be a challenge for an inexperienced surgeon, compared to the suture technique. nique, which is easier to perform. Final healing time is also much longer when an incision is

Usually performed on an outpatient basis the incisional technique takes about an hour to complete.

THE NON-INCISIONAL SUTURE TECHNIQUE

This non-incisional technique involves the This non-incisional technique involves the placement of one or more permanent sutures into the eyelid without the need for an incision, which, in essence, compresses an indentation into place. This technique is popular in Asia and is also called "quick double eyelid surgery" as it can be performed in 20 minutes

The suture method is minimally invasive. faster to perform, involves a faster recover period (as there are no open wounds), and

costs less . One disadvantage, however, is that in most cases, the new crease weakens or dis appears in a matter of years. This is because the crease isn't created by a true anatomical the crease isn't created by a true anatomica rearrangement, but rather, by crushing inter nal tissues into place. Once the sutures weaken, the crease will fade and most patients will need to opt for a revision. A variation of the suture technique,

called the scarless technique, was pioneered by Dr. Wu. The principle is to "pass the nee by Dr. Wu. The principle is to 'pass the nee-dle and thread through the skin of the eye-lid, creating a loop through the skin, and continuing into the cartilage of the tarsal plate (the plate of connective tissue forming the framework of an eyelid)," he says. "You then pull the loop so it closes tightly, so tightly that the loop cuts into the skin and nakes a tiny imperceptible scar – this holds

it in place."
Fully adjustable and reversible, Dr. Wu
says, "If a patient does not like the results, I
will simply make a small nick with a scalpel
beneath the upper lid to release each stitch,
and after a short while, the crease will fall back out of the eyelid."

In Dr. Wu's scarless technique, the sutures will not weaken because the stitches go through the eyelid, as opposed to only going through skin and soft tissue, like that in the

onventional suture technique.

According to Dr. Wu, the only instance



for which his technique may not be surtable is when "dealing with patients with a lot of fat in their eyelids that need to be removed." For this, the incisional technique is the bet-ter approach to achieve a double eyelid.

ALL SAID AND DONE

Surgery is usually performed on an outpatient basis and the patient can go home that same day. Pain after surgery is mild, and a cold com-press should be applied to the eyelids to prevent swelling. It is common for eyelids to be red, swollen and bruised for a few days, with a small amount of bloody fluid draining from the wound.

the wound.

Stitches (for the incisional technique) are removed a week after surgery and incisions will turn red and be slightly bumpy in the first few weeks. Itching, bruising and swelling are common, but will disappear in two weeks.

The first fortnight is the most inconvenient as the patient will need to avoid activities that as the patient will need to avoid activities that dry the eyes such as reading, watching televi-sion, using the computer, wearing contact lenses and applying eye makeup. Sunglasses should also be worn to protect the eyes from wind and sun irritation. The creases will improve over time and gradually assume their final position after about four months. "The new creases on the eyelids will always look too high, too deep or asymmetrical until swelling resolves," points out Dr. Wu.

Potential complications of double eyelid Potential complications of double eyelid surgery, regardless of the type of procedure opted for, include excessive tearing, a decreased sensation in the eyelid, dryness in the eyes, and scarring – but these are only temporary until the eyelids are fully healed. The popularity of this procedure has embolded or man uniformed practitioners.

emboldened many unlicensed practitioners to offer it without the necessary knowledge or

offer it without the necessary knowledge or skill needed. "The double eyelid procedure should only be performed by a trained plastic surgeon," Dr. Wu states emphatically. Patients should be educated on various aspects of surgery and are encouraged to talk about their expectations and discern if surgery will accentuate their face and complement will accentuate their face and complement their features or vice versa. The success of surgery should not be evaluated during the early recovery period as full healing can take anywhere between 12 to 18 months, and some final asymmetry is almost inevitable.