

Brow / Forehead Lift (Endoscopic Brow Lift)

Brow lift surgery rejuvenates the forehead and eyebrows by compensating for the gradual lowering of the brow that occurs with aging. It can also address a receding hairline or a naturally high forehead.

A more rested, refreshed appearance

If the lateral part of your eyebrow is sitting too low, it can give your entire face a tired, even sad appearance. This low position (sitting at the edge of the eye socket) can also create the impression that your upper eyelids have excess skin.

Because we all age differently, depending on whether we are men or women and on the characteristics we inherit, even young people may experience this problem. However, brow lift surgery can address these issues by restoring a more youthful and pleasing brow shape and position.

- When the brow position is low, some people tend to actively lift eyebrows, which leads to forehead lines.
 This behavior tends to disappear when the brow is again in a normal position.
- In addition, in many cases (particularly with younger patients) repositioning the eyebrow may refresh the appearance of your eyes without the need for eyelid surgery.
- Brow lift surgery also has the ability to address the frown muscles, and reduce the tendency that some people have the frown whilst they are focusing.

Your consultation

During your consultation, your surgeon will seek to determine the relationship between your upper eyelid, brow and the upper edge of the eye socket. Once this is clear, he'll lift the lateral (outside) portion of your eyebrow to establish how much correction will be needed to place your brow in the ideal position.

- For women, this ideal position is between five millimeters and one centimeter above the rim of the eye socket for the lateral part of the brow.
- For men, raising the brow this much could create a feminine appearance so the brow is positioned at the rim of the eye socket or slightly above.
- For both men and women the inside corner of the eyebrows should sit either just below or just above the edge of the eye socket.

Once your surgeon has determined the ideal eyebrow position, he will evaluate the appearance of your upper eyelids. If significant excess skin would remain in the upper eyelid area even after brow lift, a combination of brow lift and upper lid lift may provide better results than either procedure alone. This is evaluated in the context of the forehead shape, as it will determine which type of procedure and access is best suited for you.

Your surgery: what to expect

Brow lift surgery is performed under a general anaesthetic and usually involves an overnight stay in hospital. It is often associated with a face lift or eyelid surgery.

Historically, brow lift surgery involved a long cut across the scalp behind the hairline. This procedure, now termed an open or coronal operation, is much less common today but still useful in selected cases. For example, open procedures can be combined with a degree of reshaping of the rim of the orbit, if softening of the facial features is targeted



A variation of this procedure, used to stretch the skin of the forehead and lower the hairline, places the scar on the edge of the hairline at the top of the forehead.

Today, most brow lift surgery is performed through several small incisions in the hair behind the hairline. The procedure, termed endoscopic brow lift, is assisted by the use of an endoscope, a tiny camera and light mounted on a tubular probe and inserted through these incisions. Images acquired by the camera and displayed in magnified form on a screen guide the surgeon as he works.

- During the surgery the tissues of the forehead are lifted from the bone and repositioned higher.
- Frown muscles may be weakened. (Generally they are not destroyed entirely as this could cause the position of the brows to change too much resulting in a startled appearance.)
- The skin is then supported in its new position with a variety of fixation techniques and the wounds are closed, most commonly with skin staples.

A more limited degree of brow lifting can also be done through the incisions made for an upper lid blepharoplasty or through the incisions made at the upper part of a face lift. This is called Browpexy for the former and temporal lift for the latter.

After your surgery

In the time after your surgery there are a number of things of which you should be aware.

The staples used to close your incisions will be removed at your 7-10 day follow-up visit. Although anticipated by most patients with apprehension, removal of staples is a painless event, and staples have the advantage of protecting the hair follicles much better than stitches.

- You should expect some bruising around your forehead. It is wise to limit vigorous activity to keep this bruising under control.
- You may also experience headaches for the first few days. Any discomfort you experience can be controlled by taking paracetamol or medication provided by the hospital. Do not take aspirin or other anti-inflammatory medication as these can promote bleeding.
- In the first few weeks after surgery your eyelids may not close fully. This can lead to irritation of the eye so it is important to use lubricants and eye moisturizers like artificial tears to protect your eyes from drying out, particularly at night.
- The position of your eyebrows immediately after surgery is a little higher than the end result but will settle within the first few months.
- The primary risk related to brow lift surgery is decreased sensation in the forehead. This is most commonly only temporary and is related to stretching of or injury to nerves at the edge of the eye socket.
- There is also a relatively low risk of damage to the nerves that move the forehead. This can lead to asymmetry in the forehead lines and the position of the eyebrows.
- It is very rare but also possible to experience reduced hair density around the incision lines. This is more common in people with fine hair and can be improved by scar revision.



More Information

Naturally, there will be many questions you will want to ask before making any decisions about undergoing surgery. Also you will wish to meet you Surgeon - having trust and confidence in one's Surgeon is very important.

Surgery is unique to every patient and a detailed discussion and assessment between you and your Consulting Surgeon is essential in enabling you to make a decision based on correct personal information and advice.

Arranging a medical consultation does not obligate you to anything other than attending the appointment. There is no obligation to proceed with treatment. This is entirely a matter for your decision, after the surgeon has decided on the feasibility and accepted you as suitable.

If you would like to know more information we will be happy to answer any queries either by email, letter or telephone, so please do not hesitate to get in touch.

Mr Lucian ION, FRCS

An experienced aesthetic surgeon, Mr. Ion trained in both Europe and the UK. He received his medical degree from the University of Bucharest and started his general and plastic surgical training in Paris where he studied in several prestigious hospitals.

He continued his training in Britain and passed the examinations to become a Fellow of the Royal College of Surgeons. His advanced training in plastic, reconstructive and aesthetic surgery was completed in central London plastic surgery units covering all the aspects of the specialty. This training included a fellowship in aesthetic surgery at The Wellington Hospital in London.

Once his training was complete, Mr. Ion successfully passed both the Intercollegiate Board exam in plastic surgery and the European Board exam in the specialty, and was included on the Register of Medical Specialists of the General Medical Council, under the entry, plastic surgery.

Mr. Ion is a member of the British Association of Plastic Reconstructive and Aesthetic Surgeons; the British Association of Aesthetic Plastic Surgeons, and the British Burn Association, as well as an international candidate for the American Society of Aesthetic Plastic Surgeons.