

# Facelift

As people age, the effects of gravity, exposure to the sun, and the stresses of daily life can be seen in components of their faces. Deep creases form between the nose and mouth; the jawline grows slack and jowly; folds and fat deposits appear around the neck. A facelift (technically known as rhytidectomy) can't stop this aging process. What it can do is "set back the clock," improving the most visible signs of aging by removing excess fat, tightening underlying muscles, and re-draping the skin of your face and neck. A facelift can be done alone, but is commonly done in conjunction with other procedures such as a forehead lift, eyelid surgery, fat grafting or nose reshaping.

When considering a face lift write down the your three most important concerns, such as, my neck, these creases next to my mouth or my cheek bones have dropped. Before you decide to have surgery, think carefully about your expectations and discuss them with your surgeon. Next, be aware that a facelift is for anatomical facial improvement. It will not help with most fine wrinkles or skin discolorations. Laser resurfacing or tissue fillers may be required to correct these issues.

The best candidate for a facelift is a man or woman whose face and neck have begun to sag, and whose bone structure is strong and well-defined. Most patients are in their forties to sixties. Facelifts can be done successfully on people in their seventies or eighties as well. Facelifts are very individualized procedures and often involve several components. Divide your face into three parts. The first is from the eyebrows up the, the eyes and nose and finally from the cheeks down. The last area is the anatomical are usually addressed by a face lift. In your initial consultation the surgeon will evaluate your face, including the skin and underlying bone, and discuss your goals for the surgery.

Be sure to tell your surgeon if you smoke or are taking any drugs or medications, especially aspirin or other drugs that affect clotting. Smoking can contribute to many complications that can occur with facelifts. Bleeding resulting in a clot under your skin or a hematoma is one of the most common complications of a facelift.

There are many types of facelifts available from short scar to deep plane techniques. Discuss with your plastic surgeon which technique will result in achieving your goals and the best long term result. Often combined procedures , such as , facelift, liposuction of the neck and a bletharoplasty are performed.

After surgery in the beginning, your face may look and feel rather strange. Your features may be distorted from the swelling, your facial movements may be slightly stiff and you'll probably be self-conscious about your scars. Some bruising may persist for two or three weeks, and you may tire easily. It's not surprising that some patients are disappointed and depressed at first. By the third week, you'll should begin to look and feel much better. Most patients are back at work about ten days to two weeks after surgery. Remember, cover or special camouflage makeup can mask most bruising that remains.

The chances are excellent that you'll be happy with your facelift. Especially if you realize that the results may not be immediately apparent. You'll have some scars from your facelift, but they're usually can be hidden by your hair or in the natural creases of your face and ears. Having a facelift doesn't stop the clock. Your face will continue to age with time, and you may want to repeat the procedure one or more times — perhaps five or ten years down the line. It is important to maintain your facial skin during this time. Consider a basic skin care program. Consult your plastic surgeon as to which program will best fit your skin type to maintain the results of your facelift over time.