

GLIDING BROW LIFT

A brow lift surgically elevates the brows to a higher position. "Gliding" means that skin and brow are separated off the underlying muscle and moved higher. The skin and brow are then fixed to the muscle underneath with a quilting type of suture, also known as a "hemostatic net". The quilting sutures are visible, but vital to securing the longevity of the lift. The sutures are removed after 48-72 hours. This allows enough time for a bond to form between the skin and the muscle. There are also a few small stitches in the eyebrow itself that are removed after five or six days. There is usually some swelling and very commonly some bruising. It is not considered a complication, but integral to the process which occurs and takes about at the longest three weeks to completely dissipate. Since the tissue can relax, Dr. Pautler usually over-corrects each brow lift by about 20%. The procedure can be done alone or in conjunction with a facelift or upper and lower eyelid surgery. The procedure itself takes about an hour. It is very good at lifting the tail of the brow and it can also be used to lift the entire brow including the medial brow near the top of the nose. The incisions are extremely small, only four incisions in the hairline no longer than ½ cm or so. The shortcomings of this procedure are that no skin is removed so the hairline cannot be lowered. Also, because the incisions are so small and no endoscope or camera is used, the muscles that cause the wrinkles above the nose, also known as the '11's, cannot be removed. Because the skin is lifted and positioned higher, most often horizontal wrinkles on the forehead are tremendously improved. Any patient undergoing a gliding brow lift has to accept the following possible complications or short comings:

- Numbness. There will inevitably be numbness of the forehead and the anterior scalp. This is impossible to avoid and is not considered a complication. It can last a few months and as the sensation comes back, it is preceded by a lot of itching. This is entirely normal. Permanent numbness is extremely rare, but possible.
- Hair loss. Any surgery along the forehead where there could be some dissection around hair follicles could possibly result in hair loss. This is usually temporary and just because of trauma to a hair follicle. The incisions are so small with the gliding brow lift that hair loss is extremely rare.
- Nerve injury. A nerve that supplies motor innervation to the forehead muscle, which controls lifting the brow, could possibly be stretched or damaged and there could be some temporary asymmetry to the lifting of the brows, right vs. left. It is extremely difficult to cut a nerve with this technique, but not difficult to injure or stretch a nerve. Fortunately, these types of injuries are transient and full recovery is expected within a few weeks to a couple of months.
- Asymmetry. Dr. Pautler makes every effort to make the brow symmetric. However, many patients have a pre-existing stronger brow on one side vs. the other and this is related to the way the muscle functions. The lift has no effect on the muscle strength. Therefore, if the patient has a pre-existing brow asymmetry due to the fact that one muscle lifts the brow higher than the other, it will most likely persist. This is not a complication, this is just an intrinsic anatomic variation that this type of surgery cannot correct.
- Skin bunching. When the skin is lifted, there is no removal of skin. The scars are really small. There is often a little bit of skin bunching in the hair-bearing scalp that can be palpable, rarely visible. This should not cause concern because it always goes away. It may take longer in some patients compared to others, but rarely needs further treatment.

- Brow dropping. It is possible that some asymmetry could occur postoperatively and not because of a pre-existing asymmetry in the muscle, but from the bond weakening early in the postoperative period causing one or both brows to drop. This can be corrected by repeating the lift and applying another hemostatic net or quilting suture.
- Bruising and swelling are completely normal and to be expected. A lot of local anesthetic is used, which constricts blood vessels. However, once the local wears off, some blood vessels may dilate and there could be some bruising. The incisions are so small that it is impossible to use a cautery instrument. The hemostatic net is helpful in reducing the amount of bruising, but there is always some that can occur because the blood supply to the face is so rich. It is impossible to have this brow lift and not have any bruising. Bruising is completely normal and it is not considered a complication and always resolves.
- Suture marks. The hemostatic net or quilting suture can occasionally leave a temporary dot where it entered or exited skin. Usually this is of no consequence and goes away. However, patients who do have darker or olive skin and tend to hyper-pigment may need to use a bleaching agent in the early postoperative period should there be some brown marks that persist.
- Scars. The incisions are so small that any visible scar from the browlift that is not related to the hemostatic net is extremely rare.