

# keep it local

Edina dermatologist and cosmetic surgeon **Patrick Carney MD** explains the advantages of cosmetic surgery performed under local anesthetic.

It is natural to assume that the majority of cosmetic surgery procedures need to be conducted under a general anesthetic. But today a number of procedures, including procedures for the face, eyes, neck and jowls, can actually be performed virtually pain-free under local anesthetic.

Edina dermatologist and cosmetic surgeon Patrick Carney MD was trained as a cosmetic derma-surgeon to perform all of his procedures while the patient is awake. Because of this he feels comfortable utilizing local anesthetic for his surgical procedures.

In Dr. Carney's opinion, surgery with a local anesthetic is more convenient for patients because they often prefer to experience a familiar environment for their surgery. With a local anesthetic they can have the procedure performed

at the surgeon's premises instead of having to attend an unfamiliar surgery center.

Another influence on the decision to have a procedure under a local anesthetic is expense. The additional expense incurred by the need for an anesthesiologist or certified nurse anesthetist, plus the cost of a hospital operating room or day surgery center, needs to be factored into the overall price of the procedure.

Dr. Carney also notes that the local anesthetic doesn't necessarily make the procedure any faster, but recovery time is potentially decreased. 'This is because of the reduction in potential postoperative complications that can result from a general anesthetic. The nausea, vomiting, hematoma, bruising and swelling sometimes associated with a general anesthetic would extend the

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recovery time,' he says.

Dr. Carney performs facial cosmetic surgery and liposuction, particularly of the neck, abdomen, thighs, hips, lower back ('love handles'), and male and female chest area, under local anesthesia. In the following, he discusses facial procedures he performs with a local anesthetic.

### Blepharoplasty

Blepharoplasty (eyelid surgery) is performed to correct puffy bags below the eyes and drooping upper eyelids. The procedure is designed to remove fat, often along with excess skin and muscle, from the lower and upper eyelids. It is now a common procedure and it is usually performed under general anesthetic in hospital. However, Dr. Carney performs the blepharoplasty procedure under local anesthetic, avoiding the inherent risks associated with general anesthetics.

Thirty minutes prior to their blepharoplasty procedure, Dr. Carney's patient will have a topical anesthetic applied so that the injection of the local anesthetic during the surgical preparation is painless. It usually takes the adrenaline about 12 minutes to take its full effect. At that point, the surgery can be performed painlessly without any general anesthetic, IV sedation, or intramuscular anesthetic or analgesics.

**'Today a number of procedures can actually be performed virtually pain-free under local anesthetic'**

### Lower blepharoplasty

There are a number of approaches to lower blepharoplasty surgery, including the transcutaneous and transconjunctival approaches. With a transcutaneous approach an incision is made just below the lash line and skin tightening is performed surgically. In this case, the patient would have a visible incision with sutures and a scar.

Dr. Carney prefers the transconjunctival lower lid blepharoplasty approach. With this approach, the incision is made inside the lower lid, and the three fat pads – medial, middle and lateral – are removed. The surgery is quicker because no suturing is required and there are no external scars. It also has fewer risks, less bruising and swelling, and a more rapid recovery. Dr. Carney emphasizes that it is important to anticipate whether any excess skin will be created by the removal of the fat pockets. If this is the case, a skin tightening procedure would be necessary at the time of surgery. 'It is better for it to be included in the postoperative healing rather than the patient experience another healing period at a later date,' he adds.

In his standard approach to lower lid surgery, Dr. Carney also tightens the skin under the eyes. He uses the pure 88

percent phenol peel or, in severe cases, the Baker-Gordon peel. He explains, 'The Baker-Gordon peel is actually more effective than straight phenol because it includes croton oil, Septisol soap and water. These three agents make the peel ideal for more advanced cases or cases that need skin resurfacing.'

### Upper blepharoplasty

According to Dr. Carney, every surgeon takes a fairly standard approach to upper blepharoplasty. The surgery is relatively straightforward, with all surgeons utilizing a standard elliptical-shaped excision.

'It is important to inform the patient there is a tendency to lower the position of the eyebrow by removing eyelid skin in the vertical direction,' he explains. 'Because of this, the patient and evaluating physician need to determine if it is the brow or the eyelid that is causing the problem – brow ptosis (droop) or lid ptosis. You always have to consider the brow position because if you don't and the patient already feels uncomfortable with a low brow, the standard blepharoplasty may potentially make the situation worse.'

In the procedure the skin layer is removed followed by the muscle, called the orbicularis oculi, then the nasal and medial fat pads. The incision is then repaired using standard Prolene sutures. These are removed on the fifth postoperative day.

With Dr. Carney's lower and upper blepharoplasty procedures patients can usually return to work in a week, and it is not unusual for a patient to have their procedure on a Thursday or Friday and then return to work on the Monday. Blepharoplasty surgery opens the eye area and results in a more youthful appearance.

### Facial rejuvenation

Correction on the lower third of the face usually comes from the patients desire to correct sagging jowls, redundant neck skin or deep nasolabial grooves. 'The standard rhytidectomy, or facelift, which encompasses re-suspension of the SMAS (submuscular aponeurotic system) using plication sutures to re-suspend the neck, jowls and nasolabial folds, is an ideal solution,' he says.

Dr. Carney believes today some patients are choosing to have a thread lift instead of a facelift because they feel they are not ready for a facelift. This may be because of anxiety over having a general anesthetic, because they think they are too young for a facelift, or simply because they worry about having what they perceive to be 'big-time' surgery. Instead they are choosing to have non-ablative, no-downtime, nonsurgical treatments such as the thread lift or resurfacing. But it is Dr. Carney's opinion that the cost of these procedures can be excessive and the results modest.

'With the stitch lift, depending on the surgeon who did the training, either barbed sutures or looped barbed sutures are utilized,' explains Dr. Carney. 'But some studies indicate that the barbed sutures are potentially

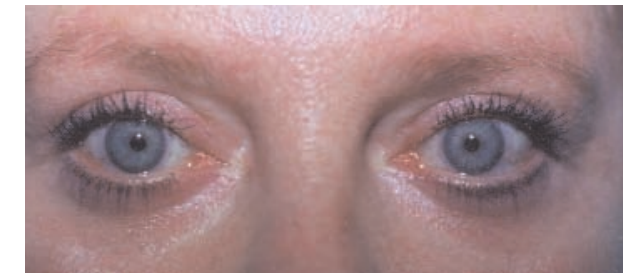
unable to have any staying power or longevity when it comes to re-suspending the lower third of the face.

'In addition, a problem that may occur with the looped barbed sutures is too much bunching in front of and behind the ear. This can look very unnatural and many patients are unwilling to accept that result. This makes the procedure, in my opinion, a poor choice and as a result of that I am no longer performing the thread lift procedure. The only place I think a threadlift is effective is in the brow because the surgeon can tie a knot into the hairline where there is little bunching or it can't be seen.'

Dr. Carney says, 'Many people do actually want a facelift but are anxious about undergoing what they perceive to be a major procedure. But with the Local Lift it is possible to achieve effective, long-lasting results without the need for a general anesthetic in a hospital. With the Local Lift patients get the effect of a full facelift and yet psychologically are usually more willing to accept the terms of the procedure



BEFORE



AFTER blepharoplasty by Dr. Carney



BEFORE



AFTER the Local Lift by Dr. Carney



BEFORE



AFTER liposuction by Dr. Carney