

This information sheet is designed to provide more information for patients awaiting oculoplastic surgery by Mr David Cheung. Further information is available from Mr Cheung's patient website: www.mrdavidcheung.com

What is Oculoplastics?

Oculoplastics is a subspecialty of eye surgery, dedicated to the care of problems around the eye itself. Oculoplastic surgeons, such as Mr Cheung, are specially trained to deal with diseases of:

- The eyelids e.g. droopy eyelids, eyelid bags, deformities of the eyelids, eyelid tumours.
- The lacrimal system (tear duct system) e.g. watery eyes
- The socket itself e.g. patients with artificial eyes, thyroid eye disease

Your Operation

- You may have been given a provisional date for surgery when you were seen by the doctor in clinic. Although, we try our utmost to uphold our promise to operate on this provisional date, occasionally we may be unable to.
- We understand the stress and inconvenience that these changes often cause; however changes in the date of your operation are often necessary to accommodate other patients whose need for surgery may be more pressing e.g. sight or life threatening disease, eye emergencies, etc. We apologise for this in advance if it does happen to you but hope you understand why this may occur.

- Patients under the care of Mr Cheung will either have their oculoplastic surgery done personally by him or by one of his team

Before the Operation:

*Special Instructions for patients taking **blood thinning medications***

- These tablets are often prescribed by your GP, cardiologist or haematologist to thin your blood.
- These medications may pose a problem for patients undergoing oculoplastic surgery because they can cause excessive bleeding during surgery and increase the amount of bruising afterwards. This can make surgery more difficult and less successful.
- If you are taking **Aspirin** or **Clopidogrel**: We therefore advise you to stop these tablets a fortnight prior to surgery. You should then restart taking the tablets again on the day following your operation.
- If you are taking aspirin or clopidogrel as recommended by your cardiologist following the insertion of coronary artery stents, then please inform Mr Cheung or his secretary. We would normally request that you continue taking this medication since the benefits of stopping them may be greatly outweighed by the risks of stopping them.
- If you are taking **warfarin** for atrial fibrillation (AF), deep vein thrombosis (DVT) or a previous pulmonary embolus (PE), we advise you to refrain from taking your warfarin tablets for the two days before your operation. A blood test to check your clotting levels may be required to

ensure that you are safe to undergo surgery. You should then restart taking your warfarin tablets on the same dose as before on the day after your surgery, but you should contact whomever usually routinely monitors your warfarin/ clotting levels

- If you are taking warfarin because of previous heart valve replacement surgery, you must notify us immediately since special precautions will need to be taken in conjunction with your cardiologist, GP and haematologist.
- If you have any concerns regarding your medication, please get in touch with your GP first, since he/she is likely to be able to address them more efficiently.
- If you are taking some of the novel oral anticoagulants agents such as **apixaban**, **rivaroxaban**, **dabigatran**: we would recommend that you refrain from taking it for 48 hours before the operation and on the day of surgery. You should then restart it on the day after surgery.

Leading up to & on the day of surgery

- You should refrain from smoking, chocolate, spicy foods and alcohol for 2 weeks before and after your surgery since this interferes with wound healing making your operation less predictable.
- Clothing: To make it easier and safer during the surgery, it is advisable that you refrain from wearing tight collared shirts/ blouses and any clothing which may contain metal e.g. belts, braces. Women should refrain from wearing

tights and underwired bras. Please refrain from wearing metallic jewellery if possible.

- **Men should ideally be clean shaven.** Having a beard may prevent us applying wound dressings and increase post surgery infection risk.
- Please refrain from using any facial moisturiser/ creams on the morning of surgery
- It is advisable that you do not drive on the day of surgery and attend the hospital with someone.

After my operation

- Mr Cheung will inform when he wishes to see you again prior to you leaving hospital. An outpatient appointment may be sent out to you through the post. However, if you fail to receive an appointment, please contact the outpatient department to enquire.
- A variable amount of bruising, swelling and tenderness is quite normal following most oculoplastic surgery. This usually resolves quite quickly
- Pain relief: Do take painkillers e.g. paracetamol to reduce the associated discomfort.
- You may leave hospital with a dressing. You will be told if and when you are required to remove this at home.
- To protect the operation site, you may also be given a plastic eye shield to wear at night for a week. This will guard against you rubbing the operation wound site inadvertently during sleep.

This can be held in place using normal sticky tape or dressing tape e.g. micropore tape.

- Cold Compresses: Patients undergoing surgery for droopy eyelids (ptosis), eyelid bags (blepharoplasty) or brow lifts are usually advised to apply cold compresses to the operation site, after the removal of their dressings. This is to reduce the swelling and improve healing. This may be done by either using ice or frozen peas wrapped in a clean towel. For best effect, Mr Cheung recommends that cold compresses be applied for 20 minutes out of every waking hour for two days following the removal of the dressings and then four times a day for the following 3 days.
- Drops: You may be prescribed drops/ ointments following your surgery. Please use as advised.
- Wound Care: It is not uncommon to develop some crusting at the wound site. It is better to leave this alone initially. After five days any excessive crusting can be cleaned away by gently dabbing it off with cotton wool ball dipped in boiled water which has been allowed to cool

Lid, Lacrimal and Orbital Service
Ophthalmology Department
Sandwell General Hospital, Birmingham

Lid, Lacrimal and Orbital Service
Ophthalmology Department
Russells Hall Hospital, Dudley

Private Practice:
West Midlands Hospital, Halesowen
Priory Hospital, Birmingham
Edgbaston Hospital, Birmingham

www.mrdavidcheung.com

Read Me

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