

CERVICOPLASTY **(Neck Lift)**

A neck lift rejuvenates the neck and is suitable for patients who are not ready for a facelift, are younger, or who have localized aging to the neck area only. Aimed mostly at improving sagging neck skin and muscles, a neck lift can sometimes soften mild jowling. It will not improve large jowls, sagging cheeks are a neck that has an overwhelming amount of loose skin and fat. For these features, a facelift is more appropriate. A small incision is made under the chin and through it, Dr. Pautler removes fat and tightens the muscles. For patients that have a pronounced amount of fat, liposuction can be added. Skin tightening is achieved by removing a crescent-shaped portion from behind the ear and concealing an additional scar in the same area. The surgery is outpatient, most often done under intravenous sedation (general anesthesia is not usually necessary) and takes about one to two (1 to 2) hours. Afterwards, a compression garment is worn for a week straight and then nightly for another ten (10) days. Suture removal takes place about a week to 10 days later. The risks involved are similar to most facial surgery procedures and are outlined below:

1. Bleeding: There will be some bruising and this will gradually go away. Any bleeding that is excessive may form a collection that Dr. Pautler may need to aspirate with a needle. There is always a very remote risk of needing to return to the O.R. to control bleeding (as is true with any facial surgery) but this is extremely rare.
2. Lumpiness: This is quite common and is more often palpable rather than visible. With time, tissue softens and lumpiness dissipates. This is especially applicable if liposuction has been added. Time and massage are useful and rarely Dr. Pautler may prescribe ultrasound treatment if there are stubborn areas of scar tissue.
3. Nerve injury: Possible, but rare. Nerve injuries, if they occur, are most often temporary. They appear as weaknesses of particular facial muscles, for example a slightly crooked grimace of the mouth. Most of them resolve in about a month to six weeks. Permanent nerve injuries are very remote.
4. Numbness: The lower part of the face may have areas of numbness that may make the face feel swollen or big. This is common and resolves with time.
5. Skin Loss: This can occur from poor circulation to the skin in combination with some tension from the surgery, which at times is unavoidable. It is often preceded by blisters, redness, and in rare instances, small areas of skin death that look like small ulcers. It most frequently occurs behind the ears, but other areas can be affected too. The areas will need topical medicine and will heal in a delayed fashion. Scarring is rare, but can occur. This complication occurs more frequently in smokers, diabetics, and people who take steroids.
6. Sagging: After healing, some patients may feel that their skin was not pulled tight enough. This may result from an unusually large amount of swelling or from poor skin elasticity that makes the skin stretch sooner than desired. This

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is an unalterable feature in some patient's skin. Additional surgery may be required.

7. Infection: Highly unusual, but treated with antibiotics and/or wound care.