

Ptosis Surgery.Service Page.Dr. Dan Landmann.KA

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/ptosis-surgery

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Meta Description: Ptosis surgery in River Edge, NJ, helps you look less tired, look more awake and refreshed, improves eyelid asymmetry, and look great in selfies.

What is Ptosis and what are the options for patients in River Edge, New Jersey?

Ptosis is known as the drooping of the upper eyelids. This issue tends to affect countless individuals. Usually - their first complaint is looking or feeling like they have tired eyes - despite not being tired. In fact, after COVID, I see way more young patients in their 20s and 30s than in the past - often notice they look drunk or tired in Zoom meetings. Ptosis can be congenital or acquired, but most patients have the acquired form, which is easier to treat. Regardless of the cause, Ptosis can really bother patients - either because of the way they look, the way they feel about themselves or if it's really bad, it can block your vision.

What can be done for Ptosis?

So, if you have Ptosis - or think you have ptosis, I am here to help! I am Dr. Dan Landmann, and I'm a cosmetic oculoplastic surgeon here in River Edge, New Jersey. The 3 most common surgeries I do are Blepharoplasty, ptosis and lower lid bag surgery. And while I love doing all 3 - I really enjoy ptosis surgery - because it is very meticulous, which is the type of surgeon that I am.. and I find it very gratifying for patients. The patients literally feel like a weight has been lifted off their eyelids, they look so much more refreshed -so it's very enjoyable to share that experience with my patients. So, if you're interested in this page - then I'd love to have the opportunity to help you - just call (201) 696-2646 and I'd be happy to evaluate you and explain your treatment options.

What Causes Ptosis and what are the symptoms of Ptosis?

There are several reasons an eyelid may droop down. A few people are just born with it in one or both eyelids. Sometimes the drooping lid is the result of nerve or muscle damage. However, for most patients, Ptosis happens when the tendon that lifts the eyelid gets stretched out, sometimes by injury or trauma, but usually, it just happens and no cause is identifiable. Each form of Ptosis needs to be treated differently. So, when I see you in my office, I examine your eyes to determine your exact type of Ptosis and help you understand the cause and the possible treatment options.

It is pretty common for Ptosis to happen as you get “less young”. The eyelid's skin and muscles stretch over time. Sometimes, previous eye surgery can speed up the process because the instruments used to keep the eyes open can stretch the lids. That being said - I commonly see young patients with Ptosis. Younger patients will notice Ptosis in their Instagram selfies and on Zoom calls at work. Even though they slept well, they looked tired or half asleep.

What will Ptosis Surgery do for me?

After successful Ptosis repair surgery, you will:

- See an improvement in eyelid symmetry, height and contour
- You will look much more awake and refreshed
- Some patients look much more youthful
- Enjoy improvements in your field of vision

What are the Different Ptosis Treatment Options?

When it comes to Ptosis, I don't have a cookie cutter approach. When you schedule a consultation with me, my goal is to help you weigh the risks, benefits, and alternatives to surgery. And it's my personal mission to provide the best quality medical advice for all of my patients.

Ptosis treatment options include:

- Internal Repair—aka Mullerectomy (MMCR), aka Conjunctival Muller's Muscle Resection. This is by far the most common way I repair ptosis. There are a ton of reasons for this. The main advantage of this procedure is that it produces the most consistent and aesthetically pleasing results. The surgery does not alter the contour of your eyelid, so you maintain your natural upper eyelid shape, but it

simply lifts it up. Some patients are hesitant to have surgery because they are worried about anesthesia. If you don't want anesthesia, I do this procedure in the office, without anesthesia, just a local numbing medication almost every day of the week. But some patients are afraid that they are going to move or be nervous during the procedure, in which case you can do the procedure while under twilight anesthesia with an anesthesiologist. During your consultation, I will figure out how much to lift your eyelid, so you don't need to open your eyes during the procedure. The procedure is always done in an outpatient setting, almost always in the office and never in the hospital.

- External Repair—aka Levator Advancement. This is an older technique, and while I consider myself an expert in this approach, I rarely if ever need to perform it. Here's why. First, you need anesthesia for this procedure, because I can't numb the muscle. Since most of our patients are cosmetic, bringing in an anesthesiologist adds thousands to the cost. Also, anesthesia adds risk. I work very closely with two anesthesiologists, who are both incredibly safety conscious and attentive. But I do these surgeries so often, that on the whole, for all of my patients, it is safer to only use anesthesia when prudent. Secondly, the surgery is not very predictable. Even among eyelid surgery specialists, there is a relatively high rate of needing to have the surgery 'tweaked' - much higher than in patients having a Mullerectomy. Thirdly, the surgery typically results in a somewhat 'surgical appearing' result. Most patients don't notice this, or aren't bothered by it, but if you look carefully, you will often see a little kink in the eyelid where the suture is. Finally, and most importantly, the risk of not being able to close your eyelids all the way is something that patients should be aware of - and I work constantly to avoid. This too is higher in patients undergoing a levator advancement. SO - If you are interested in achieving a cosmetic outcome that is as symmetric as possible and using the safest techniques, then go back to the paragraph on Mullerectomy.
- Frontalis Sling Repair - When the eyelid muscles of the upper lid do not function properly, I take a different approach. This procedure is really only done for patients who have poor muscle function - either from congenital Ptosis or muscular dystrophies. I use a silicone sling from the eyelid to the forehead. When these patients raise their eyebrows, it pulls on the eyelids to open the eye. This works best when performed at a younger age, because kids' brains are able to figure out how to use their forehead to open and close their eyes.
- Upneeq - is a new medication on the market. It's important for patients to know that they have an alternative to surgery, which is to just use a drop in their eye.

Not everyone is a good surgical candidate, in which case I will recommend that you do not have surgery. In that case, Upneeq is great, because you can get the benefit without the risks! The main downside to the drop is that it only lasts about 6 hours. Also, it is not covered by insurance, so the surgery is actually cheaper than the drops if you plan on living for more than 2 or 3 years! That being said, Upneeq is a great addition to the treatment options for ptosis. Actually, I will sometimes give it to patients to help them experience eyelid surgery before having surgery.

- Observation - When you make a consultation with me, my goal is to help you weigh the risks, benefits and alternatives to surgery. And it's my personal mission is to provide the best quality medical advice for all my patients. There are a multitude of different reasons why the risks to surgery might outweigh the benefits. If that's the case, I will let you know why or how to mitigate any risks. There's a famous saying that I often think about. "*Good surgeons know how to operate, better ones know when to operate, and the best know when not to operate.*" I take the responsibility of operating on someone very personally - so sometimes I will recommend patients defer having surgery if it is in their best interest.

What should I Expect During Ptosis Surgery?

The majority of patients that have ptosis surgery with me are able to do it in the office with just local anesthesia and an oral relaxing medication. You come in the morning and leave by lunch time. I never need to prescribe any pain medication, just Tylenol is all that is needed. You will need a ride home after the surgery, but your ride doesn't have to wait in the office the whole time. We can call your ride when the procedure is done and they can pick you up after you have recovered (usually 30-60 minutes) - or they can hang out in our private conference room. You are usually in the office for about 2-3 hours. You do not need to change into a medical gown - just wear comfortable clothing. I would say - The worst part of the procedure is thinking about it. The second worst part of the procedure is the numbing medication. You will feel a little pinch and some burning, but afterwards you won't feel anything, just an occasional pressure sensation, but nothing sharp! Your eyelids will be closed during the procedure, so you will not see anything coming at you! But, if you wanted to open your eyelids you could. They will just feel heavy from the numbing medication.

From the patient's perspective, the procedure is really pretty boring. You just lie there and listen to music. We have Spotify and Pandora, so you get to choose whatever songs or genres you want to listen to that will make you comfortable. Actually, If you read my reviews - you might think that the best part of the procedure is my signing! But..

Most patients will fall asleep during the procedure or chat with us about whatever my staff and I are chatting about that day.

What is the Aftercare for Ptosis Surgery

The recovery for Ptosis Surgery is pretty similar to the recovery for a Blepharoplasty - so be sure to check out my description of the aftercare for a blepharoplasty [HERE](#). But the big differences between a blepharoplasty and ptosis surgery are:

1. I use a stitch that has to be taken out about 5-7 days after the surgery. It comes out in 1-2 seconds and isn't so bad at all. Because that stitch is there, I also put a "Bandage Contact Lens" in your eye. I put the contact lens in and I take it out - you don't have to do anything with the contact lens. Since you have a contact lens, I also give you an antibiotic drop, to prevent any infection. The contact lens doesn't have any power, it's just clear and made to protect your eyeball, sort of like a bandaid. Don't worry if you've never worn contact lenses before.
2. Like a blepharoplasty, the bruising is for 2 weeks and the swelling is for 6 weeks. But I always tell patients that the most important milestone is at the 3 month mark. Sometimes it takes 3 months for the lids to lift up to their final position. So that is the point when we evaluate the success of the surgery. Sometimes one lid might be higher or lower for the first few weeks, that's normal and it usually settles out. The full healing after ptosis surgery takes a year. So you will actually see improvements over the course of the year.

If you ever have a question or a concern after surgery (1 day or 10 years later) - I want you to come in. *Once I operate on a patient, I take ownership and responsibility for your health and safety and will do everything I can for you!*

What are the Risks or Side Effects from Ptosis Surgery?

As with any procedure, there are risks with Ptosis surgery. When You come in - I will discuss the risks with you in detail - as they are specific for you.. but in general - the common risks that I always discuss are: Bruising and infection. Bruising is for 2 weeks and swelling is for 6 weeks. Infection is really rare - I've never seen it. The other main risks we talk about are dryness, irritation and "Need for further surgery". Dryness is the one I probably worry about the most - because it can feel like sand or dust is in your eye - so I do everything I possibly can to prevent that from happening. If this happens, you may need to use artificial tears or ointments. "Need for further surgery" is a catch all for - "sometimes things need to get tweaked" - its surgery and everyone heals differently, but if that happens, I don't charge you for it. I just fix it because I want your result to be

as perfect as it can be. And then to be more specific for ptosis surgery - the other risks are an asymmetric eyelid height, i.e. one eyelid being too high (in which case we can lower it), or one eyelid being too low (in which case we can raise it up).

Who is a Good Candidate for Ptosis Eyelid Surgery?

So, to see if you're a candidate for ptosis surgery, you really have to come in for an in-person consultation. There are so many different causes for ptosis, so when we're talking and I'm examining your eyes, I'm making sure that you don't have an aneurysm, or cancer or need an MRI. The evaluation for ptosis is really complicated. For now, I think my job is safe from the artificial intelligence robots that are taking over the world! But medically, once we establish that you just have run of the mill droopy eyelids - it becomes a conversation between us - where I explain the risks, benefits and alternatives to surgery. I explain what the cause and what the treatment would be. The best candidates are the ones that fully understand the conversation but ask questions if they don't grasp something. Once we have that conversation, you're able to decide if you're a good candidate for surgery.

Ptosis Surgery FAQs

Is Ptosis a serious problem?

The most common cause of ptosis that I see is from a muscle and/or tendon being stretched. If you don't treat it, nothing will change, but your field of vision might be impacted, so be careful when driving. I see patients with this several times a day. Of course, there are many causes of ptosis. Again, some don't need to be treated. Sometimes ptosis can be a harbinger of something more serious going on. I've personally diagnosed several patients with orbital tumors, brain tumors, Myasthenia Gravis and Horner's Syndrome.

Probably one of the best diagnoses I've ever made as a doctor was a few years ago. An Emergency Room doctor called me about a patient with new onset ptosis. He had been seen by the ER doc, two neurologists and a neurosurgeon. After the CT scan and MRI were done in the ER, they called to arrange follow up with me. But the patient had ringing in his ear, which is not a usual symptom of ptosis. I called the Radiologist and asked him to go back and look at the scans, specifically at the internal carotid artery. Sure enough, the patient had an Aneurysm and needed Neuro-Surgery the next day! This had been missed by the neurologists, neurosurgeon and neuro-radiologist! I hadn't even seen the patient, but actually saved his life!

What happens if you don't fix Ptosis?

Again, most of the time, people have ptosis because the lid muscle and tendon got a little stretched out. The biggest impact will be that your visual field will be impaired if it starts to get very droopy. If a droopy eyelid is secondary to a more serious, then that could have an impact on someone's health.

What Happens if you have both excess skin and ptosis - and you have a blepharoplasty, but don't fix ptosis?

This unfortunately happens a lot. It most commonly occurs when an ENT or a Facial Plastic Surgeon or a General Plastic Surgeon does a Blepharoplasty, but didn't notice that the patient had ptosis. The patient winds up with a hollow upper eyelid appearance, almost skeletonized. The eyelids will still be droopy, but there won't be as much skin. This ironically gives off a very aged appearance. This can be addressed by doing a ptosis repair to lift up the eyelid or by using Upneeq to temporarily lift the eyelid.

Is Ptosis surgery worth it?

Yes! I actually think that some of my happiest patients are the ones who have ptosis surgery! From a medical perspective, it brings the eyelid to the correct position that is optimal for both your vision and to protect the eyeball. From a cosmetic perspective, it just looks so much better to have bright open eyes, rather than sleepy bedroom eyes. From a psychological perspective, I frequently hear patients telling me that their eyelids now feel like the rest of them does: awake, alert and ready to take on the world! And from a financial perspective, ptosis surgery is usually a one time surgery. Investing in an eyelid lift will 'elevate' your appearance, often for the rest of your life.

How Can I Experience Safe Ptosis Surgery in River Edge, NJ

The first step would be to book an appointment. We offer telemedicine appointments with our Nurse Practitioner, but to be honest, ptosis really needs to be evaluated in person so I can test your pupils, check your muscle strength and show you how your eyelids will look with them elevated. The quickest way to schedule a consultation is to call and talk to Melissa or Joanna at (201) 696-2646. They can answer your questions and get the ball rolling. Ptosis Surgery is probably one of my favorite procedures to do, so I'm excited and looking forward to seeing you!