

眼睛之所以被稱為「靈魂之窗」是因為一雙明亮、閃爍的大眼睛，能給人會說話的感覺及精神奕奕的印象。據醫學統計，一半以上亞洲人的眼睛都是單眼皮。雙眼皮手術可改善眼睛形狀，增加個人自信及魅力。

雙眼皮手術

雙眼皮手術是透過外科手術，將雙眼線上的皮膚黏連及固定在瞼板或提眼肌腱膜上，造成雙眼皮的效果。手術方法可分為縫線法、微創法及切開法。

• 縫線法

適合年輕，沒有眼皮下垂或過多眼眶脂肪的人士。在預定雙眼線的眼皮上開數個小洞，用極幼的手術線穿透皮膚與提眼肌腱膜以作黏連及固定，令雙眼皮自然形成。縫線法的好處是康復時間短及沒有疤痕。但由於雙眼線的黏連並不太牢固，部份雙眼線或於術後短時間內消失。

• 微創法

適合年輕及沒有過多眼皮下垂的人士。方法是利用兩至三個2毫米的切口，用極幼的手術線將皮膚與提眼肌腱黏連及固定。優點是黏連會比縫線法牢固及持久，康復期亦較切開法為短。

• 切開法

適合任何人士。在預定雙眼線的眼皮上開刀，將過剩的皮膚及眶脂切除，固定雙眼線，然後縫合傷口。此方法能造出永久的雙眼皮，但所需的康復時間較長。

手術在局部麻醉下進行，時間約60至90分鐘，病人不須留院，大部分的瘀腫可於一至兩星期減退。手術併發症包括：眼瞼凹陷、不對稱或眼瞼不能對合等，但情況並不常見。

眼皮下垂

隨着年紀的增長，眼皮會出現不同程度的鬆弛，令眼眶收細及看起來浮腫及沒精神。嚴重的眼皮下垂可防礙視線，引致不便。

• 眼皮下垂矯正術

方法與切開法的雙眼皮手術大致相同，但須要切除鬆弛的眼皮、輪眶肌及眶脂。個別嚴重患者需連同眼眉及上額提升手術方能達到較理想的效果。

• 射頻及高能量聚焦超聲波緊膚

眼皮下垂不太嚴重的患者，可考慮非創傷性射頻Thermage及高能量聚焦超聲波HIFU緊膚。原理是利用射頻或高能量聚焦超聲波將深層皮膚加熱，刺激膠原蛋白生長，使眼部皮膚收緊，達到提升眼皮的效果。治療後皮膚會有輕微紅腫，可於一至兩天退去，效果可維持一年。但射頻不適用於眼瞼下垂患者。

眼瞼下垂

眼瞼下垂是由於提眼肌過長或缺乏提升能力引致。嚴重的眼瞼下垂會防礙視線。成因有多種，如先天性、衰老、甲狀腺問題、重肌無力性等。若屬先天性或衰老所引致，可通過手術進行矯正，將提眼肌提升。

眼袋

眼袋令人看起來憔悴、疲倦及蒼老。除遺傳外，眼袋的出現是由於下眼瞼的皮膚鬆弛，眼輪眶肌及眶中隔退化，眶脂垂脫所造成。一般藥膏或非手術治療對收細眼袋的作用不大。如要改善大眼袋，須進行除眼袋手術（下眼瞼整形手術），把下眼瞼突出的脂肪清除。

• 眼內結膜切除術

適用於較年輕及沒有眼部組織鬆弛的人士。手術是透過眼內結膜將過多眶脂切除，由於皮膚上沒有傷口，所以術後沒有疤痕及眼瞼外翻的風險。

• 眼瞼外開法

適用於任何有眼袋的人士。手術經眼睫毛下的皮膚，將脫垂的眶脂、眶肌及鬆弛的皮膚切除。手術不但可清除眼袋，同時亦可達到收緊眼皮的效果。術後五至七天拆線，疤痕可於兩至三個月後淡化。

手術在局部麻醉下進行，需時60至90分鐘，病人不用留院，瘀腫可於一至兩星期減退。手術併發症包括：下眼瞼凹陷及外翻、複視、不對稱及疤痕增生等，但情況並不常見。

內外眼眦手術（開眼頭 / 開眼角）

內外眼眦手術可令眼睛變大及看起來更明亮。手術分為開外及開內眼角手術。由於眼睛結構所限，開外眼角的的效果一般不太明顯。開內眼角手術主要是將蒙古皺摺破開，然後向內側縫合。從而令眼角張開，使眼睛變大。

手術可在局部麻醉下進行，過程約1小時，可配合雙眼皮手術同時進行。但不是每個人都適合做開眼角手術，如本身沒有蒙古皺摺、兩眼距離過短及有疤痕增生的人士便不適合進行這手術。

淚溝

淚溝是指由眼角內角伸展到下眼瞼的坑紋。其成因是由於皮膚鬆弛及皮下脂肪萎縮所導致。淚溝在視覺上使眼袋加深，增加衰老的感覺。透明質酸的注射或自體脂肪的移植，可有效填平淚溝，減輕眼袋。手術需時30分鐘，沒有明顯的傷口，病人可即時回復工作，紅腫可於一至兩天內消散。

EYE SURGERY

眼部整形手術

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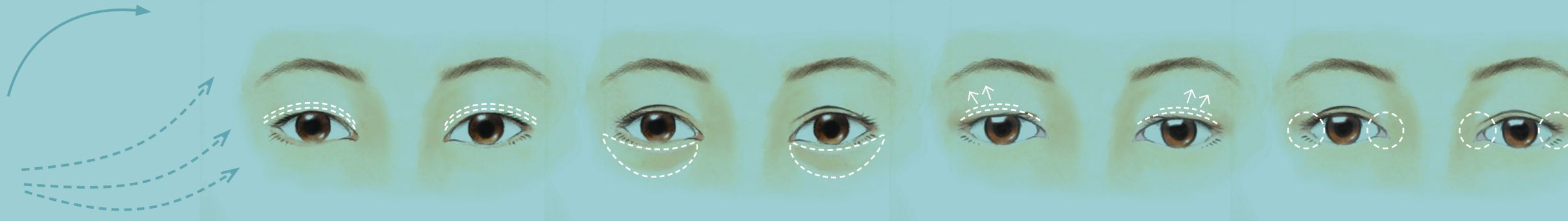
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EYE SURGERY

眼部整形手術



Eyes are the windows to the soul and nothing communicates emotions more expressively than the eyes. Statistics show that more than half of the Asian population have single eyelid creases and some people may choose to create folds in their upper eyelids for a more Western look. By way of double eyelid surgery, one can have natural and lasting double eyelid creases for renewed confidence and charm.

UPPER BLEPHAROPLASTY (DOUBLE EYELID SURGERY)

Double eyelids are created through a surgical procedure by adhering and fixing the skin on the upper eyelids to the tarsal plates or levator aponeurosis. The procedure can be performed by suturing, minimally-invasive surgery or the open incision method.

• Sutures (Non-Incision Method)

Suitable for younger patients and those without droopy eyelids or excess fat. Natural double eyelid creases are created when the skin is affixed to the levator aponeurosis by pulling a thin suture through several tiny incisions. This method is scarless and has a short recovery time. However, some of the fixation may be lost in early post-operation period.

• Minimally Invasive Surgery

Suitable for younger patients and those without droopy eyelids. The skin is affixed to the levator aponeurosis through two or three 2mm incisions using thin sutures. This method yields a longer lasting result than suturing and has a shorter recovery time than the open incision method.

• Open Incision Method

Suitable for people with all conditions. Double eyelid creases are created through incisions in the designated area, where excess skin and fat are removed from the upper eyelids. The wound is then sutured to achieve permanent double eyelids. A slightly longer recovery time is required.

Blepharoplasty is an outpatient procedure. It is performed under local anaesthesia for 60 to 90 minutes with no need for hospitalisation. Bruises and swelling usually subside in one to two weeks. While complications are rare, possible risks include asymmetry, prolonged

swelling, prominent scarring, problems with closing eyes or sunken eyelids.

DROOPING EYELID (DERMATOCHALASIS)

When excess skin of the upper eyelid drapes over the eye lashes, the double eyelid crease may disappear, the eye may look smaller and vision may become obstructed.

• Surgical Treatment

Surgical treatment can improve the drooping eyelid condition. Excess skin can be removed in a way similar to the open incision method for eyelid surgery with quick recovery.

• Thermage and Ultherapy

Non-invasive thermage and ultherapy are suitable if the drooping is mild. The treatments deliver heat to the skin tissue or muscular fascia using radiofrequency or focused ultrasound energy respectively and stimulate collagen production, thus tightening skin tissues around the eyes and lifting the eyelids. Mild redness and swelling may appear but will usually subside in one to two days. The result may last for several years. These methods are not recommended for those with ptosis.

PTOSIS

Ptosis is the medical term for the inability to elevate the upper eyelid. It occurs when there is a dysfunction of the levator muscle due to a nerve or muscle problem. The most common form is the degenerative type, where the levator muscle is stretched or torn. Severe ptosis can reduce your vision. Causes may be congenital, degenerative (age-related), or induced by thyroid disorders, myasthenia gravis, etc. Congenital and age-related ptosis can be corrected by shortening the levator aponeurosis with surgery.

EYEBAGS

Many people complain that bags under their eyes give them a tired and worn-out appearance. Eyebags are caused by bulging orbital fat due to loosening of the tissue that normally binds the orbital fat. Sometimes, the skin overlying the lower lid region may loosen as well. When the eyebags are well established, topical cream or other

non-surgical methods would only yield minimal results. Surgery is the most effective way to treat severe eyebags by removing the bulging fat. This can be done by either transconjunctival lower blepharoplasty or transcutaneous lower blepharoplasty.

• Transconjunctival Lower Blepharoplasty (Internal Incision)

Suitable for the young and those without excess skin, the surgery removes excess fat inside the lower eyelid through the conjunctiva with the assistance of a CO₂ laser. There is no visible external scarring and recovery is usually quick.

• Transcutaneous Lower Blepharoplasty (External Incision)

When there is excess skin, subciliary (transcutaneous) lower blepharoplasty may be indicated. Excess fat and skin are removed through an external incision underneath the eyelashes. Both the fat and excess eyelid skin are removed in this procedure. Sutures are typically removed five to seven days after the surgery, and scars will gradually subside in two to three months.

Eyebag surgery is an outpatient procedure. It is performed under local anaesthesia for 60 to 90 minutes with no need for hospitalisation. Bruising and swelling will subside in one to two weeks. While complications are rare, possible risks include sunken eyelids, ectropion, diplopia, asymmetry or hypertrophic scar.

CANTHOPLASTY (MEDIAL OR LATERAL CANTHUS)

Canthoplasty can make the eyes appear bigger and brighter by widening the corners of the eyes, either on the inside or to the outside. The procedure is known as medial or lateral canthoplasty. Due to the structure of the eye, result of lateral canthoplasty is usually not promising. When performed on the inner corner, the Mongolian folds are cut open and sutured onto the inner skin, making the eyes look wider.

The procedure is performed under local anaesthesia for about one hour and double-eyelid surgery can be performed concurrently. Canthoplasty is not recommended for those with no Mongolian fold, short distance between the eyes or have a history of hypertrophic scarring.

TEAR TROUGHS

Tear troughs refer to the grooves from the inner corner of the eyes to the cheek region caused by the loss of facial volume and sagging of the midface. Tear troughs can deepen appearance of the eyebags visually and make one look aged. Injections of hyaluronic acid or autologous fat transplantation can be effective in filling the grooves and easing appearance of the eyebags. The procedure takes around 30 minutes and leaves no scar. You can resume work immediately and any bruising will generally subside in one to two days.

