

Assessing the Efficacy of Blepharoplasty in Afghan people residing in Kabul

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ABSTRACT

Introduction: Blepharoplasty, a surgical intervention designed to restore youthfulness to the eyelids, has achieved global recognition. Nevertheless, there is a dearth of research regarding its effectiveness within specific ethnic groups, including the Afghan population residing in Kabul. This investigation sought to evaluate the efficacy of blepharoplasty in this distinctive demographic.

Materials and Methods: Experienced plastic surgeons specialize in performing all the blepharoplasty procedures. The surgical approach included removing excess skin and fat from the eyelids and making necessary adjustments to enhance both eyelid symmetry and functionality. Prior to the surgery, pre-operative evaluations were carried out to evaluate patients' concerns and expectations.

Results: In the study, a total of 163 patients were examined, with 129 (79.14%) being Hazara patients and 34 (29.85%) belonging to other ethnicities. Among the participants, 93 (57.06%) were females and 41 (25.15%) were males. In the Hazara ethnic group specifically, blepharoplasty combined with an eyebrow lift yielded excellent results due to the genetic positioning of low and near eyelid eyebrows. Among the Hazara ethnic females, 90 (55.21%) who underwent blepharoplasty with eyebrow lift had excellent results, while 7 (4.29%) had good results with only blepharoplasty.

Discussion: These findings emphasize the importance of considering ethnic variations and anatomical characteristics when planning and performing blepharoplasty procedures. The genetic positioning of the eyebrows in the Hazara ethnic group necessitates a comprehensive approach that addresses both the upper eyelids and the eyebrows to achieve optimal outcomes. On the other hand, for non-Hazara ethnic individuals, focusing solely on blepharoplasty may still yield satisfactory results.

Keywords: Blepharoplasty, Eyebrow lift, Women, Kabul.

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1. Introduction

Ophthalmic plastic surgery primarily addresses pathological conditions related to the eyelid, lacrimal apparatus, and orbit and encompasses periocular cosmetic procedures. Traditionally, most ophthalmic plastic surgeons prioritized functional aspects, dedicating limited attention to cosmetic surgery. However, there has been a discernible shift in this pattern as an increasing number of ophthalmic plastic surgeons are now involved in cosmetic surgeries, with a notable subset specializing exclusively in this domain (1).

The ocular region holds significant significance in terms of facial aesthetics, and blepharoplasty can serve as a crucial factor in achieving facial equilibrium and mitigating the appearance of aging. Among various facial cosmetic procedures, blepharoplasty is one of the most frequently conducted interventions. Indications such as visual fatigue, surplus skin, ptosis of the eyelids, or periorbital circles may potentially derive advantages from the implementation of blepharoplasty (2). For young patients, the primary objective of blepharoplasty is to create an aesthetically pleasing eyelid contour. However, when performing the procedure on elderly individuals, it is essential to consider both the desire for a more youthful appearance and the importance of preserving eyelids

that are in harmony with the overall facial features (3). The aim of this study is to evaluate the overall effectiveness of blepharoplasty as a cosmetic procedure in improving the aesthetic appearance.

2. Materials and Methods

2-1. Study Design

This research study, titled "Assessing the Efficacy of Blepharoplasty in Women Residing in Kabul," employed a retrospective design to evaluate the effectiveness of blepharoplasty as a cosmetic procedure. The study was conducted according to ethical guidelines and received approval from the appropriate institutional review board.

2-2. Study Population

The study included women residing in Kabul who underwent blepharoplasty between April 2021 and December 2023. Patients were selected based on their expressed interest in the procedure and their eligibility, as determined by the treating ophthalmic plastic surgeon. The demographic characteristics of the participants, including age, were recorded for analysis.

2-3. Ethical Considerations

Ethical guidelines were followed throughout the study. Informed consent was obtained from all participants, and they were informed about the purpose,

procedures, and potential risks or benefits of the research. Patient confidentiality and privacy were strictly maintained throughout the study, and all data were handled in a secure and anonymized manner.

2-4. Exclusion Criteria

Patients who did not attend follow-up visits or could not be included due to logistical reasons were excluded from the study. This exclusion aimed to ensure the accuracy and reliability of the research findings.

2-5. Surgical Procedure

Blepharoplasty was performed by skilled ophthalmic plastic surgeons with experience in the procedure. The specific surgical technique employed, including the type and location of incisions, the removal or repositioning of fat pads, and any additional procedures performed concurrently, were documented. The surgical interventions were conducted according to standard practices and guidelines (4).

Before the operation, all patients received instructions to cleanse their facial skin using an antiseptic skin cleanser. During the procedure, patients were positioned on the operating table and provided with a detailed, step-by-step explanation of the surgical process. They were assured that they would not experience any pain. To ensure local anesthesia, one drop of

ophthalmic anesthetic solution (tetracaine 0.5%) was administered to each eye. Afterward, the skin was gently cleansed again using an antiseptic solution diluted in sterile water. Care was taken to prevent any irritation to the cornea, and sterile dry gauze was used to remove the solution from the skin of the eyelids, particularly in the medial canthal region. Once the facial skin was prepared using these aseptic and antiseptic techniques and appropriately draped, the procedure was carried out under local anesthesia containing epinephrine. This allowed the patients to cooperate by opening and closing their eyes during the surgery.

2-6. Follow-up and Evaluation

After the surgical procedure, patients were scheduled for follow-up visits at regular intervals of one month, three months, and six months. During these visits, the patient's progress was assessed, and relevant data were collected. The primary outcome measures included the evaluation of eyelid symmetry, the complete disappearance of scars, and patient satisfaction. Patient satisfaction was assessed using a grading system that included categories such as excellent, good, and average.

2-7. Data Collection and Analysis

Data about patient demographics, surgical details, and follow-up visit findings were

collected and recorded. Patient satisfaction scores were also documented. The collected data were entered into a database, and statistical analysis was performed using appropriate software (e.g., SPSS, Excel). Descriptive statistics, such as frequencies and percentages, were used to summarize the data. Comparative analyses, such as chi-square tests or t-tests, were conducted to evaluate the associations between variables and determine the efficacy of blepharoplasty.

3. Results

In this study, a total of 163 patients were included for analysis. Among these patients, 129 (79.14%) were identified as belonging to the Hazara ethnicity, while 34 (20.86%) belonged to other ethnicities. The gender distribution of the patients included 93 females (57.06%) and 41 males (25.15%). Additionally, out of the female patients, 23 (14.11%) were Hazara, and out of the male patients, 11 (6.74%) were Hazara.

The mean age of the patients was calculated to be 30.33 ± 9.33 years. The majority of the patients (71.16%) were female. It was observed that in the Hazara ethnic group, the eyebrows are naturally positioned lower and closer to the eyelids. Therefore, when blepharoplasty was performed in

conjunction with an eyebrow lift, the results were excellent.

Among the Hazara female patients who underwent blepharoplasty, 90 individuals (55.21%) received both blepharoplasty and eyebrow lifts, resulting in an excellent outcome. Seven females (4.29%) underwent only blepharoplasty, which yielded good results. The average satisfaction rating for this group was 0, indicating a neutral response. Among the Hazara male patients, 30 individuals (18.40%) underwent blepharoplasty combined with an eyebrow lift, resulting in excellent outcomes. Five males (3.06%) received only blepharoplasty and achieved good results, while one male had a medium satisfaction rating.

In the non-Hazara ethnic group, 17 women (19.42%) underwent only blepharoplasty, and all of them achieved excellent results. Four women (2.45%) had good outcomes, and two women (1.22%) experienced average results. Among the non-Hazara male patients, 10 individuals (6.13%) underwent only blepharoplasty, with all of them achieving excellent results. One male (0.61%) obtained good results, and no patients in this group had an average satisfaction rating. These findings suggest that the combination of blepharoplasty and eyebrow lift yielded excellent outcomes in

the Hazara ethnic group, while both procedures, as well as blepharoplasty alone, showed positive results in the non-Hazara group, particularly among females.

4. Discussion

Studies have indicated that individuals who express contentment with their facial appearance generally report elevated levels of happiness and overall life satisfaction. On the other hand, being dissatisfied with specific facial characteristics, such as excessive skin and fat around the upper eyelids, can result in feelings of self-consciousness, withdrawal from social interactions, and a decrease in self-esteem. Furthermore, research suggests that dissatisfaction with facial features can have broader implications beyond psychological effects, impacting various aspects of individuals' lives. For instance, a study conducted by Little et al. (2011) revealed that individuals who are unhappy with their facial appearance may experience limitations in social interactions, such as avoiding social gatherings or feeling uneasy in public settings. Moreover, dissatisfaction with facial aesthetics has been linked to reduced confidence in professional environments, potentially impeding career advancement opportunities (5).

Moreover, the consequences of being dissatisfied with one's facial appearance

can extend to various aspects of well-being, including mental health. Numerous studies have emphasized the association between dissatisfaction with facial features and the presence of symptoms related to anxiety and depression (6).

Individuals who hold negative perceptions of their facial appearance may encounter elevated levels of psychological distress, which can have a detrimental impact on their overall quality of life and functioning. In the specific context of upper eyelid blepharoplasty, addressing concerns associated with excess skin and fat can help alleviate these adverse psychological effects. Through the enhancement of facial aesthetics and the restoration of balance to the upper eyelids, blepharoplasty can contribute to improved self-esteem, increased social confidence, and enhanced overall well-being (7).

The findings of this study provide valuable insights into the outcomes of blepharoplasty among Afghan individuals residing in Kabul. Our study included a total of 163 patients, with a majority (79.14%) belonging to the Hazara ethnic group and the remaining participants representing other ethnicities. The gender distribution was skewed towards females, with 57.06% female participants compared to 25.15% males. One interesting

observation in our study was the genetic positioning of low and near-eyelid eyebrows in the Hazara ethnic group. This anatomical characteristic contributed to the excellent results achieved when combining blepharoplasty with eyebrow lift procedures. Among the Hazara ethnic females, 55.21% who underwent the combined procedure reported excellent outcomes. This highlights the importance of addressing both the excess skin and fat deposits in the eyelids, as well as the positioning of the eyebrows, to achieve optimal aesthetic results in this specific population.

It is worth noting that a small proportion of Hazara ethnic females (4.29%) achieved good results with only blepharoplasty. This suggests that for some individuals within this group, addressing the excess skin and fat alone can still yield satisfactory outcomes. However, the majority of patients experienced enhanced results when combining blepharoplasty with an eyebrow lift. In contrast, among the non-Hazara ethnic group, the results were slightly different. A smaller number of participants from this group underwent the combined procedure, and the majority opted for blepharoplasty alone. Among non-Hazara ethnic females, 19.42% achieved excellent results with only blepharoplasty, while 2.45% had good results and 1.22% reported

average results. Among non-Hazara ethnic males, 6.13% had excellent results with only blepharoplasty, 0.61% had good results, and none had an average result.

These findings emphasize the importance of considering ethnic variations and anatomical characteristics when planning and performing blepharoplasty procedures. The genetic positioning of the eyebrows in the Hazara ethnic group necessitates a comprehensive approach that addresses both the upper eyelids and the eyebrows to achieve optimal outcomes. On the other hand, for non-Hazara ethnic individuals, focusing solely on blepharoplasty may still yield satisfactory results. In conclusion, our study demonstrates that blepharoplasty combined with an eyebrow lift yields excellent results in the Hazara ethnic group due to the genetic positioning of low and near-eyelid eyebrows. The majority of Hazara ethnic females achieved excellent outcomes with the combined procedure, while a smaller proportion had good results with blepharoplasty alone. The findings highlight the importance of considering specific ethnic variations and anatomical characteristics when planning and performing blepharoplasty procedures. Further research with larger sample sizes and long-term follow-up is warranted to validate these findings and optimize the surgical approach for individuals of

different ethnic backgrounds undergoing blepharoplasty.

Conclusion

Since the Hazara ethnic group has genetically puffy eyes and the distance between the eyebrow and the upper eyelid is close, the blepharoplasty operation is combined with the eyebrow lift.

Limitation

It is important to acknowledge the limitations of our study. The sample size was relatively small, residing in Kabul. Therefore, the generalizability of our findings to other ethnic populations or geographic regions may be limited. Additionally, long-term follow-up was not conducted in this study, which could provide valuable insights into the durability of the surgical outcomes.

Reference

Naik MN, Honavar SG, Das S, Desai S, and Dhepe N. Blepharoplasty: An Overview Journal of cutaneous and aesthetic surgery. 2009;2(1):6–11.

Castro E, Foster JA. Upper lid blepharoplasty. Facial plastic surgery. 1999;15(03):173–81.

Cho I. Aging blepharoplasty. Archives of Plastic Surgery. 2013;40(05):486–91.

Kruavit A. Asian Blepharoplasty: An 18-Year Experience in 6215 Patients. Aesthetic Surgery Journal. 2009;29(4):272-83.

Little AC, Jones BC, and DeBruine LM. Facial attractiveness: evolutionary-based research. Philosophical Transactions of the Royal

Society B: Biological Sciences. 2011;366(1571):1638–59.

Barnes M, Abhyankar P, Dimova E, and Best C. Associations between body dissatisfaction and self-reported anxiety and depression in otherwise healthy men: A systematic review and meta-analysis. PloS one. 2020;15(2):e0229268.

Vannucci A., Ohannessian CM. Body image dissatisfaction and anxiety trajectories during adolescence. Journal of Clinical Child and Adolescent Psychology. 2018;47(5):785–95.