

Department of Oral and Maxillofacial Surgery

Frequently Asked Questions about Genioplasty

This leaflet has been written to help your understanding of genioplasty. If you have any other questions that the leaflet does not answer or would like further explanation please ask your surgeon or orthodontist.

The problem

The profile of your chin needs to be corrected because the bones of your face and jaws are out of balance with each other. An operation to change the position of the chin is called **genioplasty**. Genioplasty is often carried out at the same time as other corrective operations on your jaws, but you may find that your surgeon has advised you to have it carried out later.

Q. What does the operation involve?

The operation will take place under a general anaesthetic; this means you are going to be put to sleep completely.

1. The operation is carried out from the inside of your mouth. There will be no visible scars on the skin of your face.
2. A cut is made through the gum, on the inside of the lower lip. This is to gain access to the lower jaw bone and chin.
3. The chin is then cut with a small saw to allow it to be broken in a controlled way.
4. The jaw is then moved into its new position and held in place with small metal plates and screws. Titanium metal is used and this does not set off metal detectors in airports.
5. The gum is stitched back into place with dissolvable stitches. These will take a fortnight or longer to fall out.

Q. What can I expect after the operation?

Surprisingly it is not a particularly painful operation, but it is still likely to be sore. Regular painkillers will be arranged for you. The discomfort is usually worse for the first few days, although it may take a couple of weeks to completely disappear. It is also important to make sure that the area heals without any infection, so you will be given antibiotics through a vein in your arm whilst you are in hospital. You will be sent home with painkillers and a course of antibiotics.

Immediately after the operation your chin will feel swollen and tight. Swelling and bruising varies, but it is generally worse on the second or third day after your operation. The swelling can be reduced by using cold compresses and sleeping propped upright for a few days. Most of the swelling can disappear after a fortnight but there is often some slight swelling that can take several months to disappear. However, only you and your family are likely to notice this.

Q. Can I eat normally after the operation?

If you are only having a genioplasty procedure, you should have little problem with eating. However, you will probably start with a soft diet and then gradually build up to normal food over a few days.

Q. How long will I be in hospital?

This varies from person to person, but most patients are only in hospital overnight. The position of your chin will be checked with X-rays before you are allowed home.

Q. Do I need to take any time off work?

This varies and depends on what kind of work you do. We recommend that you have around a week off work if you are just having a genioplasty. **Remember** you will not be able to drive or operate machinery for 48 hours after your general anaesthetic.

Q. What are the possible problems?

There are potential complications with any operation. Fortunately, complications are rare with this procedure. However, it is important that you are aware of some of them and have the opportunity to discuss them with your surgeon. The following problems might happen:

- Bleeding – some oozing from the cuts inside your mouth on the night of operation is normal and to be expected. Significant bleeding is very unusual but should it occur it can usually be stopped by applying pressure over the area for at least 10 minutes with a rolled up handkerchief or swab.

- Numbness – your bottom lip will be numb and tingly after the operation, similar to the sensation after having an injection at the dentist. This numbness may take several months to disappear but in a small number of patients, it may last for ever.
- Infection – the small plates and screws that hold your jaw in its new position are usually left in place permanently. Occasionally they can become infected and will need to be removed. If this happens, it is not normally a problem until several months after your operation.

Q. Will I need further appointments?

A review appointment will be arranged before you leave hospital to see both your surgeon and orthodontist.

What are the alternatives to this treatment?

There are no surgical alternatives to this treatment.

For more information:

Department of Oral and Maxillofacial Surgery
Addenbrooke's Hospital
Cambridge University Hospitals NHS Foundation Trust
Hills Road
Cambridge
CB2 0QQ

Tel: 01223 216635

Website: www.addenbrookes.org.uk/omfs

Adapted from:

British Association of Oral and Maxillofacial Surgeons. <http://www.baoms.org.uk/>



We are currently working towards a smoke-free site. Smoking is only permitted in the designated smoking areas.

For advice and support in quitting, contact your GP or the free NHS Stop Smoking helpline on 0800 169 0 169

Help with this leaflet:



If you would like this information in another language, large print or audio format, please ask the department to contact Patient Information: 01223 216032 or

patient.information@addenbrookes.nhs.uk



Document history

Authors	Oral and Maxillofacial Surgery
Department	Cambridge University Hospitals NHS Foundation Trust, Hills Road, Cambridge, CB2 0QQ www.cuh.org.uk
Contact number	01223 216412
Publish/Review date	February 2011/February 2014
File name	FAQS_Genioplasty
Version number/Ref	4/PIN668