Facial Feminisation Surgery

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Introduction

We feel highly honoured that you are considering Agave Clinic as the place to have your facial feminisation surgery.

The following patient guide contains information on the facial feminisation procedures offered at Agave Clinic.

If you decide to pursue surgery, you will find here all the practical information you need.
About Facial Feminisation Surgery

Facial feminisation surgery (FFS), is the term given to a constellation of surgical procedures that are designed to alter a masculine face and bring its features closer in shape to those of a woman’s face.

Why FFS?

FFS has become increasingly sought after by transgender women. Psychologically it is often more important than gender reassignment because it helps these individuals integrate socially as women. The face commonly provides the first visual clues and gives an impression of the physical gender of an individual. While other parts of the body can be hidden or exaggerated to appear more feminine, it’s difficult to create feminine facial features without FFS. This is why male to female (MTF) transitioning individuals may desire this surgery in order to transform the face and therefore facilitate passing in public as a woman.

Bony and soft tissue work

FFS works on both the bone and the overlying soft tissues. Many of its techniques originate from maxillofacial surgery as well as traditional plastic surgery. The few surgeons who perform FFS usually have a maxillofacial background. Douglas Ousterhout was a pioneer in what is now called FFS during the 1980s and 1990s in the U.S.A. Globally there is just a small number of surgeons that have specialised in FFS.

The science of changing the skeletal base of a face is rooted more in the maxillofacial heritage of the procedures. Generally speaking, bony work will have a far more dramatic effect on the shape of a face, which is sometimes necessary to look like a woman. Men and women have basic differences in skull shapes. If the shape of a skull is out of the female range, it may impede passing as a woman. The surgery provides an immediate major improvement, and with aging results will become more evident as the skin becomes thinner and loses elasticity.

Modification of soft tissues of the face encompasses more standard cosmetic procedures used for primary anti-aging effect. However, bony work is often combined with soft tissue procedures to achieve an optimal feminising effect. Soft tissue work may be necessary to get the full result of bony work for some patients. In general soft tissue work will smooth and tighten areas, making you look younger and by extension more feminine.

The most feminising procedure is the trachea shave. In fact the presence of an Adam’s apple is the only feature that almost proves the physical gender is male. Besides the trachea shave, the three most important areas worked on, those providing the most dramatic change, are the forehead, nose and jaw. All three of these areas tend to be less pronounced, smaller and smoother in females. Among the procedures available are: hairline lowering, forehead recontouring, brow lift, rhinoplasty, cheek implants, lip lift, lip augmentation, chin recontouring,
jaw recontouring, blepharoplasty, face- and necklift, midfacelift, otoplasty and Adam’s apple reduction. But even the teeth can be feminised. The majority of these procedures can be performed in combination.

The key to a successful FFS outcome is to plan a combination of facial procedures that can most effectively soften one’s appearance and make a convincing change.

The treatment plan is based upon a combination of skeletal and artistic evaluations, radiographs (x-rays), anthropological measurements and photographs as well as the patient’s self assessment.

So there is no standard set of procedures that will work for every patient. Each patient usually has one primary zone for change and two others that could be modified. While some patients need just three or four procedures, others may benefit from additional ones. Most patients have a good feeling for what will be effective. A careful discussion with the surgeon is essential to create an adequate working list of procedures. As long as the most prominent masculine features are converted into more classically feminine features, a very satisfactory feminisation can be achieved.
Surgical procedures

This section will describe all facial feminisation procedures performed by Agave’s team of specialists.
Hairline lowering and reshaping

The hairline is an identifying trait for gender, which is accentuated with age.

Gender of the hairline

In males the hairline is often higher than in females. The distance between the brows and the hairline for women on average is 5 cm. For men this is 7 cm.

Another difference is the shape of the hairline. A man usually has receded corners above the temples that give it an “M” shape. Conversely, the female hair pattern is oval shaped, smoother and full around the facial edge.

An additional difference between male and female hairlines comes with the age. There is a typical male pattern of baldness with a recession of the hairline. How many women have you seen with a receding hairline? While biological women do sometimes suffer from hair loss, it is usually an all-over thinning of the hair from the entire scalp and isn’t specifically targeted to one area.

Feminising the hairline

There are two options for reshaping the masculine hairlines. The hairline can be moved forward and given a more rounded shape either with a procedure called a “scalp advancement” or with a hair transplantation.

Scalp advancement (hairline lowering)

Scalp advancement involves removing a section of the skin on the forehead (between the hairline and eyebrows) and pulling the scalp forward between 1.0 cm and 2.5 cm to correct for the receding masculine pattern hairline and to approximate, when possible, a more feminine ‘oval’ pattern hairline.

Scalp advancement is a permanent feminising solution for those patients who do not suffer from a receding hairline. It acts as a temporary fix for a receding hairline in patients suffering from hair loss, but will not stop the hair loss. We highly recommend that these patients seek out an additional hair loss solution, like hair transplantation, to keep the hairline looking full and healthy.

Hair transplants

Hair transplants can also be used to add volume to hair thinned by male pattern baldness. This is the definitive treatment for all types of hair loss, and guarantees a natural effect in most cases. In a hair transplant a strip of skin is removed from the back and sides of the scalp. They are then transplanted to the target areas to fill in the corners of the male “M” and to thicken the areas of hair loss. There is a limit to how densely the hair can be packed in at one time, so more than one procedure may be needed to achieve the desired density.
Scalp advancement (Hairline lowering)

This procedure is very well combined with forehead recontouring and brow lift, which are often done via the same incision.

**Procedure**
- General or local anesthesia is given.
- An incision is made along the hairline. The incision is made just inside the hairline, in an irregular fashion, to avoid a straight scar. Straight scars are more conspicuous than irregularly curved ones. Also the blade is held in such a direction that about six weeks postoperatively the hair starts growing through the scar, making it almost invisible.
- The scalp will be mobilized to the back of the head and pulled forward as much as needed. Normally 1.5 - 2 cm of advancement is no problem.
- A section of forehead skin at the hairline is removed.
- The scalp is fixed to the bone using Endotines to prevent it from pulling back.

**Recovery**
- A dressing is placed around the forehead. It will be removed the next day.
- The patient may suffer from some pain during the first days, which is suppressed with medication. Sutures will be removed after 7 days.
- A visible scar exists, but it will typically be too faint to be noticed.

**Complications**
- Swelling will occur around the eyes, on the forehead and scalp. Forehead numbness will last several weeks to months.
Forehead recontouring

The forehead is one of the more apparent gender markers. Forehead reconstruction is very powerful and can transform a prominent male forehead to fall within the average female ranges.

Gender of the forehead

The male has more brow bossing (the ridge above the eyes) and a forehead that angles more steeply away from the eyes. The female forehead is typically rounder in all dimensions and almost never has a prominent brow bone. In profile, female foreheads are more vertical instead of backward sloping.

Feminising the forehead

Forehead recontouring is a procedure that involves brow shaving and surgically altering the bone.

The outer segments of the bossing that the eyebrows sit on are called the “supraorbital rims”. These are solid bone and can simply be filed down.

The section of bossing between the eyebrows (the glabella) sits over a an area called the frontal sinus. Because the frontal sinus is hollow, it is more difficult to remove bossing there. It involves removing this plate of bone, reshaping it, and placing it back in position with small titanium screws to hold the bone in place while it heals.

Procedure

- General anesthesia is given.
- An incision is made along the hairline. The incision is made just like in scalp advancement surgery.
- The forehead skin is pulled forward to reveal the bone. The boneplate over the frontal sinuses is removed, thinned until the desired thickness is achieved and reshaped.
- Then the solid orbital rims are shaved.
- Finally the refined boneplate is fixed in place with titanium microscrews. The heads of the screws are removed so they cannot be felt or seen through the skin.
- As in scalp advancement, the skin is fixed to the bone using Endotines to prevent it from pulling back.

Recovery

- Hospital: Most patients will spend one to two nights in the hospital following surgery.
- Dressing: A dressing is placed around the forehead after surgery, and left in place during the first night. It can be removed the day after surgery.
- **Pain:** Pain may occur for a few days, which is controllable with normal painkillers.

- **Work:** Many patients can go back to work within two to four weeks following surgery.

- **Sport:** Avoid physical activity that causes sweating or a rise blood pressure for eight days.

- **Sutures:** Sutures are generally removed within nine days.

### Complications

- **Infection:** Infections are extremely rare, but antibiotics are used to avoid potential infections.

- **Swelling:** Swelling and bruising may occur around the eyes, but will dissipate within ten to twelve days.

- **Numbness:** Forehead numbness may last several months and often doesn’t recover completely.
Eyebrow lift

Higher eyebrows can offer a younger and more feminine look. In facial feminisation surgery a brow lift is almost always combined with forehead recontouring and scalp advancement, procedures using the same incision.

Gender of the eyebrow

Male eyebrows are fairly straight and thick and sit on or just under the orbital rims. Female eyebrows generally sit higher and are more arched.

Feminising the eyebrow

A brow lift is a well-known procedure in plastic surgery, used mostly by older genetic women to restore a more youthful, refreshed look to the area above the eyes. A brow lift opens up the face making one look less stern and tired.

A brow lift is done by lifting the skin of the entire forehead, therefore raising the eyebrows. This has no effect on the underlying bone, so is not as dramatic as forehead contouring.

In FFS, an eyebrow lift is almost always combined with forehead recontouring and scalp advancement. The arch and height of the eyebrows are related to the shape of the frontal bone that lies beneath. This is why, in forehead feminisation procedures, it’s very important to correct the position and shape of the eyebrows with a brow lift after remodeling the frontal bone.
Facial Feminisation Surgery

Before eyebrow lift (and forehead recontouring).

After eyebrow lift (and forehead recontouring).

The mail eyebrow.

The female eyebrow.
Cheek augmentation

While the shape of the cheeks is not generally a female or male characteristic, it is true that a lack of cheek prominence is often not appealing. High prominent cheekbones are frequently associated with feminine beauty. Augmentation is therefore helpful in feminising the face.

Gender of the cheek

Females often have more forward projection in their cheekbones as well as fuller cheeks overall.

Feminising the cheek

Cheek augmentations are generally completed utilizing an implant.

As we have seen too many problems with capsulation, displacement or infection of silicone implants we only use Medpor® implants that consist of porous polyethylene. They allow for surrounding tissue ingrowth because of its open pore structure. This ingrowth of internal tissue prevents the implant from shifting out of place.

The implants come in all sorts of shapes and sizes and can easily be moulded, depending on the needs of the patient. They are easy to apply and noticeable asymmetries after surgery are almost impossible.
Cheek augmentation

**Procedure**
- Cheek augmentations are usually performed under sedation or general anesthesia and take about one to two hours.
- A small incision is made inside the mouth, in the gum above the upper teeth, so no scars will be visible on the outside.
- A pocket behind the muscles of each cheek is then created and the implant is placed immediately overlying the cheek bones.
- The implants are sculpted at the time of the surgery for adjustment to the needs of each patient and then fixated to the bone using microscrews to prevent displacement.

**Recovery**
- **Sutures:** You will have sutures in your mouth, which are dissolvable. You should use mouthwash 2 to 3 times a day, to keep the area clear of debris. The resulting scars on the gums will be completely concealed inside the mouth.
- **Swelling:** You can expect to have some swelling following this surgery. Try to rest and sleep propped up with 2–3 pillows during the first week after your surgery, to help reduce any swelling and bruising. The swelling may last one or two weeks.

Bruises are very infrequent.

- **Pain:** Pain, stiffness and temporary numbness may occur.

**Complications**
It is very unlikely for cheek surgery to present any complications. However, every surgery, no matter how simple it may be, has certain risks that should be recognized.

- **Infection:** Because the implant is a foreign material and is being placed through the mouth, antibiotics are utilized to prevent the possibility of infection. If an infection were to develop in spite of antibiotics, the implants might have to be removed. This has never happened in our centre.

Some illustrations of Medpor® implants.
Rhinoplasty

Aside from the trachea shave, nose reshaping is probably the most common facial feminisation procedure. The nose is the most prominent feature of the face. Many transwomen find nasal refinement can create marked improvements in their female facial appearance. It tends to make the eyes look larger, bring out the cheekbones and adds delicacy to the overall facial impression.

Gender of the nose

Male noses are usually larger than those of women, with a broader nasal bone. Men more often have a nasal hump. Usually, beautiful female noses are smaller than those of men, in all aspects. They tend to be narrow and straight, or to have a gentle curvature like a slide.

The angle between the male forehead and nose is sharper than in women and the angle between the nose and lip is also smaller (points upwards more). The angle of the tip of the nose is sharper in women than in men. Women’s nostrils are also usually smaller.

Feminising the nose

Standard rhinoplasty techniques can be used to make the nose smaller and to give it clear feminine outline and proportions, taking into consideration that it should be harmonious with the rest of the face.

In a reduction rhinoplasty, generally the dorsum and tip of the nose need to be made smaller and the tip lifted. Correction of the frontal bossing will improve the angle between the nose and the forehead.

If one has thin skin, a significant size of reduction can generally be completed. If the skin is quite thick (as is often the case in males), the contour can still be markedly improved, but there may be a definite limitation to the size reduction possible. However, contour changing alone greatly feminises the basic nasal appearance.
Rhinoplasty

Procedure
- Rhinoplasties are usually done under general anesthesia. In certain minor cases, local anesthesia and sedation may be used. The operation generally lasts between one and two hours.
- For feminising rhinoplasties we prefer the ‘open method’ because it gives the surgeon more working room. In the ‘open’ approach one small incision is outside the nose across the columella (the skin between the nostrils). This incision is generally extremely difficult to see.
- According to your individual needs following actions may be done:
  - Refining the tip: A section of the tip cartilage is excised to achieve refinement or ‘narrowing’ of the nasal tip.
  - Shaping the profile: The bone-cartilage hump is removed. A surgical file or rasp is commonly used to smooth the bony hump, in order to achieve more precise results.
- Narrowing the nasal bone: If the bridge of the nose is wide, it can be narrowed by fracturing the nasal bone on each side and moving it closer to the centre.
- Narrowing the nostrils: The volume of the nostrils can be reduced by alar base excision.
- A splint will be put on your nose to help support the new shape. Packing is placed inside your nostrils to help stabilize the interior structure of your nose.
- Small sutures will be used to close the incisions.

Recovery
- Breathing: The most difficult part for most people is being unable to breathe through their nose until the packing is taken out. Your mouth and lips can dry out very easily and swallowing can be difficult. Usually the packing stays in for three to seven days.
- Stitches: The stitches underneath the nose come out in a week to ten days.
- Cast: The cast comes off after nine days. The nose is usually very tender at that point and extra care must be taken to avoid bumping it or sleeping on it.
- Bleeding: Some sporadic bleeding could be expected during the first couple of weeks, which is normal and should not be a cause of concern.
- Bruising: Most people get bruising around the eyes and cheeks. The bruises under the eyes will intensify during two or three days before they begin to vanish. 15 days later, only you and your surgeon will be able to notice any traces of the surgery.
- Appearance: Your nose will regain its normal appearance very soon, but the definitive results will be fully appreciated after six months. The tip is the area that takes the longest to acquire its new shape.

Complications
- Assymetries: The nose is, literally speaking, constantly before our eyes, making any imperfection very noticeable, no matter how trivial it may be. Even though the surgeon marks very carefully the areas he is going to treat, there may be asymmetries. According to international statistics, rhinoplasties are the procedures that have the highest rate of revisions. These revisions, if necessary, may be carried out after six months.
Lip surgery

Fuller lips can help you pass and give you a younger look. Unfortunately, the lip is frequently overdone, which can be counterproductive if passing is your goal.

Gender of the lips

The male face typically has a long upper lip with little or no visibility of the upper teeth. The youthful female face is characterized by a shorter distance between the base of the nose and the upper lip with more visibility of the teeth. It is a typical feminine trait that is also characteristic of youth, since as years go by the upper lip droops and covers the teeth.

In regards to the vermilion border, it's considered more feminine when it's fleshy and has a good projection. This is also a typical trait of youth. For this reason lip augmentation remains one of the most frequently sought after cosmetic procedure performed in aesthetic medicine today.

Feminising the lips

Lip lift

In the lip lift procedure, a wave-like segment of skin (thicker in the middle) is removed directly under the nose. The upper lip becomes shorter, which also has the following benefits:

- The lip is rolled up, so a larger vermilion area is visible.
- The resulting curvature increases the lip projection.
- The upper teeth can be exposed about 3 or 4 mm.

Lip augmentation

If, in spite of this surgery, the lip is still too thin, an injectable product can be applied in the same surgery or at a later date. This can be done with temporary injectable fillers or fat transfers (injection of a fat graft taken from the same patient). The effect of injecting mainly on the inner side of the lip, directly under the intra-oral mucosa, is an outward rolling which shows more of the inner lip.

Part of the fat graft will re-absorb, but a significant portion will be permanent. While difficulties remain in the predictability and longevity of fat transfers, the aesthetic effect are often impressive because of the resulting appearance.

The effect of fat injection is an outward rolling with more show of the inner lip.
Lip lift

**Procedure**
- A lip lift can be performed in local anaesthesia or in combination with other procedures under general anaesthesia.
- After having made the design for the excision, the local anaesthetic is injected.
- The skin is excised and the wound closed in 2 layers.

**Recovery**
- The non-reabsorbable skin sutures are removed after 5-7 days. Recovery is fast and without complications.

Lip augmentation

**Procedure fat grafting**
- After the injection of local anaesthesia in the donor site, a couple of millilitres of fat are aspirated using a blunt needle on a syringe. This can be taken from anywhere in the body where there is sufficient subcutaneous fat and used to inject into the lips. The donor site is normally the upper leg, abdomen or the submental area (below chin).
- By means of centrifugation the intact fat cells are separated from oil, local anesthetic and blood. This way, only the intact fat cells are re-injected.
- The fat cells are then poured into a tiny syringe on which a blunt needle is placed. The lip is injected with a minimal amount of local anesthesia after which the fat cells are injected along the inner side of the lip, just under the lip mucosa.

**Recovery**
- Immediately after the surgery, the lip will be quite swollen and bruised. In about 3 weeks time approximately 80% of the bruising and swelling will have disappeared. After 4 months you can get a good impression of the final result. After 6 to 8 months, if necessary, another fat graft may be performed until the desired effect has been obtained.
Jaw shave

Besides the forehead and eye area, the most significant characteristic of a feminine face is the overall face shape. To a large extent, this is determined by the shape of the jaw. A prominent lower jaw gives the face a square, masculine look and can be considered unattractive for females.

Gender of the jaw

The male jawbone is usually heavier built and tends to be wider, because the muscles attached to the corners of the jawbone are much bigger. Female jaw lines run in a gentle curve from the earlobe to the chin. In males, it tends to drop down straight from the ear and then turn at a sharp angle towards the chin, giving a square appearance.

Feminising the jaw

Having a jaw shave can reduce the appearance and size of the jaw, making it rounder and narrower at the square corners near the back of the jawbone.

When the masseter muscles are too thick, they can be reduced by trimming them, although long lasting hormone treatment reduces their mass.

Usually, this surgery is combined with chin feminisation surgery to create a harmonious balance of these two adjacent areas.

Patients over 40 may experience loose skin around the jaw or chin after a jaw shave. This can be tightened after the original jaw shave procedure with a lower face-lift.

Procedure

- General anesthesia is usually required for this surgery.
- Incisions are all made intraorally, so no scars will be visible on the outside.
- Marked areas of prominent bone are cut with a surgical drill and microsaw, curving down from back to front, to achieve a well-rounded contour.
- The masseter muscle is reduced on its inner aspect if necessary.
- The wound is closed with self-dissolving stitches.

Recovery

- Hospitalisation: Most patients will spend two nights in the hospital following surgery.
- Swelling: Swelling is expected and varies greatly by individual. A special mask will cool the surface of your face and keep bruising, swelling and pain to a minimum. Swelling usually takes a significant amount of time with these procedures. Swelling and bruising will peak 2-3 days after surgery. The majority of the swelling will dissipate two weeks after surgery; however, some of the swelling may take several more weeks to disappear. It may take
4-6 weeks for the improved contour to become obvious, but the result is worth the wait!

- **Numbness:** Most women experience temporary numbness.
- **Work and sports:** If you don’t mind being seen with the swelling, you may be able to return to your social activities 7 to 10 days after the surgery. You will have to wait until the third or fourth week before doing any hard work or physical exercise.

**Complications**
- **Infection:** Infections are possible but rare.
- **Numbness:** Extremely rare is permanent numbness of part of the jaw, in areas where the jaw is shaved.
Chinplasty

Chin shape generally varies widely between males and females, so it can be extremely important in gender recognition.

Gender of chin

Female chins tend to come to one point in the middle. Men's tend to have two points directly below the canine teeth and a flat part between the points. This makes men's chins look fuller and more square. Women's tend to be more tapered.

Male chins also tend to have more vertical height, with a longer space between the lower lip and the base of the chin.

In some cases, male chins have a vertical crease in the middle, usually known as cleft chin, which is very unusual in women.

Feminising the chin

Luckily, the chin is an area whose features can all be modified: height, width and if necessary even projection. Various modifications to the chin can be made depending upon the individual anatomy of the patient, and the desired result.

The procedure is called a “sliding genioplasty”. The chin is cut from front to back, separating a horseshoe-shaped segment of bone. A slice of this segment can be removed. This will reduce the height of the chin. The middle part of the horseshoe-shaped bone can be removed to narrow the chin. Also the chin can be moved forwards or backwards to correct a receding or protruding chin (if necessary).

Sometimes liposuction to remove some of the fat that some people have below the chin is needed to add definition to the chin shape.

Procedure

- General anesthesia is given.
- Incisions are all made intraorally, so no scars will be visible on the outside.
- The chin is cut from back to front on both sides with a saw, separating a horseshoe-shape of bone.
- A second cut parallel to and a few millimetres from the first one can be made, and a slice of bone removed.
- The middle part of the horseshoe-shaped bone can be removed to make the chin more pointed.
- The final position of the piece of bone is chosen. At this point the chin can be moved forwards or backwards.
- The bone parts are fixed using titanium miniplates and screws, which will never be removed.
- Liposuction is done when necessary.
- The wound is closed with self-dissolving stitches.

Recovery

- Hospitalisation: Most patients will spend two nights in the hospital following surgery.
• **Compression Bandage:** A bandage will be left over the chin to reduce hematoma. It can be removed on the next day.

• **Swelling:** Swelling is comparable to that after jaw surgery.

• **Numbness:** Most women experience temporary numbness.

• **Work and sports:** If you don’t mind being seen with the swelling, you may be able to return to your social activities 7 to 10 days after the surgery. You will have to wait until the third or fourth week before doing any hard work or physical exercise.

• **Scars:** If a complementary liposuction is needed to add definition to the chin shape, a couple of very little punctures (2mm) will remain for several months and then vanish.

**Complications**

• **Infection:** Possible but rare.

• **Numbness:** Extremely rare is permanent numbness of one half of the lower lip and chin due to damage to the mental nerve.
Classical rejuvenation procedures

Classical beautification and rejuvenation procedures are often performed in conjunction with a facial feminisation. After a facial feminisation surgery, a face-lift will adjust the soft tissues of your face to your new bone structure and the female outline of your face will be more clearly defined.

Blepharoplasty

Simultaneously with a facial feminisation surgery it is common for eye bags and sagging eyelids to be corrected with a procedure called “blepharoplasty”.

Nasio-labial folds

It’s very hard to get rid of the deep cheek folds that extend from the corner of the nose to the corners of the mouth (nasolabial folds). This area seems to make a difference in passing.

A facelift can help reduce this, but the best results are acheived with fat grafts.

Facelift

Face-lift surgery will make you look many years younger than you really are. The difference between your real age and your looks will last for decades; that is, as you grow older you will still look much younger than you really are.

Moreover, if you have already had a facial feminisation surgery, a face-lift will adjust the soft areas of your face to your new bone structure and the female outline of your face will be more clearly defined.

After jaw or chin surgery it is often necessary for older patients to have a face-lift because the reduction in bone and the effects of swelling can leave a previously non-existing sagging skin.

Face Lift Surgery (rhytidectomy) lifts the areas that gravity has pulled down, especially the cheeks. The Submuscular Aponeurotic System (SMAS) is a layer beneath the skin which includes the facial muscles. By tightening the SMAS, the jowls are lifted, the neck is tightened, and the cheeks are elevated. This “deep” or “2-layer” facelift is an improvement over earlier skin-only techniques.

A facelift enhances the cheeks definition and volume because the surplus skin is cut out to allow the tightening of what is left, but the surplus muscles (worked at the SMAS level) are not cut out: they are instead folded up over the cheekbones. This means that the loose muscles that currently sag below the cheekbones are raised and repositioned as a pleat in front of them to make them look fuller beneath the tensed skin. This lifting manoeuvre also decreases the flabby tissues over the jowls area, which in turn reduces the nasolabial folds.

Facelifts will not improve the forehead nor eyebrow areas. For this, forehead or brow lift surgery is necessary (which is usually standard in facial feminisation surgery.)
Necklift

To remove any pronounced neck cords a necklift is commonly needed. This involves a small incision under the chin.

Submental liposuction

Fat in the submental region is usually related to obesity. However, fat may be present even in individuals of normal weight. As aging progresses, many people develop submental fat deposits independent of their weight.

Liposuction is the treatment of choice for fat removal in the youthful neck.

Liposuction is done by inserting a small cannula with a vacuum attached, through a tiny incision made in the skin. The cannula is pushed and then pulled through the fat layer, breaking up the fat cells and suctioning them out.

Breast augmentation and body sculpting

Breast augmentation with implants helps to enhance the results already achieved by hormonal treatment.

To enhance of overall feminisation effect, additional body contouring can be very effective. Abdominoplasty (tummy tuck), and/or suction assisted lipectomy (Liposuction, Liposculpturing) will greatly change the body contour.

By narrowing of the abdominal muscles towards the midline (muscle plication) during an abdominoplasty, the abdominal shape can be significantly improved towards a more feminine contour; also the waist line can be reduced.

Facelift

**Procedure**
- A facelift is usually done under general anesthesion. The operation generally lasts between two and three hours.
- The surgeon makes an incision very close to your ear, following its natural outline.
- He separates the muscles and the skin of the middle area of your face.
- The surplus skin is cut out to allow the tightening of what is left.
- The surplus muscles (belonging to the SMAS level) are not cut out: they are instead folded up over the cheekbones.
- The incisions are closed using very fine stitches.

**Recovery**
- **Hospitalisation:** You will need to stay hospitalized half a day.
- **Compression bandage:** You will leave the operating room with a compression bandage around your head that will be removed about 24 hours later.
- **Stitches:** Between one and two weeks after the surgery the stitches will be removed.
- **Bruising:** Bruises may develop, especially below the eyes. They will be at their worst during the first week but, at time goes by, they will slowly disappear. The swelling lasts about a month. The cold facemask helps you recover faster. During the first few days, you will have to sleep with your head and torso elevated to encourage proper drainage.
- **Work:** Most patients are able to return to work in two to three weeks. You should allow four to eight weeks before major social engagements.
- **Scars:** The scars from facelift surgery usually fade and are barely perceptible.

**Complications**
- **Infections:** Infections rarely develop, and are prevented by taking the appropriate antibiotics.
- **Seromas:** Seromas, or fluid accumulation beneath the skin, may develop. In some cases, they have to be drained with a syringe.
Trachea shave

A prominent Adam’s apple is often a constant embarrassment to transwomen, which can be improved by the trachea shave procedure.

The sex of the trachea

The Adam’s apple is a characteristic feature of adult men. The name says it all: it’s one of Adam’s, the Man’s, attributes.

This feature is actually a lump of cartilage located in front of the larynx. The larynx is the voice-box where the vocal cords are located. During puberty, the larynx grows much more in boys than in girls. This creates a resonance, deepening the voice, whereas girls voices don’t change so much.

Feminising the trachea

A trachea shave is an effective solution to this problem.

The surgeon reduces the cartilage in the throat to make the shape more feminine.

Trachea shave is one of the simplest and swiftest feminisation surgeries, but it must be done by an expert surgeon since a too aggressive shave could weaken the larynx structure or voicebox and permanently alter the vocal quality.

It is not always possible to make a large Adam’s apple invisible with this procedure, rather the intent is to change it from the masculine 90 degree angle to the feminine 120 degree angle.
Facial Feminisation Surgery

**Procedure**
- This can be done as an outpatient procedure with local anaesthetic in about 1-2 hours. Many women combine this operation with other procedures under general anaesthesia in the hospital.
- An incision of about 2 cm is placed under the chin, if possible, inside a crease.
- From there a tunnel under the skin is made to the thyroid cartilage. With a bur it’s prominence and upper rim are trimmed.
- The muscles that run along and over the cartilage are united in the middle to cover the remaining prominence.

**Recovery**
- A piece of gauze will cover the incision for the first 2 or 3 days.
- For about 7 to 10 days you will probably have a burning sensation and some difficulties when swallowing or talking. Patients report it as being very similar to a simple sore throat.
- Mild voice weakness may occur in the first few days after surgery, but is normally temporary.
- Swelling will peak during the first 24-48 hours, which will completely subside after about 6 weeks.

**Complications**
- **Voice change**: Your voice may change in case of over-dissection.
Practical information

In this section you can find here all the information you need before and after the operation.
Patient coordination

Our patient coordinator, Lilia Koss, looks after patients that have to stay in Marbella a bit longer after their surgery. She assists with accommodations and organizes your taxis and appointments. Our patient coordinators are here to support you.

Flying to Malaga

Our patient coordinators will suggest airlines from your country to Spain. Malaga international airport is only a 25 - 60 minutes taxi drive to Agave Clinic. More than 60 airlines fly to Malaga.

The airport transfer is provided to you for free. About 40% of the population of Marbella is of non-Spanish origin so you'll find English-speaking people everywhere.

Hotels in Marbella

We will help you find your preferred accommodations nearby and assist with reservations. Room service, internet and other amenities are available upon request. Prices vary according to the season.

Aftercare in Marbella

Our personal care and attention continues long after your procedure. During the first week post-op, you will have daily revisions in Agave Clinic. Once you return home, we hope to arrange for 3-month, 6-month and 1-year evaluations with the surgeons. However, it is highly recommended to our surgical patients to come with a companion; patients who travel alone may be recommended an extended hospital stay or nursing care in the hotel (additional fees involved).

Consultations and check-ups abroad

Each month we have a day of consultations and check-ups in the U.K. (London) and in the Netherlands (Dordrecht). You can make an appointment by contacting Agave Clinic in Marbella. If you're interested in dental implants and have a panoramic x-ray it would be very useful to bring it with you.
Typical Schedule of a FFS patient

- **Day 1: Arrival**—The taxi driver will wait for you in the airport, holding a sign with your name. The trip to Marbella takes about 1 hour.

  Depending on your flight, you may come directly to Agave Clinic for the pre-operative consultations and tests, which will take most of the day. In the meeting with the surgeons, you will confirm the treatment plan and discuss the procedures in detail. The patient coordinator will orient you on the schedule for the week.

  You should plan to do a bit of shopping for essentials the day before surgery. This way you may get the rest you will need post-op.

  You will not be able to eat or drink during the 8 hours before the scheduled operation. Nervousness may impede a good nights sleep, but try to rest.

- **Day 2: Surgery**—You will see the surgeons before surgery for any necessary facial drawing. One hour before surgery you will go to hospital admissions with our patient coordinator.

  The cooling facial mask will be placed immediately after surgery and kept on for the entire first night. You will stay 1 - 3 nights in the hospital, depending on the extent of the surgery and if you are unaccompanied. The surgeons, nurses, anesthesiologist and coordinators will see you frequently during your hospital stay.

- **Days 3-4: Release from the hospital**—If alone, you will be escorted to your hotel by taxi. Our patient coordinators will make sure you have everything you need for the night.

- **Days 4 - 8: Daily revisions**—You will come to the clinic to change wound dressings and have cooling mask sessions as necessary. You are only a phone call away at all times, as we will provide you with a spanish mobile phone.

- **Day 9: Final Revision and Departure**—You will have an exit interview with the surgeons. The nurse will remove any sutures or dressings remaining.

  Our patient coordinators will provide you with the medical authorizations you need and arrange for a taxi to take you to the airport.
Preparation

- **Medical history:** Once you have chosen Agave Clinic, we will ask for your written medical history as soon as possible, so we have sufficient time to take the necessary measures.

- **Anticoagulant medication:** Any anticoagulant medication you are taking must be stopped in good time. Please contact the physician that gave you the prescription, ask what measures should be taken, and report this to us.

- **Hormones:** On the day of surgery you’ll receive some antithrombotic medication. Therefore it’s not necessary to stop taking hormones.

- **Smoking:** We strongly advise you to stop smoking three weeks before surgery, as smoking counteracts wound healing.

- **Travelling companion:** A travelling companion would be ideal. If patients come alone, during the first day in the hotel we may require a nursing companion to provide 24hr. care, at an additional cost. It is highly recommended to come with someone you trust to help you with daily activities like shopping, cooking, washing your hair and getting dressed.

- **Stay:** Prepare to be in Marbella for four to nine days, depending on the extent of the procedure: one day before, and two to seven days after the day of surgery.

- **Accomodations & Airport transfer:** If you wish, we can help you choose a hotel near the clinic. We will also arrange for you to be collected from the airport on arrival. Transportation to the clinic will be by taxi; each way will cost around 5 Euros.

- **Weather and Clothes:** Marbella is very hot and humid in the summer and mild year-round. In the autumn and spring you will need a coat. Winter nights are cold. Although it rarely rains, it is possible between October and April. You will need to wear a hat, head scarf, or bandana to protect your face and incisions from foreign bodies and the sun’s rays. Bring button-down blouses or shirts with a wide opening to make it easy to dress.

- **Entertainment:** Don’t forget personal entertainment items such as a laptop (with appropriate electrical adapters), music, journals, crosswords, etc. We have a selection of English novels for your use. The first few days after surgery you will probably spend most of the time in your room. However, you may like to get out towards the end of your visit. For this, we provide you with a list of low-impact activity ideas in the area.

- **Adaptor:** If you want to use any electrical equipment from abroad you will need an appropriate adapter.

- **Eating:** You will be on a bland liquid or pureed diet for a few days after surgery. You may find it difficult to chew or swallow normal foods or open your mouth wide enough for normal-sized utensils. Plan to purchase wide straws and baby-size utensils. Even a large syringe is useful for consuming pureed foods. We will provide you with an electric blender and a flexible baby bottle. High Calorie shakes and powder mix, which contain all the nutrition you need until you are able to eat normally, can also be purchased in pharmacies. Once you are ready to go out, restaurant food in Marbella is varied.

- **Caring for yourself:** You will have daily visits in the clinic for after-care if necessary. Medications will be provided upon release from the hospital. However, it may be helpful to have a stroll around the neighbourhood the day before surgery to locate the nearest pharmacy and supermarket. It is a good idea to purchase beforehand any toiletries, food, drink, moist towlettes or antiseptics to care for your incision points while at the hotel. The first 48 hours post-op you may not feel up to shopping for necessities.

- **Eating and drinking before surgery—** You should refrain from eating and drinking during the 8 hours before surgery, unless otherwise instructed by the doctor.
Recovery of your facial feminisation

• **Cooling:** During the first postoperative hours a mask with a constant temperature of 15 degrees Celsius will cool the skin of your face and keep bruising and swelling to a minimum. This will add to your comfort and assist you to more rapidly recover from surgery. Nevertheless you should be prepared to be seriously bruised and swollen for about one week.

• **Aftercare:** Normally, you will be discharged from hospital by your surgeon one or two days after surgery. If alone, one of our nurses will accompany you to your hotel. You will have daily revisions in Agave Clinic during your stay in Marbella.

• **Leaving:** Before you leave Marbella you will be seen at Agave Clinic. If necessary sutures and staples will be removed 5 to 7 days after your surgery.

• **Pain:** Postoperative pain normally is surprisingly mild. We will provide you with some painkillers for the first few days.

• **Working:** About two to three weeks after surgery you can start working again. The swelling will disappear completely in about one year.

• **Oral hygiene:** If you had any intraoral incisions, we will provide you with a post-surgical antiseptic mouthwash, with which you should rinse as directed. However, you should clean with a toothbrush, toothpaste and dental floss as soon as possible. We will also do intra-oral cleanings in the clinic as necessary, to keep wound areas antiseptic.

• **Depression:** During the first week some patients tend to suffer from depression. You may find it difficult to come to terms with your new look and you may even feel that having a surgery was a big mistake. This is a normal and necessary phase. Our patient coordinators are happy talk with you or your companion whenever needed, even in the early morning hours!

• **Leaving:** Before you leave Marbella you will be seen at Agave Clinic. If necessary sutures and staples will be removed 5 to 7 days after your surgery.

• **Sports:** Refrain from contact sports for 6 weeks.

• **Check-up:** We need to see you again after three months for a check up and after one year to evaluate the final result. These check ups can take place in the U.K., Holland or Marbella.
Frequently asked questions

When can I wash my hair?
Almost immediately. Don’t be alarmed if the wound bleeds a little bit while washing your hair. For wound healing it’s very good to remove all excessive blood cloths and crusts, even better when you use shampoo. Just remember to blow-dry thoroughly and dab with a drying antiseptic, like alcohol, afterwards to eliminate any remaining moisture.

Should I sunbathe?
The young scar is very sensitive to the sun’s rays as it contains very few melanocytes. Therefore during the first 6 months after surgery we recommend protecting the scar with a sunblock or to stay out of the sun. During the first week after surgery it’s better to keep out of the sun completely as the risk for infection might be higher if your face and body get too warm.

What about smoking?
As smoking counteracts wound healing we strongly advise against smoking during the 3 weeks before surgery until 3 weeks after surgery. Smoking dramatically increases the risk for skin necrosis and should be avoided at all times.

When should I expect to return to work?
Normally our patients return to work after 2 to 6 weeks, according to the extent of surgery.

How long will I have swelling?
About 90% of swelling will have disappeared after 2 to 3 weeks. For a final result you’ll have to wait up to 1 year.

Where will the swelling be?
Immediately after surgery the swelling will be mostly in areas of loose connective tissue (cheeks, lips, around eyes). During the first few days, the swelling will move downwards towards the lower jaw and neck due to gravity. Swelling and bruising differ strongly from one person to another and can be anywhere. Preferential places are around the eyes and in the lips, but can also involve the lower jaw and neck. Bruising may not appear immediately and will gradually fade over the course of several weeks.

What will the hairline scar be like?
The hairline scar will be irregularly curved for a natural effect. In the beginning it will be red and quite visible, but after about 6 weeks it will become less conspicuous and the hair will start to grow through the fine scar. Maturation of the scar will take approximately one year.

Will I lose hair?
As the incision is just inside the hairline and the mobilisation of the scalp is in a layer deep under the roots of the hair, you shouldn’t lose much hair. Any hair loss is usually minor and temporary.

Will I have numbness?
The treatment areas will feel numb in the beginning. It will take 3-6 months to recover feeling, and you may not regain the same level of feeling as before.

What kind of pain can I expect?
Pain is surprisingly mild, considering the extensiveness of the surgery performed. Many patients don’t speak of pain at all but more of discomfort. With normal pain suppressants and anti-inflammatories, any pain and swelling can be well managed.

How do I clean the extra-oral incision areas? What should I do and for how long?
If there are steri-strips covering the wound or you have a bandage you should not touch it and keep it dry. If there are no strips or bandages, extra-oral incision area’s should be cleaned carefully on a daily basis by bathing the area as advised and patting it dry carefully. After about 2 weeks the wounds will be healed enough to begin applying a special ointment to improve the scars. For this we recommend Dermatix gel, which you can buy at any pharmacy. Use this ointment with gentle massage for 12 months until the scar has matured.

Will I be able to eat?
If you haven’t had any treatment involving your teeth or orthognathic surgery, you’ll be able to eat normally quite soon. Due
to the effects of general anesthesia, you should only feel nausea for the first few hours. You may prefer to eat softer or pureed foods initially if you have intraoral sutures. Patients should prepare accordingly in advance and purchase juices, yoghurt and soups to have during for the first few days after surgery.

**Will I be able to get up and walk around?**
In the hospital, once the catheter has been disconnected, you should gently work up to getting out of the bed and walking around a bit, unless your doctor advises differently. Listen to your body carefully and get plenty of rest, but don’t stay in bed all day. After a few days you’ll like to go outside, which you should do.

**What happens if I need to see a doctor when I return to my home country?**
First, contact Agave Clinic during office hours or after office hours through the USP Hospital. We have contacts with several doctors in various countries that can see you. If there isn’t a doctor we know in your neighbourhood, we would advise you to see your GP or the doctor that is on call. We would then discuss the problem with this doctor once you’ve been seen, and recommend the appropriate treatment. In extremely rare cases it might be necessary for you to come to Marbella.
Agave Clinic

Agave Clinic is an international pioneering centre dedicated to complete oral and facial reconstruction. Our goal is to achieve natural looking beauty by creating facial harmony.
To create **facial harmony** you need to be able to manage not only the facial skin, but also the facial bone and teeth.

In our centre we perform:

- dentistry and implants,
- orthodontics,
- maxillofacial surgery,
- facial plastic surgery
- and body plastic surgery.

Agave Clinic is only a 40 -60 minute taxi drive to Malaga International Airport. Each month we also have consultations in London and Dordrecht (the Netherlands).

In Agave Clinic’s state-of-the-art facility, you are sure to receive **first-rate service** in a modern atmosphere. Our experienced team of professionals utilise the latest technologies for a detailed examination and radiological assessment.

Surgeries requiring general anaesthesia take place in the adjacent **USP Hospital**. Agave Clinic not only cooperates closely with the USP Hospital, but also serves as its maxillofacial and dentistry department. This hospital houses a team of more than 150 medical specialists, with six operating theatres, an intensive care unit as well as an Emergency Services department. Agave Clinic can be contacted 7 days a week, 24 hours a day, through the USP Emergency Services.

Because we have this **complete team** of experts for dentistry, facial and plastic surgery under one roof you can be sure that all possible options will be taken into consideration and you will get the most comprehensive treatment plan options to solve your problems. It is the wide variety of treatments offered in combination with this close collaboration between professionals that makes Agave Clinic really unique.

Agave Clinic is **truly international** because of its multilingual staff and the proximity to an international airport. Our staff are fully conversant in English, German, Spanish, Dutch, Portuguese, French and Arabic. For all other languages we can provide an interpreter.
Founding of Agave Clinic

Agave Clinic was founded by Dr. Bart van de Ven (the Netherlands) and Dr Daniel Simon (Brazil). They got to know and appreciate each other’s expertise during two missions in Vietnam and Kenya for Caras Felices, the Cleft Surgery Organization (CSO). CSO is another initiative of Dr Bart van de Ven. Its mission is to provide free cleft surgery for affected children from poor families (www.carasfelices.es).

Dr Bart van de Ven and Dr Daniel Simon not only shared their passion for Caras Felices, but also shared the dream of starting an all-round clinic for facial surgery and dentistry in Europe, where patients could access quick and superior treatment options.
Contact information

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Tel Agave clinic: +34-952.864.191
Tel USP Hospital: +34-952.774.200

Each month, we also have a day of consultations and check-ups in the United Kingdom (London) and in the Netherlands (Dordrecht). You can make an appointment by contacting Agave Clinic in Marbella.
If you have any questions, please don’t hesitate to contact us.
General conditions
You can find the general conditions of Agave clinic on www.agaveclinic.com/EN/conditions.php.