The Mail on Sunday

PUBLICATION: The Mail on Sunday
COUNTRY: GBR
TYPE: Print
AVE: £125046.00
REACH: 748965
AUTHOR:
PAGE: 41,38,39,40
SURFACE: 284.00 %

> 16 August 2026 at 0:00

It took two hours to erase my eye bags

Saggy, tired-looking under-eyes run in *Kath Brown*'s family. But when, aged 62, it reached the point she barely recognised her own reflection, she decided it was time to take action

I DIDN'T MIND LOOKING OLDER, BUT LOOKING TIRED AND SAD WAS AWFUL

It was in my early 50s that I started to feel self-conscious about the bags under my eyes. I remember one Monday morning on the Tube getting a shock at my reflection in the window. Who was that tired-looking woman? I'd had a restful weekend but looked utterly exhausted.

When they installed a customer-facing camera at London's Kensington High Street M&S self-checkout I stopped shopping there. Live video of your face while you're buying a Best Ever egg mayo sandwich for lunch? No thanks.

I tried concealers but, if anything, they accentuated the bagginess. Sunglasses became my favourite accessory. You'll be hard-pressed to find a picture of me without them – even in winter. Despite this, I didn't seriously consider surgery until my niece, who is ten years younger than me, sent me a selfie after her lower blepharoplasty. She was 49 at the time. She looked amazing: bag-free and fresh.

We had often moaned about the genetic characteristic we'd inherited from my dad's side of the family. There are different types of eye bag. Fluid based (oedema), caused by water retention, poor lymphatic drainage, dietary habits, stress, lack of sleep or

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hormones, can be reduced with lifestyle changes and cosmetic treatments. My family are blessed with the king of eye bags – the fat-based kind (steatoblepharon) caused by a breakdown of tissue-support structures and accumulation of orbital fat due to genetics. Loss of collagen and muscle tone contribute to the downward movement of fatty tissue as you get older. No amount of sleep, water or make-up can ease the appearance of these bad boys. The only option is surgery, which I felt was drastic. However, in my job as features director of this magazine, I sit next to Rosie Green, our all-knowing beauty ed. One morning I casually said to her, 'If I was to have one thing done to my face, it would be the bags under my eyes.'

'I know the top guy for that,' she said.

And that's how I ended up in a swanky waiting room on Harley Street with an appointment to see Professor Daniel Ezra, consultant ophthalmic and oculoplastic surgeon.

He immediately addressed one concern by telling me he doesn't use general anaesthetic for blepharoplasty procedures. Patients are sedated and he assured me they don't feel or remember a thing. He asked me a few questions about my general health. Do I smoke? No. Drink? Not excessively. Is my eye health OK? I suffer from blepharitis, which makes my eyes water, and he said this may get worse for a while after eye surgery. Ezra then took a close look with a microscope and sat me in front of a large mirror. 'There are two things going on here,' he said. 'There's a lot of fat that's pushed through, creating bags – caused by genetics and environment, probably sun exposure. But there's also excess skin on the upper eyelid. It could even be affecting your vision.' (A word of warning to anyone visiting a cosmetic surgeon: they point out your flaws, even ones you hadn't noticed. I hadn't given my upper lids a second thought before then.)

Ezra explained that my tired appearance was caused not just by my under-eye bags but by the drooping upper lids. He also said I had 'significant midface descent causing disjunction between the eyelid and cheek', and suggested a midface lift, which could be performed through the blepharoplasty incision. On top of that he recommended a brow lift because a 'drooping upper brow makes you look sad'.

This comment got to the crux of how I felt: I didn't care about looking older but looking tired and sad was awful. 'I'm not a sad person, I don't want to project that,' I told him.

'That is the most common reason people want surgery,' he said. 'They feel misrepresented. People may make assumptions about them in the workplace. Have they been up all night? Are they on drugs?' It's for this reason so many men have the procedure, too (30 per cent of Ezra's patients are male).

There was a lot to take in. But the before and after pictures he showed me of previous clients – a policeman, a university professor, an actress – made the case for going ahead.

At a second consultation I questioned the need for four procedures, and we discussed the risks, which included infection, bleeding, scarring, asymmetry, double vision and paralysis of the forehead. When I asked about pain I was assured it is minimal. The most debilitating thing to expect would be blurred vision caused by the ointment you put in your eyes after the operation. It sounded terrifying. The image of a knife being used around my eyes made me particularly squeamish. But Ezra was very matter of fact. He does facial surgery for cancer and trauma patients for the NHS, and this is all in a day's work for him.

So, on Wednesday 29 April this year, I travelled to Harley Street. Trish the friendly Irish nurse took control and I immediately felt safe. 'Make sure he takes plenty of skin from the eyelid,' she advised. Ezra came in with his colleague

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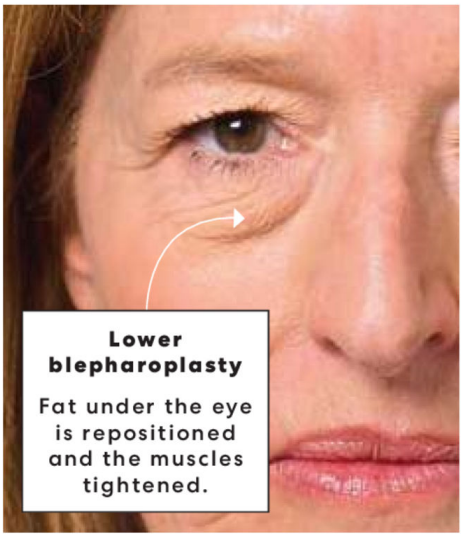
Dr Arnaud Potvin. I told them I didn't want the brow lift – the extra incision felt like a step too far – and Potvin updated the consent form.

My blood pressure was taken, the anaesthetist arrived to insert the cannula and I was led through to the operating room. I remember the surgical team chatting about their far-flung travels and then...

'Come on Kathryn, stand up please.' In what felt like zero time but was



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actually two hours, I was back in the side room. At first I struggled to open my eyes. I'm not sure if it was the sedation or stitches that made it difficult. Then Nurse Trish offered me a Pret Humous & Chipotle Wrap, which seemed mildly ludicrous, but I surprised myself by managing a cup of sweet tea and a biscuit, after which I shuffled off to the toilet to confront the mirror. This perhaps wasn't such a great idea, as I was bruised and deformed.

Ezra arrived an hour and a half later to tell me the op went brilliantly and that my husband could pick me up. A young nurse helped me down to Adrian, who was double parked outside.

Back home I went straight to bed with the curtains drawn, as my eyes were very sensitive to the light. Adrian took one look at me and decided to sleep in the spare room. I didn't blame him – I wasn't a pretty sight. The bruising was intense and the stitches brought Frankenstein's monster to mind.

Day two was the worst. When I woke up my vision was still very blurry. The wounds were oozing. I was prepared for the bruising and swelling but I had underestimated how gory it would look. Rosie had told me it's common to feel regret straight after surgery because you've actually chosen to hurt yourself – and that's how I felt. What on earth had I done? I thought I'd be sending pictures to my friends, but I felt embarrassed. Not only did my face look grotesque, I'd put my sight at risk. What an idiot.

On day four I asked Nurse Jo, who was on call to address any concerns, about the pus and general stickiness, which I wasn't expecting. She reassured me it was normal and said the blurriness would pass in a few days. She was right. A week after the operation I went to the cinema with my 26-year-old daughter, who had been concerned about my surgery ('What if you don't look like my mum?'), but was now following my progress intently in case she gets bags in later life. We saw *The Devil Wears Prada 2* and I hid my scars behind big Chanel sunglasses – an appropriate first outing.

A week after the op, my stitches were removed. This turned out to be the most painful part of the whole procedure –

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not excruciatingly so, though, just a bit stingy. I went back to work on day 11, earlier than recommended, but I felt fine. The bruising had gone and no one noticed the scars. The area around my eyes felt tender and there was still a bit of swelling around the cheek area where I'd had the lift. The biggest challenge was going to the office without make-up, as it isn't recommended this early on.

The feedback was overwhelmingly positive although I was worried about the swelling. But as the weeks went by the puffiness settled and I started wearing make-up, which was so much easier to apply without folds of skin on my upper lids. When I saw my reflection on the Tube there were no bags. I was delighted.

But here's the thing: people don't notice. When I meet friends who don't know I've had my eyes done, they don't comment. When I point it out several have said the same thing: 'Did you have bags under your eyes?' – which goes to show no one pays any attention to your imperfections.

At my final check-up with Ezra three months after the op, he suggested I have a bit of Botox in my forehead to give extra lift. I thought, why not? I'll leave the final comment to Adrian who said I was mad to 'have your eyelids cut off'.

Yesterday I showed him the before and after pictures. His reaction: 'God, you look amazing. Perhaps you should have had the brow lift!'

What you need to know

Treatments recommended to Kath:

★ **Upper lid blepharoplasty**
An incision is made through the skin crease of the upper eyelid to allow for the removal of excess skin, muscle and the remodelling of underlying fat.

★ **Lower lid external approach blepharoplasty**
An incision just under the eyelashes running into the outer corners of the eyelid allows the removal of excess skin and muscle as well as remodelling and repositioning of the fat. The internal tissue planes are also typically tightened.

★ **Midface lift**
A minimally invasive procedure performed through the blepharoplasty incision. Corrects the disjunction between lid and cheek.

★ **Direct brow lift**
Requires incisions just above the brow hairline. Usually heals well but the scars will be noticeable to a degree.

Cost

★ Upper-lid blepharoplasty: £8,350
★ Lower-lid blepharoplasty: £13,700
★ Upper and lower: £16,790
★ Midface lift (as part of same operation): £3,500
★ Brow lift (as part of same operation): £3,000

Pain factor
Minimal. I didn't even take a paracetamol. Although stitches removal did sting a bit.

Fear factor
High. Surgery around the eyes was pretty scary.

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I SHUFFLED TO THE TOILET TO CONFRONT THE MIRROR. THIS WASN'T A GREAT IDEA

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Post-surgery recovery