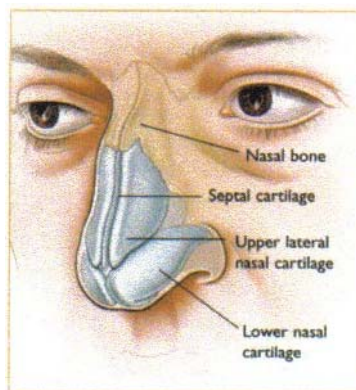


Rhinoplasty (Nose Surgery)

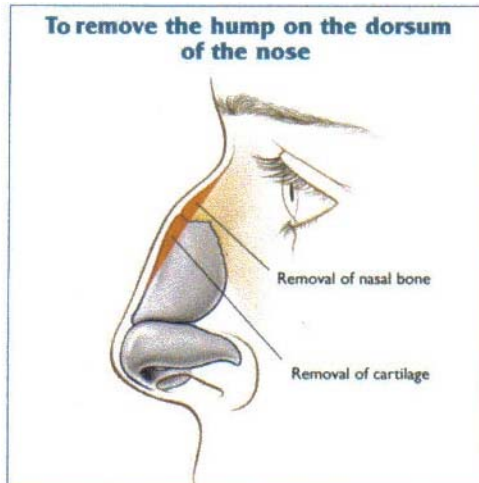
1. What is Rhinoplasty?

Rhinoplasty is cosmetic surgery of the nose. **Rhinoplasty** ("rhino-" = nose, "plasty" = to shape) It is also known as nasal refinement and the layman's term, 'nose job'. With Rhinoplasty, 'defects' from either birth or trauma can be corrected by in-fracturing or breaking the bones of the nose and re-setting them narrower and straighter. Out fracture is when the bones are broken and moved out to widen the nose.

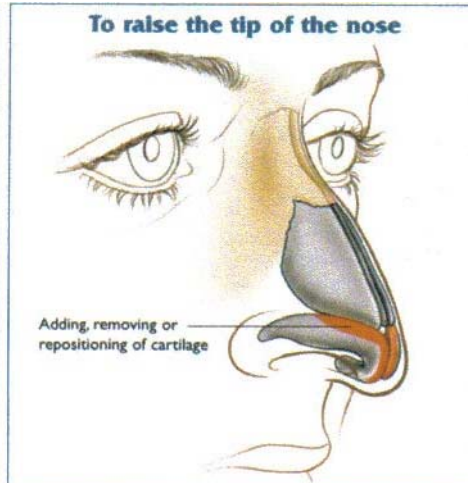


Rhinoplasty can be for aesthetic reasons only or may be a reconstructive procedure to improve structure and function.

A hump may be removed to give a more pleasing, symmetrical look and the tip of the nose can be raised.

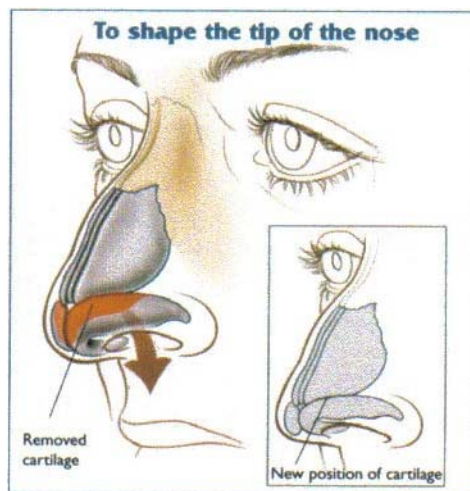


Removing the hump on the dorsum may require shaving or cutting of the cartilage or bone.



Raising the tip of the nose may require adding, removing or repositioning cartilage.

The cartilages of the nose can be molded and trimmed to create a more compact or pleasing shape. Rhinoplasty can soften an otherwise beautiful face by refining one's features.



Shaping the tip of the nose may require adding or removing cartilage at the tip.

Rhinoplasty – Nose Surgery Indications –

- Decreasing the overall size of the nose
- Removal of bump on bridge
- Narrowing a wide bridge
- Refining and narrowing the tip

- Adding 'projection' to the tip
 - Narrowing the nostrils and shortening the nose
 - Straightening the nose if crooked
 - Improve nasal breathing
 - Improve transition between the nose and upper lip
 - Restoring height of the bridge following injury or previous surgery
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2. When can Rhinoplasty be performed?

In younger patients, the surgery can be performed after the skeleton of the face is fully developed. This usually occurs in young men by the age of sixteen. Skeletal growth is usually completed in young women by the age of fifteen. In adulthood, the surgery can be performed at any age

Rhinoplasty performed on teenagers and young adults, it seems, are often beneficial to the social development and self confidence of the individual. The aging process is reflected in many ways in the nose and its correction can add youthfulness and freshness to the appearance.

If you have had a previous operation on your nose and are unhappy with the outcome, you may be a candidate for secondary nasal surgery. If too little bone and cartilage have been removed at the original surgery, additional reduction of your nasal skeleton may be indicated.

3. What does a typical Rhinoplasty consultation entail?

First, Dr Zacharia will discuss your goals with you and explain what can be achieved realistically. He will take into account what **your** facial features and bone structure would benefit from. Be it a slimmer more defined nose or perhaps a more raised tip. Perhaps it is only a

hump that is desired to be removed, making it unnecessary to have a full Rhinoplasty. Computer generated imaging is used to give you a realistic idea, of what can be achieved for you. There is no "one size fits all" when it comes to this procedure. It is all individual. Just like you!

4. Anaesthesia?

In most nasal surgeries, general anaesthesia is used. However, in some cases, local anaesthesia with intravenous sedation may be used. Dr Zacharia and his anaesthetist will help you make the decision of which type of anaesthesia is best for you.

5. The Procedure

Nasal surgery is performed as an inpatient procedure in our fully accredited private facility. It may be combined with other procedures, such as facial or chin surgery.

After anaesthesia is given, small incisions are made inside the nose, known as the 'closed' technique. Specialised instruments are used to separate the skin from the underlying supporting framework of bone and cartilage. The bone and cartilage are then sculptured to the desired shape. The nature and extent of the sculpturing are dependent on your nasal anatomy and the desired contour. Finally, the skin is redraped over the new framework and dissolvable sutures are used to close the incisions.

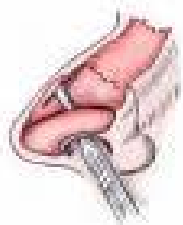


Fig 1. 'closed' technique

(internal incisions)



Fig 2. 'open' technique

(external cut)

Another technique commonly used is the 'open approach' which involves making a small skin incision across the columella (the vertical strip of tissue separating the nostrils, see fig 2). This provides more exposure, especially in complex cases and is often used in revision Rhinoplasty. This incision heals very well and is usually inconspicuous some weeks after surgery.

A splint or cast is applied to maintain the new shape of your nose and to limit the amount of postoperative swelling, the cast will be worn for approximately 7 days. Many patients remember very little about the surgery. After the procedure is completed, the patient then recovers in a relaxed environment and monitored for a couple of hours before being driven home by a companion.



Fig 1.



Fig 2.

Figure 1. above shows the cast in position and figure 2. shows an example of the splints commonly used to offer support and to help with breathing post operatively.

6. What should I expect post-operatively?

Your nose may be sensitive for approximately a month and a half, although patients report no *serious* pain or discomfort. However, patients do report the discomfort of breathing with the packing and cast on the nose. Some patients experience a claustrophobic feeling as if they cannot breathe. This feeling widely resembles a head cold

or sinus infection. Only when the cast is removed do you feel slight discomfort, unless you bump it accidentally.

7. When will the cast be taken off and does this hurt?

The cast is removed approximately 7 days post-operatively. You may feel a slight stiffness in the upper lip as the swelling moves downward. This will subside in a matter of hours. You must be very careful not to bump it as it is vulnerable to breakage. It isn't a bone china figurine but it isn't as strong as your nose was before the Rhinoplasty either. The bones will completely mend within 2 months.

If you had a Rhinoplasty where the nostrils were narrowed (in the case of flared nostrils) you will have your sutures removed. This may sting a bit, especially since it is in a sensitive area. Although most patients still feel numb in the tip area and report only minor discomfort.

8. When will I be able to see the results?

The nose will be sensitive for approximately a month and a half. The patient will start to see a difference immediately but it will still be swollen. The swelling starts to generally disappear about a week after the cast is removed. Approximately 80% of the swelling and 100% of the discoloration are usually gone by 2 weeks after surgery. 90% of the swelling is gone by two months after surgery and the rest slowly disappears over the next year. Although the nose is still swollen after the first month, most people would not recognise this fact. The patient will not notice this swelling. Instead the patient will notice that the nose becomes more refined with better definition over the first year. The inside of the nose may be swollen for approximately three weeks after the surgery. Nasal breathing may be difficult during this time. If surgery is performed to straighten the nasal septum, an improvement in breathing will be appreciated at about 3 weeks.

9. What are the risks and complications of Rhinoplasty surgery?

As with any operation, nasal surgery has risks and potential complications. Complications are extremely rare. However, with any surgery, the risk of bleeding, infection, scarring or an anesthetic problem is present.

It is possible to develop tiny red marks and spots on the nose; this can be the result of blood vessels that may have burst under the skin's surface during the surgery. Although this is extremely infrequent it can happen and the spots may not always go away.

Scarring is minimal if the incisions are made inside of the nose, however when an open technique is used, or if narrowing of the nostrils is desired the scars made on the outside of the nose may be visible for an undetermined amount of time (usually until maturation). Even when a highly skilled surgeon performs your surgery, sometimes your body may not heal correctly or have adverse reactions causing undesired results. If so it is quite possible that additional surgeries may be needed. Some patients will lose their sense of smell, temporarily. Your nose may be slightly swollen for some time. Scar tissue may heal in a way that may cause a whistling sound to be heard when you breathe in and out.

In about five percent of nasal cases, a second procedure may be required to correct a minor deformity such as a residual bump on the bridge. The corrective surgery is usually minor in nature. If a revision procedure is required, the doctor's time will not attract a fee, however a theatre and anaesthetic fee applies.

10. Are there any new techniques to repair a deviated septum? Is cauterization used? Does the nose always have to be packed after surgery?

There are many ways to fix a septum. Generally cautery is used only on the turbinates or the initial incision on the columella in open techniques. The septum is like a wall frame in a house. The skin (mucosa) over it is like wall paper, and the cartilage on the inside is like drywall. You place an incision in the front part of the nose where it is hidden and raise the wallpaper off the wall. Then you can perform the necessary correction to the drywall (cartilage) and when you put the wall paper (mucosa/skin) back it looks like nothing was done.

Usually packing will be required however; some patients are eligible for splints placed in the center of the packing on each side so that direct airflow through the nose is possible. Most patients find this a psychological discomfort rather than a physical.

11. I am 16 and have been thinking of Rhinoplasty for a long time. At what age is it safe to have a Rhinoplasty procedure?

Usually Rhinoplasty is performed at the earliest, 13 or 14 years of age in girls and 15 to 16 years of age in boys. Reason being, it is a known fact, girls physically mature faster than boys and the collective goal is to perform surgery when at least 90% of the growth is complete. There are major growth centers in the nose that affect the growth of the face.

In cases of severe disfigurement due to accidents, surgery is performed in an attempt to restore the alignment of those centers. For lesser deformities surgery is deferred until after the teen stops growing. Rhinoplasty performed on teenagers and young adults, it seems, are often beneficial to the social development and self confidence of the individual.

12. I'm getting a deviated septum and a hump fixed all in one and I wanted to know what kind of scarring I should expect. Also, how long is it after the operation that I'll see good results?

Usually, there is no visible scarring unless it is an open Rhinoplasty. Some surgeons perform all of their Rhinoplasty's, open -- some, all closed. Dr Zacharia prefers closed. If it is an open Rhinoplasty, the scar would be on the columella (the skin that separates the nostrils) sometimes resembling a straight line or a flattened 'z'.

You can expect swelling, especially in the tip if you are having tip work performed. The swelling usually begins to subside within the first month but the end result may not be seen until at least 9 months post-operatively. Although this time period tends to lean towards a year and over.

13. Is it possible to receive a chin implant at the same time as having nose surgery?

This is very common. A weak chin can and does make even an ideal sized nose look larger than it actually is. Balanced facial proportions are essential to creating an attractive facial appearance. The chin plays a crucial role in these proportions affecting, for example, the apparent projection of the nose and the definition of the jaw-neck line. Augmenting the projection of the underdeveloped chin can dramatically enhance one's profile.



Schematic of chin implant (blue)

During the consultation, Dr. Zacharia will consider the patient's specific facial proportions, whether an implant is appropriate or whether some other technique, if any, is better suited for their chin. As with any cosmetic surgery, it's important that patients thoroughly discuss specific concerns about their face to make certain that patient and surgeon have a clear, mutual understanding of the intended result. Only then will Dr. Zacharia be able to outline what can and cannot be achieved with chin surgery.

14. What is a "hanging columella"?

A nasal columella is the external and sometimes *partial internal*, fleshy section of the nose which separates the nostrils. When it is referred to being a hanging columella this section is often prominent or hangs down. An Example of a hanging columella is shown below



An over protrudent columella can be reduced with surgery.

15. Is it possible for someone to be allergic to dissolvable stitches? And if so, what would the reaction be?

If you experience redness and itchiness and sometimes pus formation - you very well may be allergic to the dissolvable type sutures. Sometimes the symptoms may not show up until about 3 to 4 weeks after surgery, if this happens, antibiotics can be given. The best thing to do in some cases is to remove any of the left over material and replace it with nylon sutures. These sutures are usually removed in 10 days. Another option can be tissue glue.

Also be advised that when the skin gets red and itchy around a suture, be it absorbable or non-dissolving -- usually it is time for them to be removed. Your body knows and will tell you when you're healing. Healing skin becomes itchy. Dr Zacharia and his nurses will educate you to know the difference between typical irritation and an allergic reaction.

Depression after Surgery?

You may experience a period of depression or marked sadness after your surgery. This can be from the after effects of anaesthesia (anaesthesia seems to bring out our sensitive sides and our anxiety), medications, post-surgical traumatic stress syndrome, constipation from the medications and a general sense of disarray. Plus being instructed to stay in bed and restricted to low impact activities, with the fact that you must sleep upright for 2 weeks doesn't make things any better. Neither does not being able to smell or taste your favorite foods very well.

Pain and discomfort can really wreak havoc on some patients and although this isn't life threatening it isn't exactly fun. As mentioned

above, the pain medications (and antibiotics) can make you feel bloated and sometimes even cause you abdominal pain. Dr Zacharia will assist with medications if this occurs to help with getting everything in working order again. Drinking plenty of water certainly helps.

Dr Zacharia and his nurses will be in close contact with you, to nurture you through any support you require.

If anything, you must remember that your Rhinoplasty takes about a year to fully refine although most of the swelling that others may notice, dissipates in a few months. Please be sure to choose your doctors wisely when it comes to Rhinoplasty as secondary (revision) surgery is more difficult to perform due to scar tissue and less tissue to work with in general. In other words, it is easier to remove than to replace.

Results

Changes in the size and shape of the nose can lead to a dramatic improvement in your facial appearance, self-esteem and your ability to breathe. It is of great importance that your new nose is in proportion to your other facial features. It should be “balanced” and natural in appearance. It is of great importance that your result does not appear to be “artificial” or “surgical”.

Dr Zacharia can "customise" the patient's procedure based on you're specific needs, anatomy and desired result. The results from rhinoplasty surgery are usually very satisfying for the patient.

The information provide on this site is not intended to replace the need for a doctors consultation. Final decisions should not be made until an individual assessment has taken place with the surgeon.

There is no obligation on the part of the patient to undergo surgery by attending a consultation. **Please phone 1800 685 438**