

Rhinoplasty

WHAT IS RHINOPLASTY?

This is an operation to alter the shape of the nose (popularly called a "nose job"). Rhinoplasty may be done for cosmetic purposes, to change appearance, or it may be done as reconstructive surgery after trauma. The incision may be made just inside the nostrils. Alternatively, an inverted "V" shaped incision through the columella at the front of the nose leaves an almost invisible scar. Both solid bone and more flexible cartilage may be removed. General anesthesia is given, and only a brief hospital stay is necessary. Recovery is prompt, but the final postoperative result may not be known for about 12 months, when the shape of the nose is finally stabilized.

WHY IS IT PERFORMED?

While the shape of the nose has little effect on the individual's physical well-being, it can have a dramatic psychological impact. Before agreeing to operate, however, the surgeon will want to ensure that the patient has realistic expectations of the outcome. The techniques used in surgery depend on the defect to be corrected. For example, bone at the ridge may be pared down to remove a hump; the bones at the side may be fractured at their base, drawn in slightly, and splinted to narrow the nose; the nose may be shortened by removing a tiny piece of cartilage at the tip. The surgeon may use any one, or a combination, of techniques to create the desired shape. Rhinoplasty is not usually performed until after the age of 16 or 17, when the facial bones have assumed their adult proportions. Photographs are taken for medical records and to assess the amount of reduction (occasionally enlargement) required. The surgeon will also use these pictures to discuss the proposed changes with the patient and to show how they will affect his or her appearance postoperatively. If rhinoplasty is being performed after trauma to the face, the surgeon will ask for any available photographs to provide a model for reconstruction.

RISKS AND BENEFITS

Even small changes to the shape of the nose can have a considerable effect on a person's self. But the benefits must still be weighed against any risk of postoperative deformity. There are also the usual risks of general anesthesia.

THE PROCEDURE

PREPARING FOR SURGERY

No special preparation is required for rhinoplasty. You will be given a thorough physical, and blood and urine samples will be taken for analysis. X-rays of the facial bones may be taken.

ON THE DAY OF SURGERY

You should have nothing to eat or drink from midnight. You will be asked to take a shower or bath and wash your hair, removing any make-up, jewelry, dentures and contact lenses. About an hour before surgery, you may be given a premedication to help relax you.

IN THE OPERATING ROOM

The surgeon works with you lying, anesthetized, on your back, with the head of the table tilted upwards. The nasal cavities may be packed briefly with antiseptic-impregnated gauze. When this is removed, a vasoconstricting agent is injected into the regions to be treated. This causes the blood vessels to constrict, reducing the bleeding during the operation. The skin and surrounding tissues are freed from the ridge of the nose. According to the preoperative assessment, small segments of cartilage or bone are removed to create the desired shape. When this is finished, the incision is sutured and the nostrils packed lightly with a sterile dressing to check any bleeding. The nose is splinted with adhesive strips and sometimes a molded plaster or plastic cast is strapped to the face. You will be moved briefly to the recovery room for observation as you come out of the anesthetic.

BACK IN YOUR ROOM

Your vital signs (temperature, pulse, blood pressure, respiration) will be checked at frequent intervals for the first few hours. You may feel sleepy and nauseous and your nose and throat may be sore. You will be given a drug for the nausea, and pain-killers if required. The back of your bed will be raised so that you are sitting upright. This improves drainage and prevents bleeding. A dressing may be placed in front of the nostrils to absorb any discharge. Your mouth may become dry because you cannot breathe through your nose; plenty of fluids and mouth rinses will be provided to make you more comfortable. The nasal packs are removed on the morning of the first postoperative day. Your face may be swollen and there may be some bruising around the eyes which will gradually subside. All being well, you may go home in a day or two.

GOING HOME

On leaving the hospital, you will be given an appointment for a postoperative check-up with your surgeon. You will be advised to take things easy for a few weeks, but in practice recovery from this operation is usually quite rapid. The bandages may be removed in about a week, and you should be able to resume all normal activities, including driving a car and going to work, within a month. Photographs may be taken after four weeks, for initial assessment of rhinoplasty. However it may take up to six months for the swelling in all the tissues to disappear and up to a year for the new shape to become stabilized.

POSSIBLE COMPLICATIONS

If the nose is left with a permanent deformity, revision rhinoplasty may be necessary to correct the defect.