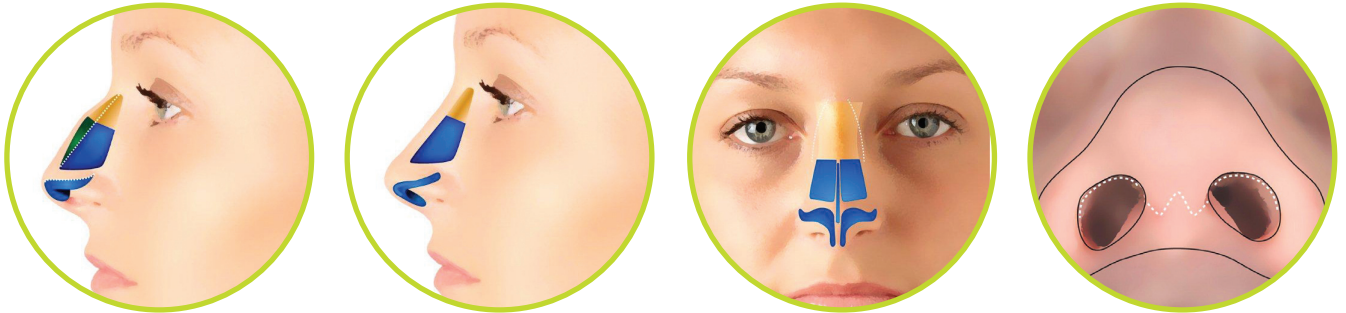


Procedures

Nose Job (Rhinoplasty)



What are the issues?

Many people feel self-conscious about their nose. An unusual shape, whether inherited, or as a result of previous injury, may adversely affect your self-confidence and your looks.

A 'nose job', or rhinoplasty, is a procedure designed to reduce, enlarge or alter the shape of the nose.

The upper half of the nose is made of bone while the lower half comprises several cartilages. To correct a nasal deformity, your surgeon may need to change the shape and size of any or all of these structures. Typically the skin of the nose itself is unaffected and its natural elasticity allows it to conform to the new underlying shape of the bone and cartilage. Occasionally, however, it may be necessary to remove a piece of skin and the base of the nostrils to reduce their size.

If the nose needs to be built up (augmented), your surgeon may use either natural materials such as your own ear, rib cartilage or bone, or use artificial implant materials.

What can the procedure achieve?

This depends on what you don't like about your nose, the structure of the bone and cartilage within it, and whether you have had a previous injury or surgery. The characteristics of a normal nose are well described but the primary aim of rhinoplasty is to address the things you don't like. Your surgeon may point out other abnormalities that you have not noticed and describe the underlying problem to you. This will help you better understand the aims and limitations of surgery.

Most often, a prominent hump or the whole of the nose needs to be reduced or straightened. In addition, the tip may be refined, or the angle between the nose and the upper lip altered. The nostrils may also need to be reduced in size.

Occasionally, some breathing difficulties are associated with narrowing the nasal airway. We can correct and improve these during the rhinoplasty operation by carefully placing cartilage grafts to open the airway.

What does the procedure involve?

We may perform rhinoplasty by an open or closed approach. In the former, a small cut is made in the skin bridge between the nostrils, known as the 'columella'. This allows excellent access to the bone and cartilages of the nose so that they can be altered as required under direct vision. Following the procedure, the skin is redraped and the cut is closed. This will leave a small scar, usually well hidden. In some circumstances it may not be necessary to open the nose fully, and sufficient access can be achieved through small incisions inside the nostrils. This eliminates any external scar.

To straighten the nose or reduce its size, the bony 'bridge' or roof is cut or rasped down to a predetermined level. The bony side-walls of the upper nose must normally be fractured in a controlled way, to bring them back together again to form a new, lower, straighter roof. The nose can be shortened and reshaped by sculpting the cartilage which forms the lower half and tip of the nose. If the nostrils are too wide or long, they may need to be narrowed.

Some noses are too small rather than too big, and they may have a saddle deformity that needs to be augmented. The tip too may need augmentation. Natural or artificial materials are used to build up a flattened or misshapen nose. Natural materials include cartilage or bone from your ear, nasal septum or ribs, for example, and these have a lower complication rate than foreign materials.

The septum is the cartilaginous layer that divides the internal nasal airway into two sides. This may be deviated as a result of previous injury and may contribute to breathing difficulties as well as asymmetry of the nose. A septoplasty aims to correct septal deformities and may be combined with the rhinoplasty.

What are the limitations?

Rhinoplasty aims to improve the shape and contour of the nose, giving a better balance to your face and improving your appearance and self-confidence. However, as with any surgery, there are limits to what can be achieved.

Performing a rhinoplasty on a child under 16 years of age is not recommended. This is because the nose is still growing and surgery can disturb future growth. Similarly, future growth may affect the results of the surgery.

The nose has to be seen in the context of the face as a whole. For example, a normal nose may be seen as too large if you have a small chin. In this case an alternative procedure, such as a chin implant, is more likely to achieve the desired effect. Your surgeon will make you aware of any such issues and how best to restore the natural balance of your face.

Altering the appearance of the nose can have a dramatic effect on your appearance. It may take a little getting used to but the vast majority of patients are very happy with their new look. Nonetheless, revision procedures are available to ensure the best possible result.

Everyone heals differently, and to a certain extent, this will affect the final result. Your surgeon will both advise you about what to expect and help you to decide what type of procedure you need.

What are the risks?

Infection

Rhinoplasty is usually performed under general anaesthetic and therefore carries a small risk of chest infection, particularly in patients who smoke. As with any operation, there is also a small risk of wound infection. Most infections will resolve with a short course of antibiotics.

Bleeding

Bleeding is a possible complication after rhinoplasty. Mostly this is self limiting and of little consequence but it may occur during the ten days or so after surgery and may require further treatment in hospital. Bruising is local bleeding beneath the skin and this is to be expected after rhinoplasty although hopefully this will be minimal.

Swelling

You will experience some degree of swelling of your nose immediately after surgery and this may persist for a number of weeks and cause some difficulty with nasal breathing. The swelling will not be obvious to most people and will not prevent you from returning to your normal life a week or two post-operatively. It will, however, disguise the finished result of the operation until it has fully subsided, which normally takes about six months.

Numbness

During the operation, local anaesthetic is used to minimise your discomfort afterwards. Once you have recovered, however, there may be some residual areas of numbness. These usually recover in time but occasionally may persist.

Scarring

Scars heal very well in the majority of patients, but some skin types are prone to develop more obvious scarring and this may take longer to settle.

There is a small risk of an unsatisfactory cosmetic result, even after all the swelling has subsided. You may be able to feel or see irregularities on the nose. If this happens, it is possible that a second operation may be needed to correct it. Most surgeons wait for at least a year before considering a second procedure to ensure that the new shape has settled fully.

What can I expect afterwards?

At the end of the surgery, your nose will be dressed with an external splint to maintain the shape and control swelling, and internal packs may be placed in the nostrils to prevent nosebleeds. These packs are normally removed the following day and you can be discharged to return home.

Stitches in the skin of the columella are removed at one week in the clinic, along with the tape and splint. Stitches inside the nostrils are dissolving and don't need to be removed.

If cartilage or bone has been used from elsewhere to augment your nose, you may require other stitches to be removed but you will be advised of this after your operation.

You will be prescribed oral painkillers to take home, which can be taken as needed to reduce any pain or discomfort. Follow-up appointments will be arranged with the nursing clinic for about one week after the procedure, and with your surgeon for about six weeks later.

Contact Us

For information and appointments please contact us and we will be happy to help.

t: 0844 939 6363

f: 01506 602632

e: info@beyou.co.uk

w: www.beyou.co.uk

Call us
0844 939 6363
www.beyou.co.uk