

Patient Information Sheet

Rhinoplasty

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What is a Rhinoplasty?

Rhinoplasty is surgery to improve the shape and size of the nose, with correction of blocked airways if necessary.

Preoperative assessment

Often a lot of thought has been devoted to the size and contours of the nose and most people have an idea of their ideal nose. Points which need to be considered prior to surgery are:

- The final result is determined by the starting material and noses, like any other parts of the body, cannot be constructed to order.
- A nose must be in proportion to the individual facial features. I can assess whether the component features are in proportion, if there is any asymmetry and if the overall appearance is pleasing. The nasal height and width should be in proportion to the eyes and chin. Tip height and size is also important and the angle made by the central strut of the nose with the upper lip is assessed, as is the extent of nostril show. The angle between the nasal base and the forehead is also taken into consideration, as is the presence of any dorsal hump.
- The final desired characteristics and angles vary for men and women and also different races.

The operation

Surgery is performed under general anaesthesia. You will be asked not to eat or drink for at least 6 hours before the operation. Local anaesthetic solution is also injected into the nose during the surgery to reduce bleeding and help with postoperative pain relief.

Access can be gained using incisions inside the nose, but often a small incision placed on the central nasal strut behind the tip provides the optimum exposure. The latter is termed the open tip approach. The scar is unobtrusive, only being visible when the head is tilted back. It may be necessary to fracture the nasal bones and it is sometimes necessary to obtain a bone or cartilage graft from another part of the body. Tiny removable stitches are used to close the incision on the nasal strut and dressings consist of thin strips of tape and a plaster or plastic splint. Most patients spend one night in hospital.

After surgery

Immediately following surgery, there is considerable swelling and often there is some bruising. The swelling means that the nose is blocked and the final appearance of the nose is not immediately apparent. The dressings and the stitches are removed between 5-7 days. After 3 weeks, a lot of the swelling has subsided and most people have returned to work by this stage. The swelling continues to improve over the next 6-12 months. Where the open tip approach is used, swelling and numbness of the tip may persist for several months. Some patients find that taking arnica tablets for a week or so before surgery reduces the swelling. You should avoid straining or heavy lifting immediately after surgery to minimise the risk of bleeding, and reducing or stopping smoking is important.

Possible complications

- As after any surgery, bleeding or infection rarely occur and respond to local pressure and antibiotics, respectively.
- Noses which have previously been broken have a tendency to relapse following an operation as the cartilage retains a memory of the original shape and revision surgery is sometimes necessary. Revision surgery is usually best deferred until about 1 years after the initial operation.
- Tiny blood vessels on the nose may become more prominent following surgery and these can be treated with a laser if necessary.
- Sensation may be altered at the tip and this may persist, especially following the open tip approach.