

## Rhinoplasty

### **NORMAL NASAL FUNCTION**

The nose is the first part of the breathing system, which continues all the way down to the lungs, held within our chest. The nose helps to warm air which is breathed into our wind pipe and eventually the lungs. The nose is also important for our sense of smell and helps with taste. In addition the nostrils contribute to the sound quality of our voice.

### **REASONS FOR PERFORMING A RHINOPLASTY**

Surgery to the nose is carried out to improve the function and/or its appearance, whether this abnormality is present from birth, or has been acquired for example secondary to injury. The patient needs to be aware that perfect results can not always be achieved, particularly if the operation is to improve appearance. There is no upper age limit for surgery, although most surgeons prefer not to operate during growth spurts in the early teens.

### **PREPARATION FOR THE OPERATION**

This begins with a consultation between the patient and surgeon, about what your expectations are, what can be realistically achieved and the risks of the procedure. Following the consultation, photographs of the nose will be taken and this will help to identify problem areas with the cosmetic appearance and also allows a comparison to be made after the operation.

### **THE OPERATION**

6 hours prior to the procedure the patient must not eat or drink, as this procedure is carried out while the patient is asleep, using a general anaesthetic. Sometimes the procedure is performed as a day case, or occasionally patients will stay overnight.

The operation takes up to 2 hours to perform and involves making small cuts through the inside of the nose, reducing scar visibility. Sometimes cuts are made between the nostrils or half way up on the outside of the nose. Whatever the method, the skin of the nose is

separated from the underlying cartilage and bone. This then allows the bone and cartilage to be sculpted to change the external appearance of the nose. In addition, internal problems such as blockage of the nostril can be improved by removing the cause of the blockage or altering the internal shape of the nostril, improving airflow.

Following the operation a dressing is placed over the nose and sometimes dressing within the nostril are required. If the patient wakes up with a dressing within the nostril this is usually removed within a few hours of leaving the operating theatre. The dressing over the nose is important to provide support to the nose and also to protect the area. It is usually removed within 10 days.

### **RISKS OF HAVING A RHINOPLASTY**

There is a small risk of getting a bad nose bleed during or after the operation. Infection of the scars is also a risk. Sometimes a patient will notice a temporary reduction in their sense of smell and/or taste. Another temporary complication is numbness over the nose, upper lip and front upper teeth.

Finally obstruction to airflow within the nostril may persist, as may part of the initial deformity to the nose. Sometimes a secondary procedure is needed on the nose to gain the desired cosmetic affect.

### **CARE AFTER THE OPERATION**

Initially after surgery the nose may appear swollen and bruised. Often there is additional swelling and bruising around the eyes. This usually settles down within 10 days. Nose bleeds may also occur. Sometimes patients also notice that the nose feels even more blocked for the first few weeks after the operation. However most patients can lead a normal life within 2 weeks of the operation.

Avoid knocking or banging your nose. Contact sports should not be played for six weeks until your nose has healed completely. Once the swelling has come down, the nose and face can often remain tender and feel stiff for many weeks.

The follow up arrangement will vary according to the operation. However the patient should seek medical attention if pain commences around the nose despite taking regular painkillers, or if there is a sudden nose bleed, or the nose is injured, or the dressing come off earlier than expected.