



the lowdown on rhinoplasty

Sydney plastic surgeon **Dr Warwick Nettle** explains to Christine Doggett the issues to be considered when a patient contemplates nose surgery.

Cosmetic surgery for the sake of a better-looking nose and reconstructive surgery due to trauma both require skill and experience,” Sydney plastic surgeon Dr Warwick Nettle says. “However, I think it is fair to say that a cosmetic surgeon with extensive knowledge and the necessary skills and experience in rhinoplasty will be able to create a nose that is aesthetically pleasing, but may not necessarily have had the training required for successful reconstructive surgery.”

A plastic and reconstructive surgeon understands the dynamics of the function of breathing. It is obvious that an attractive nose – one that sits well on the face and is in harmony with the other facial features – must also allow its owner to breathe comfortably. If in the process of creating a

more aesthetically pleasing nose, its primary function is disregarded, a new set of problems is created, and it is not unusual for a reconstructive surgeon to be required, some time after the first rhinoplasty surgery, to perform revision surgery to correct a faulty procedure.

“If you’re contemplating rhinoplasty, your first consideration should be your choice of an experienced surgeon who understands the internal function of the nose so you acquire a more beautiful nose that you can breathe through,” Dr Nettle says.

Communication with the patient during the consultation process will clarify the patient’s expectations for the surgeon. It is during this process that the patient begins to better comprehend the procedure and how the final result will be

achieved. Dr Nettle explains, "For example, a young woman with a bulbous tip that she wants refined will understand that it is important to the overall look of her face that the new reshaped tip should remain in proportion to the width of the dorsum, or bridge of her nose. There should be harmony between the tip and the bridge, and the nostrils should also be in proportion to the overall size of the tip. The tip must be refined without compromising the breathing function."

In the pursuit of a refined tip, the skilled surgeon will take care not to remove too much (think Michael Jackson), thereby avoiding collapse of the tip. It is in cases like these that secondary rhinoplasty is necessary to reconstruct the tip if too much cartilage has been removed.

Sometimes some sort of trauma to the tip of the nose, such as the removal of a skin cancer, will necessitate a much more difficult reconstruction. "Both the surgeon and the patient want the nose to look good and to function effectively. This requires the surgeon to find innovative ways in the use of the skin and cartilage, perhaps taking it from the side wall of the ear, to recreate the tip in an aesthetically pleasing way."

In reconstruction of the bridge of the nose, or dorsum, the same considerations with regard to balance and function must be made. Aesthetically, it is common for a patient to request the removal of a 'hump' in the bridge, or the opposite situation, where a patient requires a broad bridge to be narrowed. Generally, the top third of the nose is bone and is easier to deal with. The remaining two-thirds is cartilage, which has a 'memory' and after time it may seek to return to its previous form. This makes it more complex to deal with, and surgery to this area may necessitate the surgeon's skills in micro-cuts, small grafts and stitching.

"Whether the patient is more focused on refining the tip of the nose, or reshaping the bridge, the use of computer imaging is excellent in assisting the patient in understanding the importance of the harmonious positioning of all the facial features together," says Dr Nettle. "These realistic expectations, combined with the skills of the surgeon in maintaining or improving the performance of the breathing function, should result in an attractive nose and a happy outcome for the patient." **acsm**



BEFORE



AFTER nasal tip rhinoplasty by Dr Nettle



BEFORE



AFTER nasal rhinoplasty by Dr Nettle



BEFORE Nasal tip skin cancer



Cancer excised, composite graft and flap reconstruction by Dr Nettle



AFTER One year postoperation by Dr Nettle