SECONDARY RHINOPLASTY

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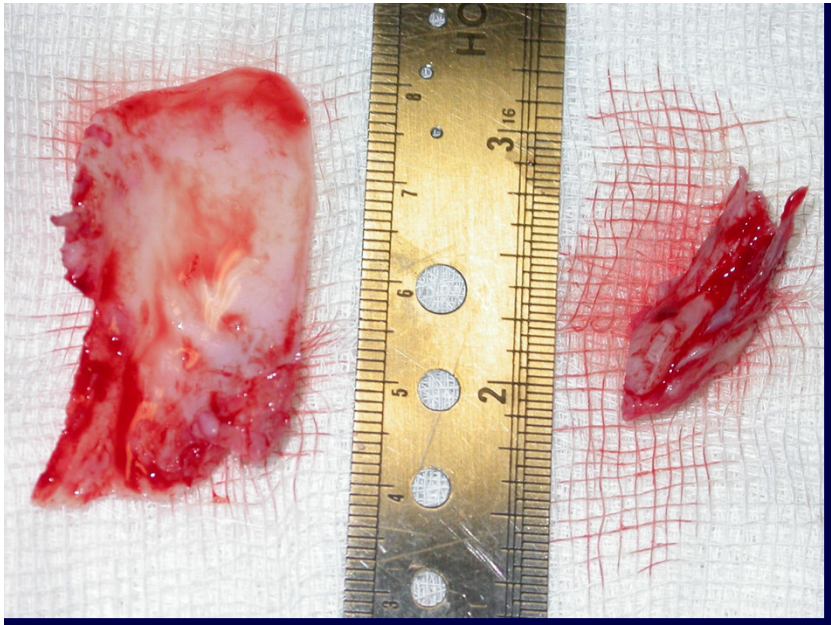
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INTRODUCTION

- Natural sculpturing of the nose during secondary rhinoplasty is the common goal of every rhinoplastic surgeon.
- Even for the most experienced surgeons, rhinoplasty remains the most challenging of all aesthetic surgeries.
- The aim of this study is to assess secondary rhinoplasty surgery on patients by presenting the functional and aesthetic techniques, and evaluating the results of the surgical interventions.

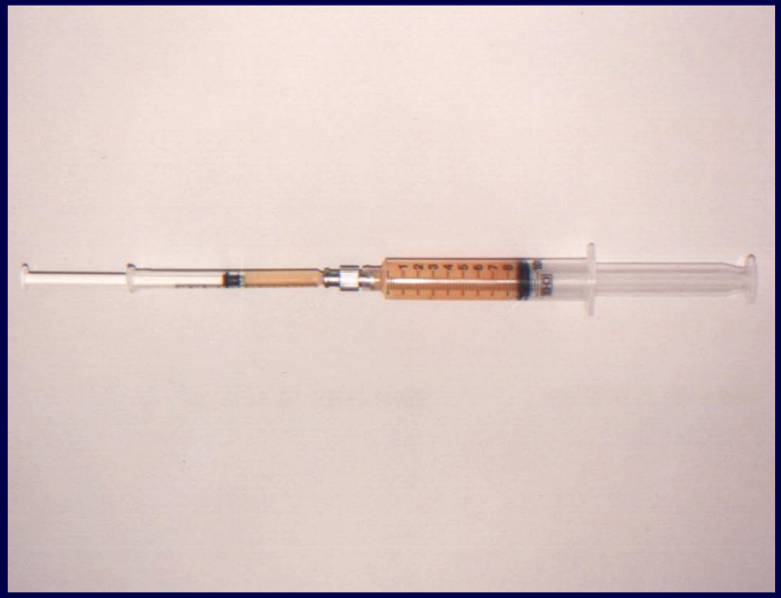
METHODS AND MATERIAL

- Between January 2000 and January 2014, 1242 secondary rhinoplasty surgeries were performed on 162 males and 1080 females with a mean age of 26 years old.
- Open rhinoplasty surgery was performed on 1170 patients, and closed rhinoplasty surgery was performed on 72 patients.
- 108 surgeries were performed with local anesthesia and 1134 surgeries under general anesthesia with or without submucosal reduction of septal deviation and inferior turbinectomy.
- Septal, auricular or costal cartilage and fat graft reconstruction was also performed.

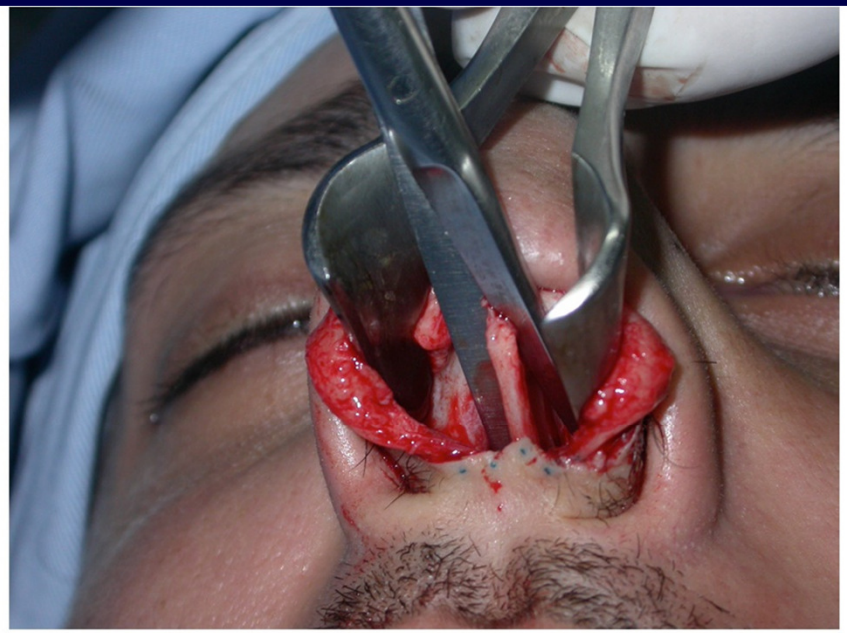




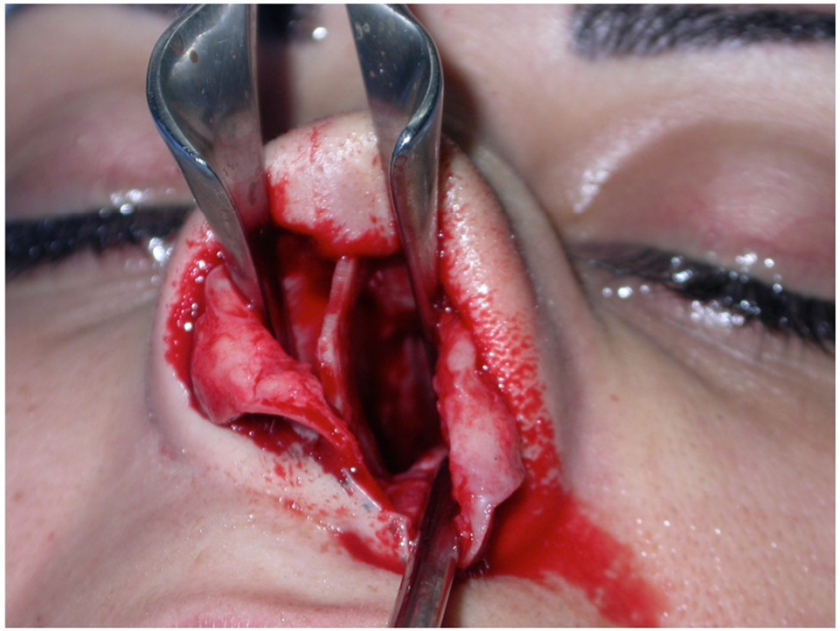




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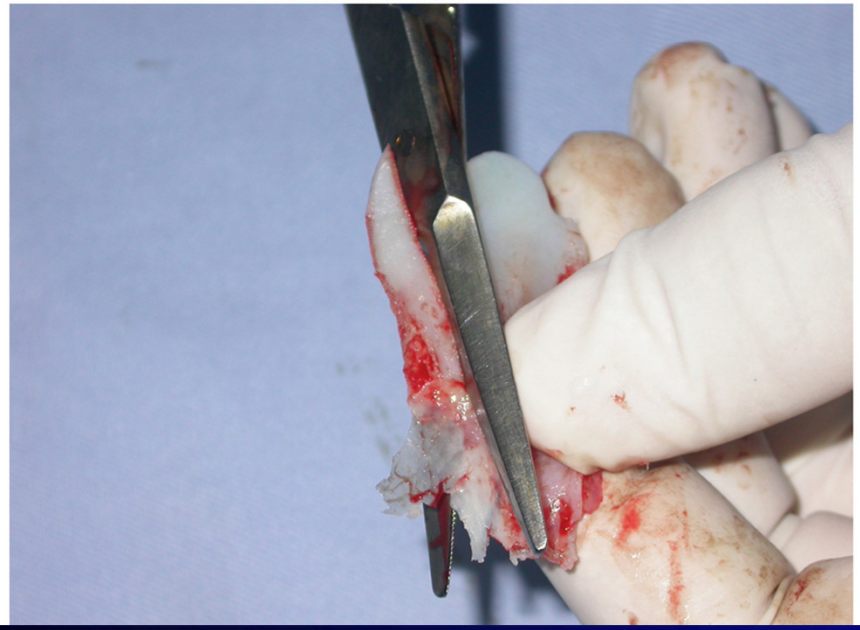


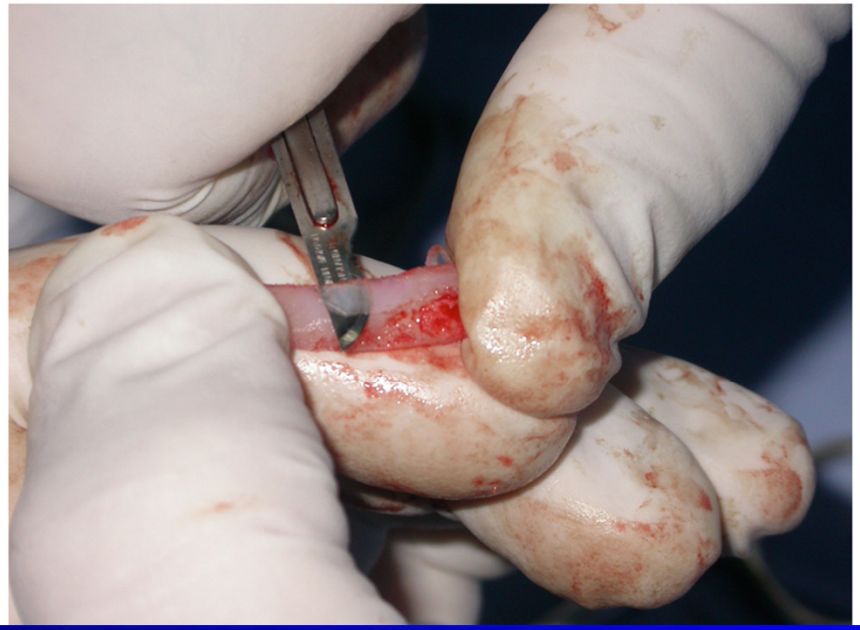


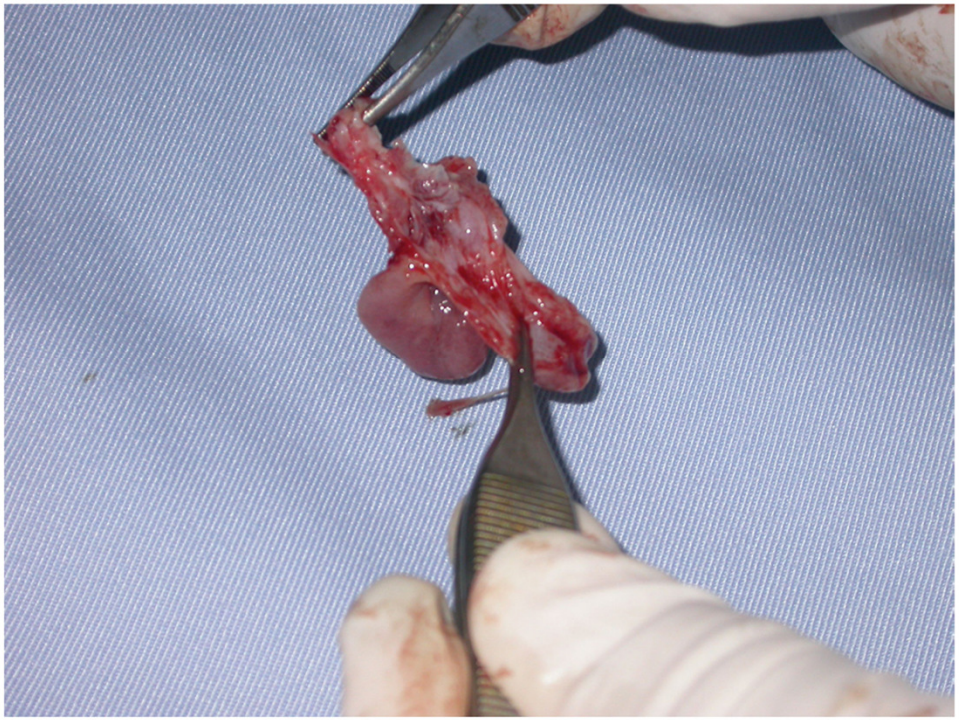


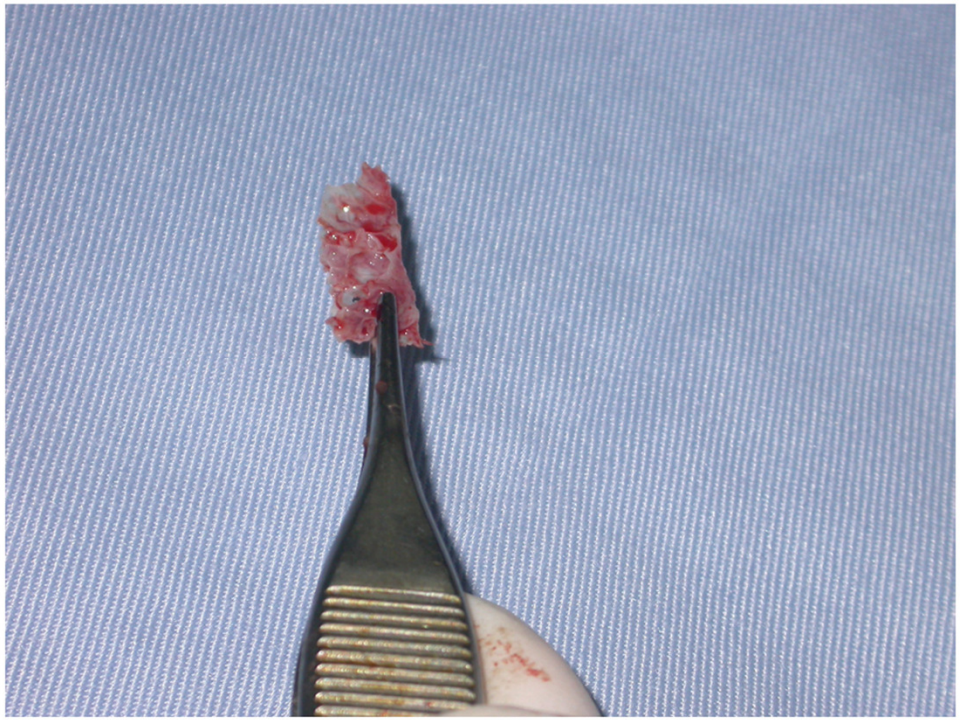

METRIC
INCHES



















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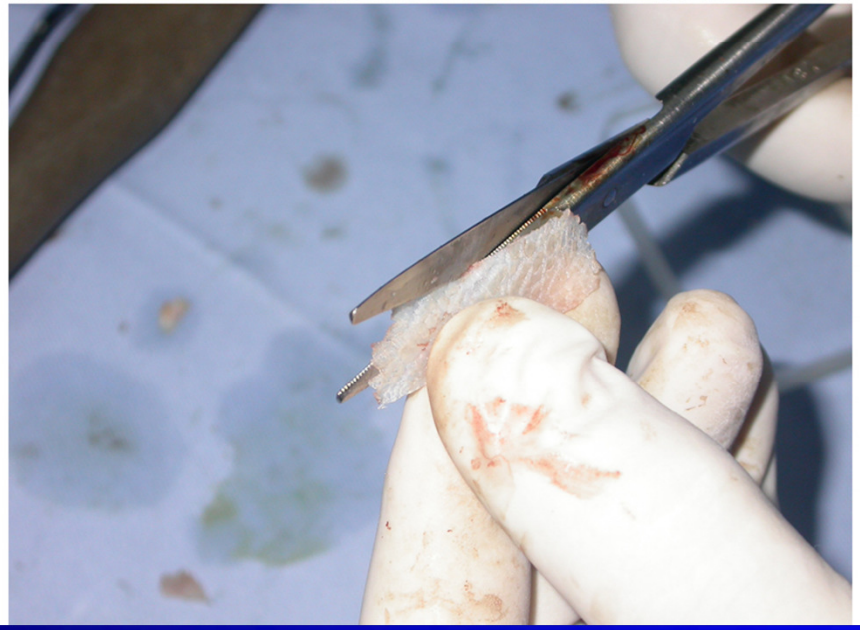


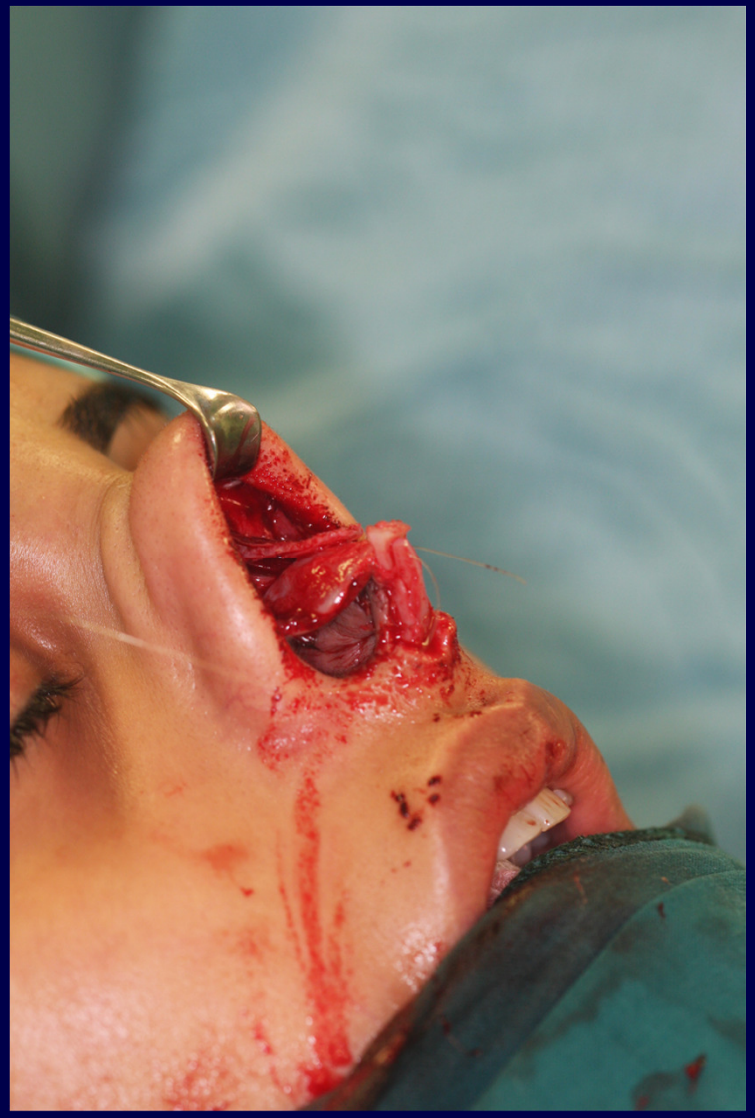
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METHODS AND MATERIAL

- The reconstructive and aesthetic techniques were performed on 13 different categories:
- 234 nasal tip deformity
- 180 short noses and pig snout nose (under projected nose)
- 108 beak nose deformity (bec de corbin)
- 126 nostril deformity
- 198 saddle noses
- 108 residual cartilage or bone humps
- 54 deviated noses
- 36 pinched noses and fibrous prominent tip
- 18 short, broad, oblique, showing columella
- 36 flat noses
- 36 inverted V
- 108 over projected nose
- (1 bilateral internal cantus tearing)

METHODS AND MATERIAL

- The patients' functional results were then evaluated using a questionnaire that addressed the degree of nasal obstruction for respiration, degree of aesthetic satisfaction and the odorant quality of pre and post operational procedure. Also, an independent observer evaluated the aesthetic results based on pictures taken before and more than 6 months after the rhinoplasty surgery.

METHODS AND MATERIAL

Questionnaire

- Name:
- Age:
- Sex:
- Smell:
  - Deteriorated…..
  - No improment…..
  - Improved …..

. Nasal Obstruction:

- Deteriorated…..
- No improment…..
- Improved …..

METHODS AND MATERIAL

- Aesthetic evaluation
  - The independent observer reported highly satisfactory outcomes in the majority of cases, with aesthetically appealing noses.

METHODS AND MATERIAL

Aesthetic evaluation sheet

- Photos Number:
  - Excellent…..
  - Good…..
  - Average…..
  - Deformity…..

RESULTS

- Cases were divided on 13 categories

RESULTS

- I- 234 nasal tip deformity





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RESULTS

- II- 180 short noses



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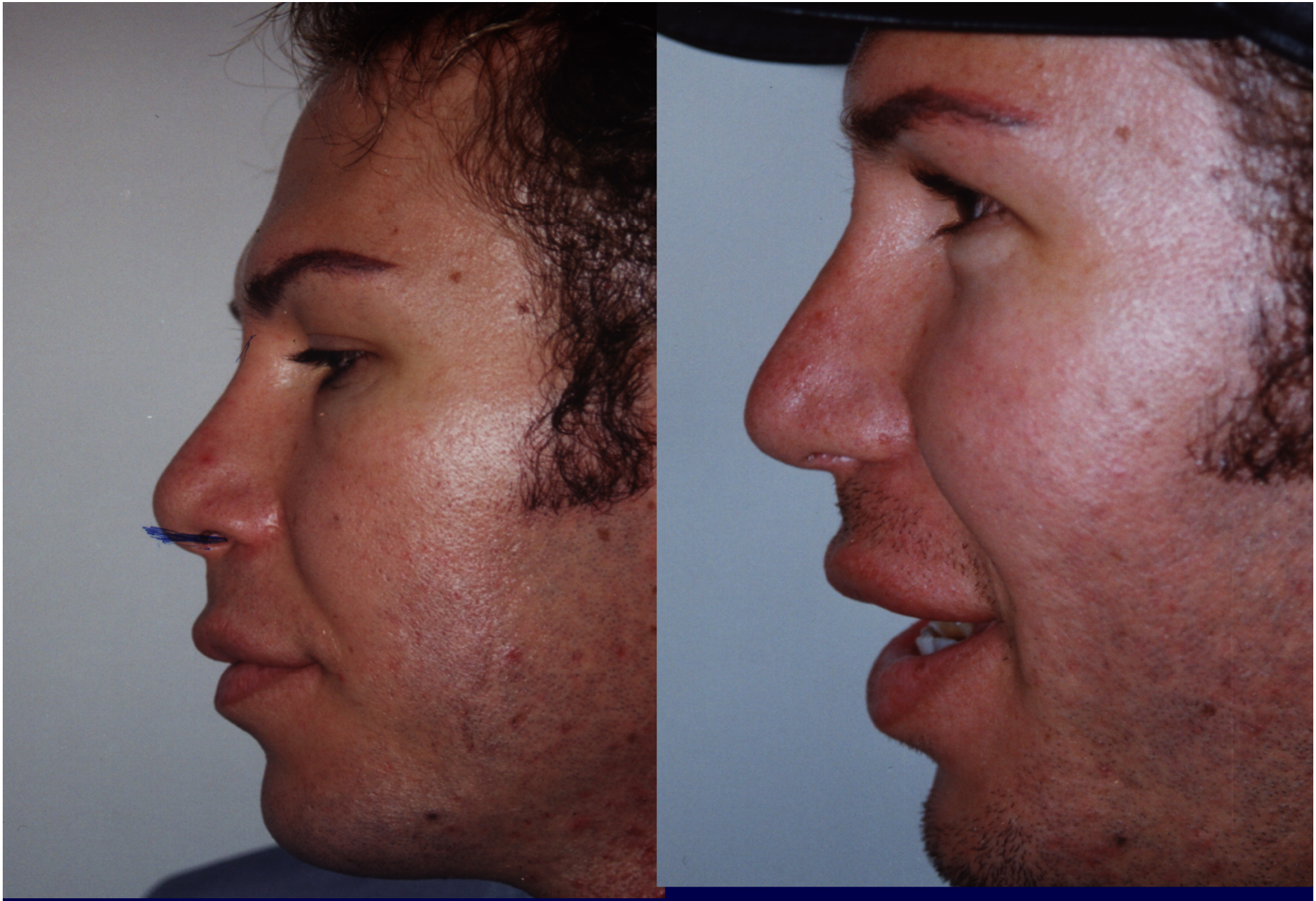
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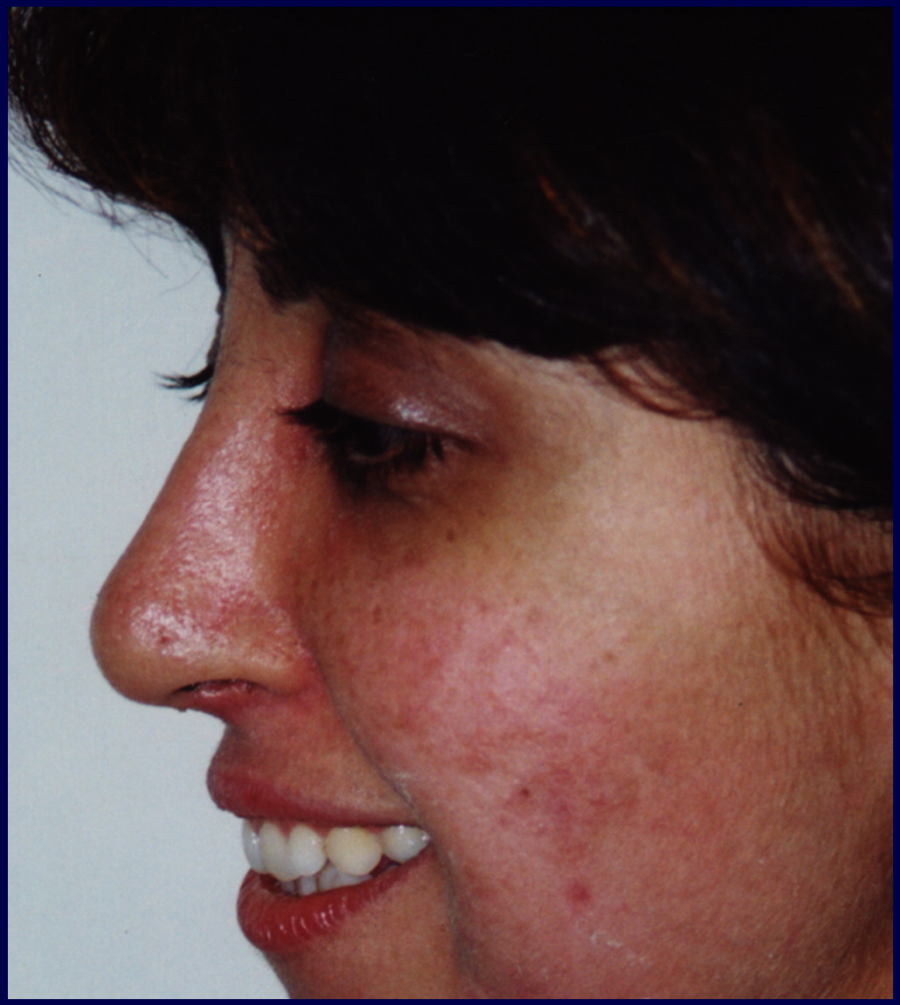


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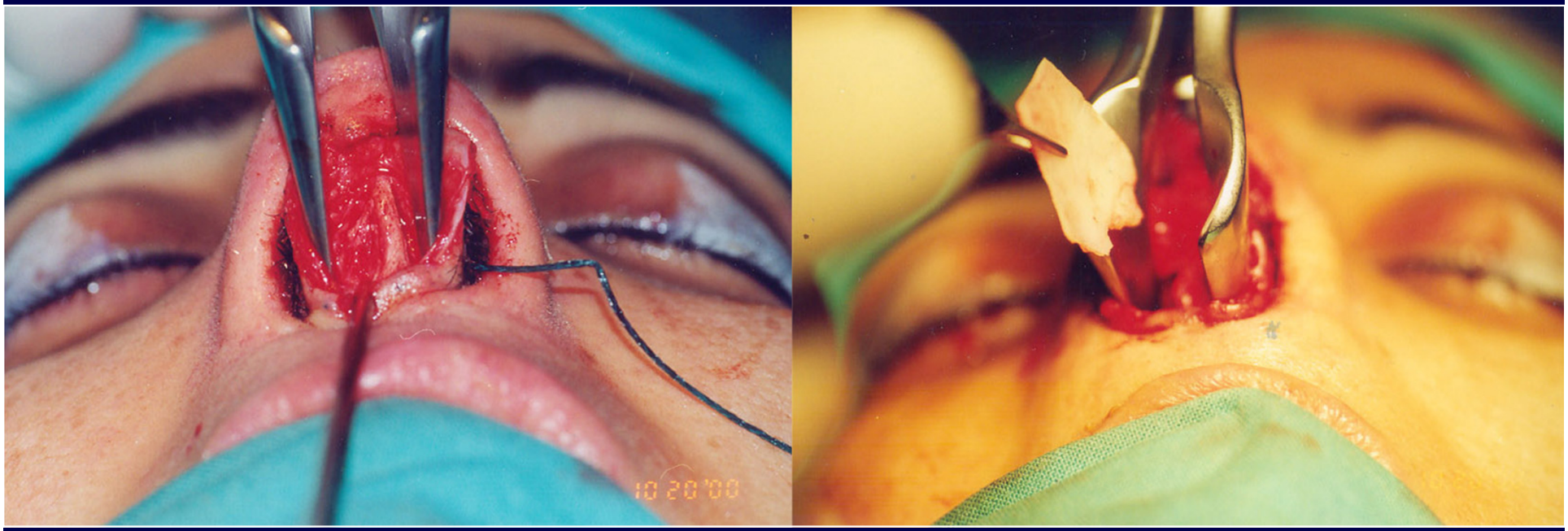


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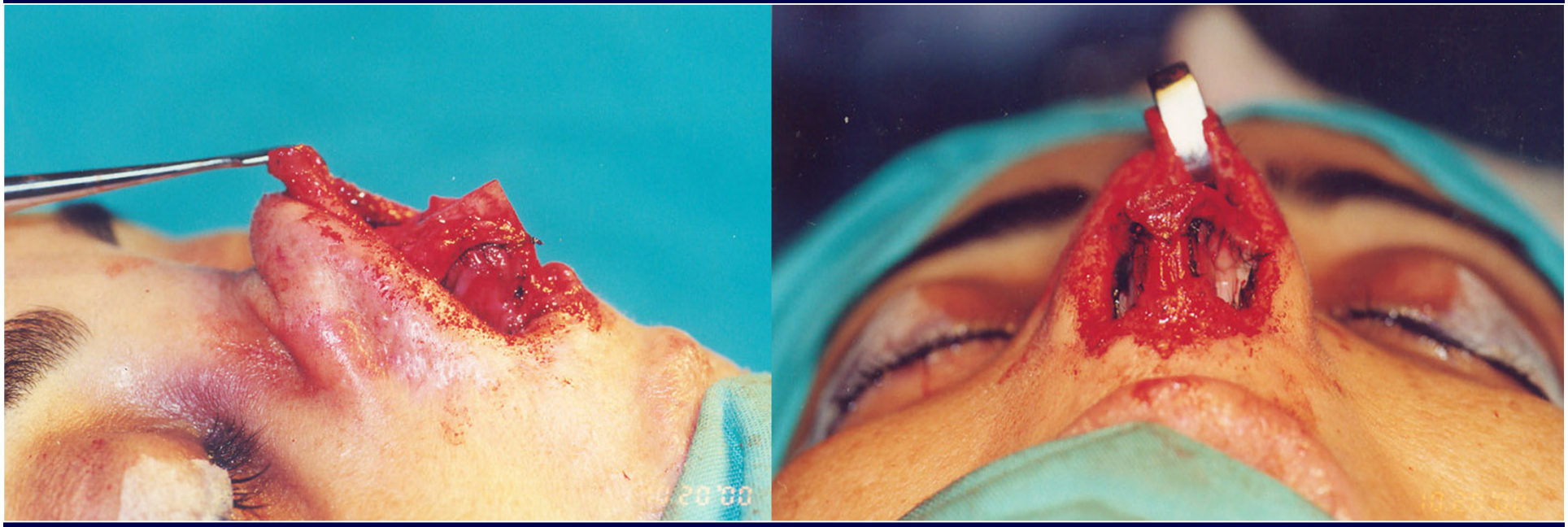




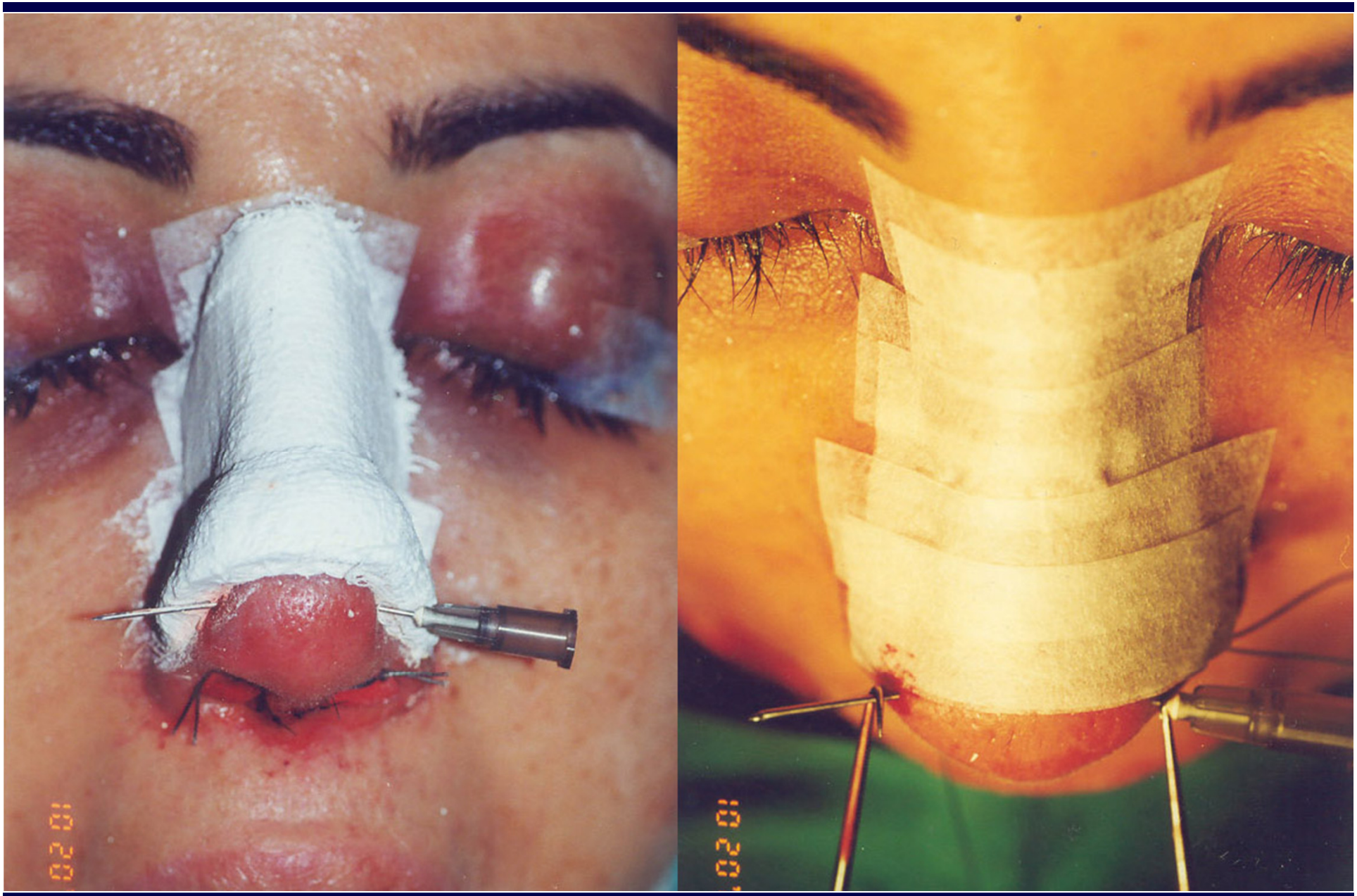
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RESULTS

- III- 216 beak nose deformity (bec de corbin)



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RESULTATS

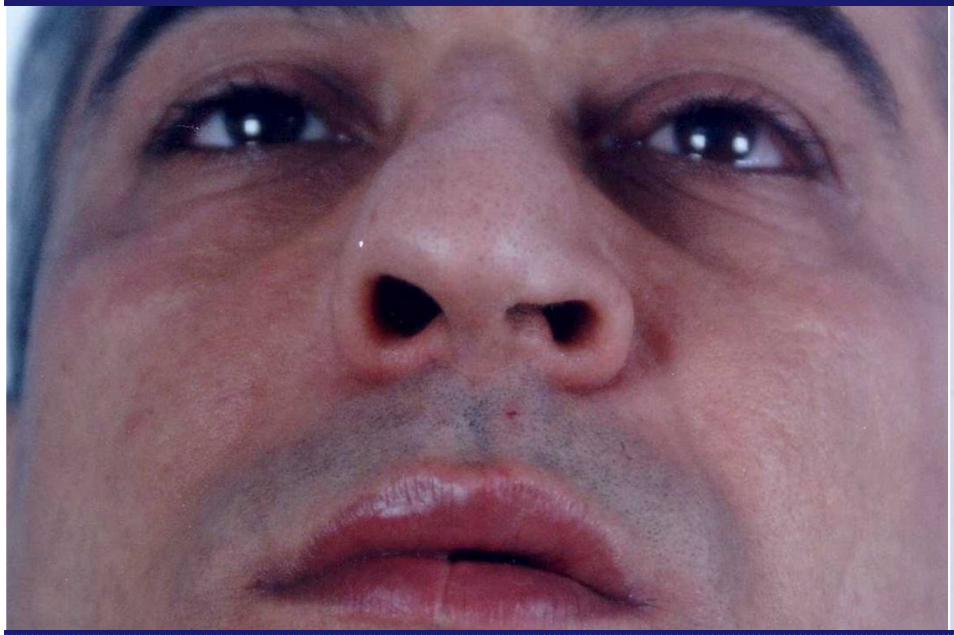
- IV- 126 nostril deformity

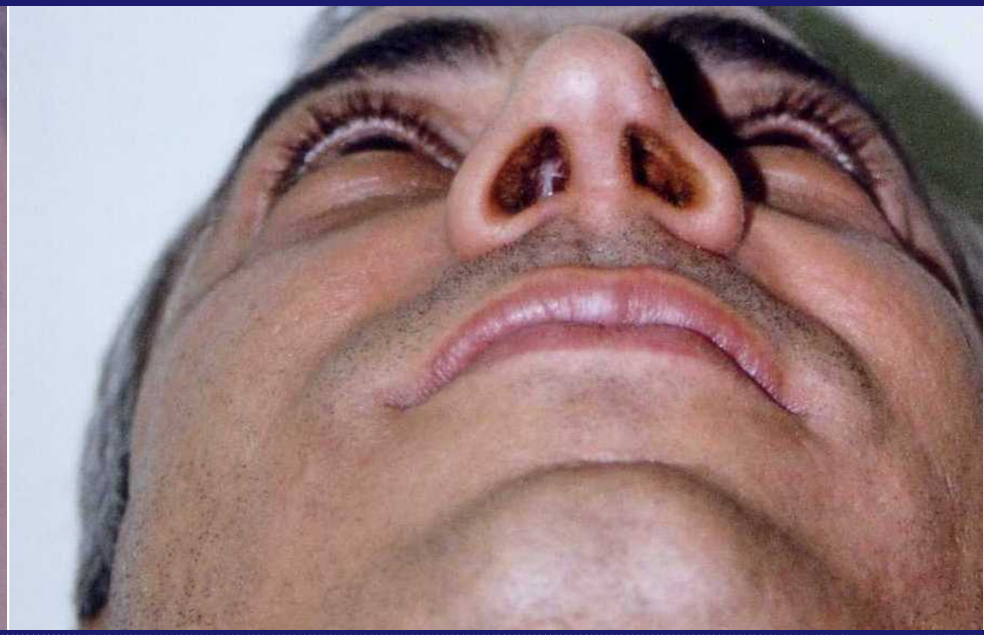


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RESULTS

- V- 198 saddle noses



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RESULTS

- VI- 108 residual cartilage or bone humps



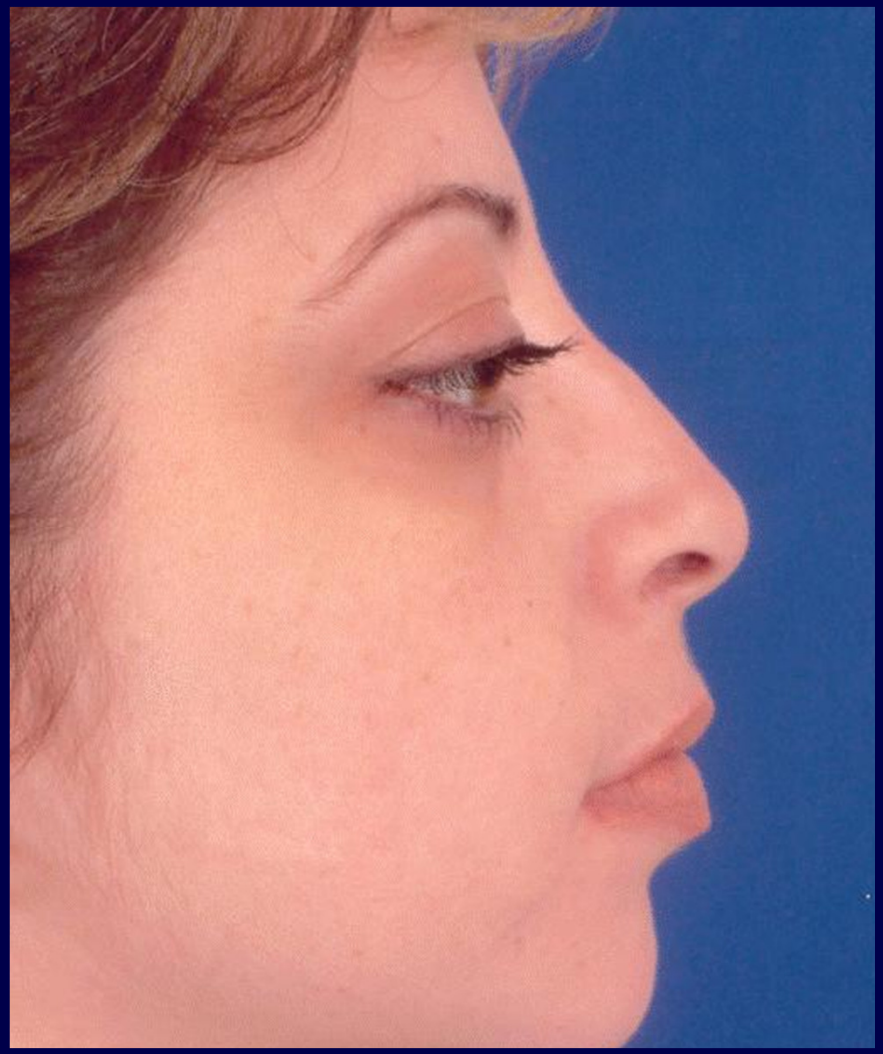
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RESULTATS

- VII- 54 deviated nose



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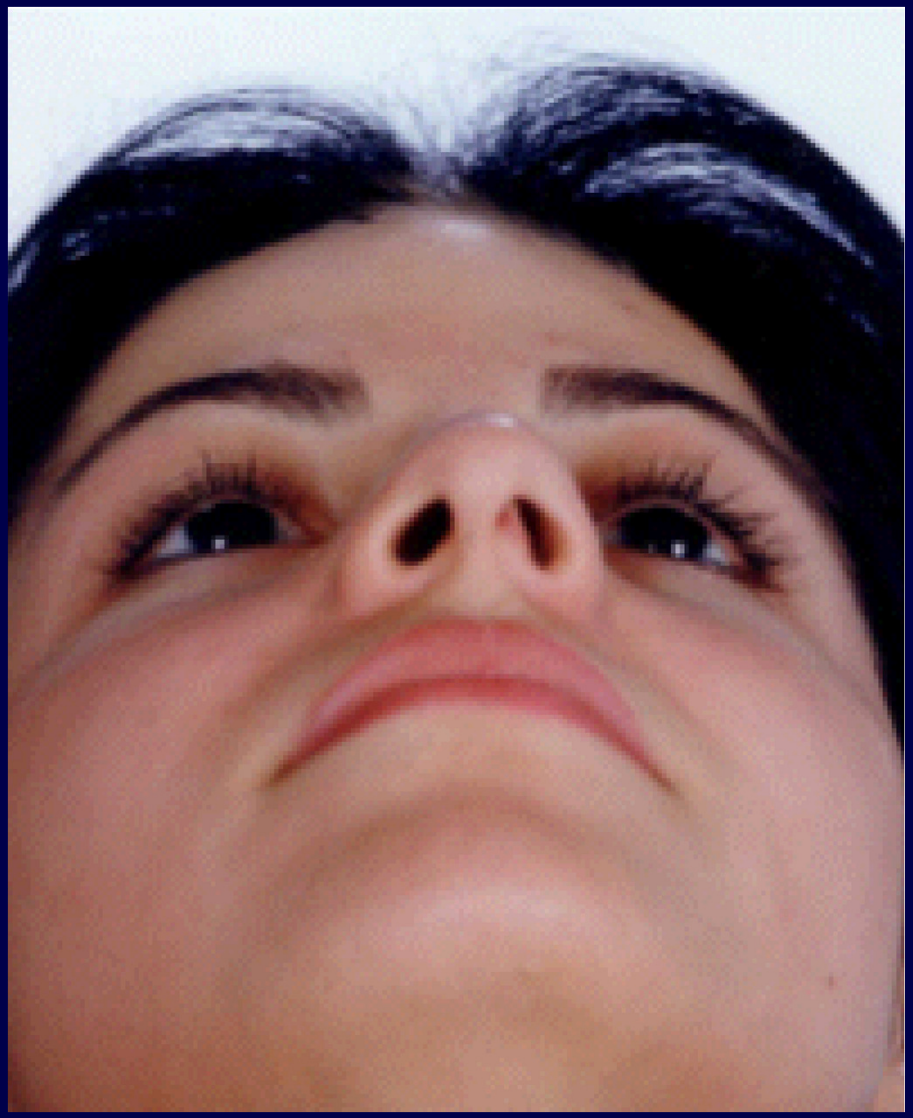
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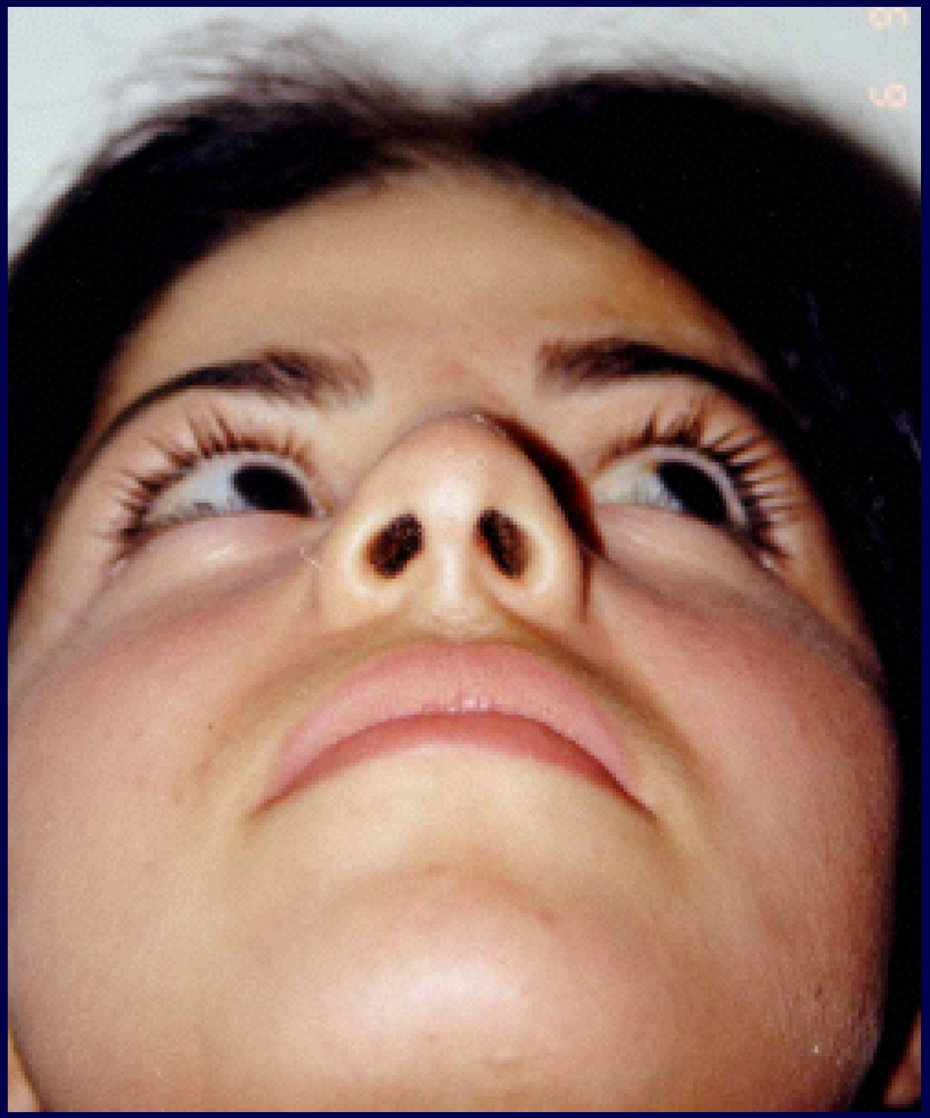


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RESULTATS

- VIII- 36 pinched noses and prominent tip



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RESULTATS

- IX- 36 flat nose



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RESULTATS

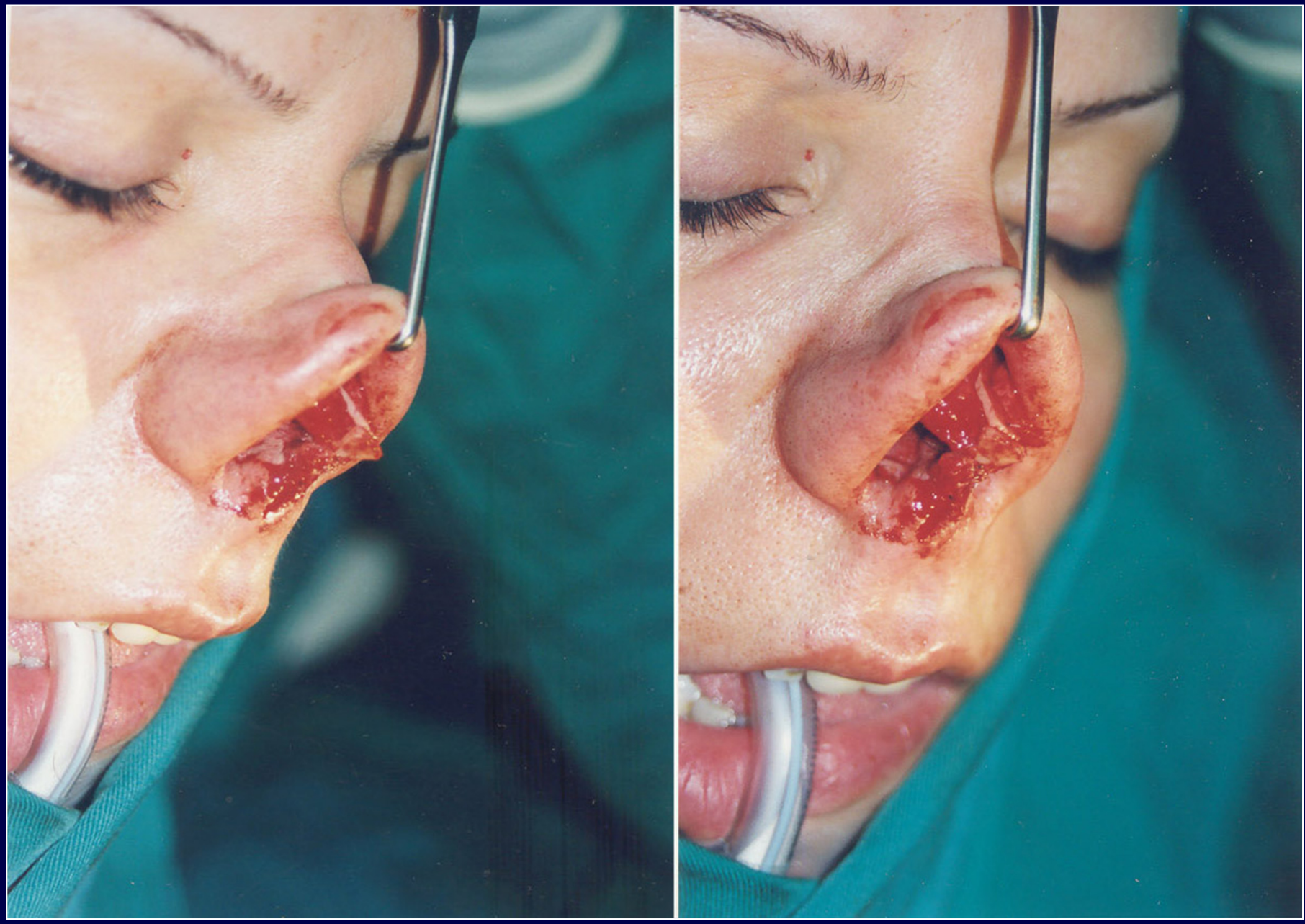
- X- 18 columela deformity



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RESULTS

- XI- 36 Inverted V



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RESULTS

- XII- Over projected nose (Droopy nose tip)



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RESULTS

- XIII- 1 bilateral internal cantus tearing



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DISCUSSION
FUNCTIONAL RESULTS

- All patients reported significant aesthetic, olfactory and respiratory improvement:

DISCUSSION
AESTHETIC RESULTS

- 990 excellent results
- 216 good results
- 36 average results
- 0 mediocre results

DISCUSSION

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CONCLUSION

- In conclusion, advances in rhinoplasty techniques allow satisfactory results in secondary rhinoplasty that were not possible in the past. Furthermore, the choice of a qualified surgeon is of paramount importance. Only the surgeon that has great skills, and who is experienced, careful and artistic will make all the difference in achieving great results in the surgical procedure.

CONCLUSION

- Bill Wright theory:

