

Rhinoplasty

Nose Enhancement Surgery

The nose is very visible. It sits in the center of the face and projects forward like a marquee on the front of building. It cannot be concealed with clothing or altered with make-up. The visibility of the nose makes it one of the body parts most commonly corrected by plastic surgery. In 2005 alone, more than 200,000 rhinoplasties were performed across the U.S.

The majority of patients who seek plastic surgery for their nose are self-conscious about their prominent hump. Others complain of a nose that is too long, large, round, wide or crooked. Some were born with the nose they dislike. Others acquired theirs from physical trauma.

Today most plastic surgeons who perform rhinoplasties utilize the “open technique.” Through a tiny skin incision across the columella (skin between the nostrils) and two internal (invisible) incisions, we expose the entire skeleton of the nose. This enables us to correct any type of deformity with utmost precision. Via the “open technique,” we also have unparalleled access to the septum, which we frequently straighten out in order to improve air flow.

Correcting a nasal deformity usually consists of one or more of the following maneuvers:

- reducing the dorsum or hump
- triangulating the tip
- raising or lowering the tip
- thinning the tip
- increasing or decreasing projection of the tip
- correcting the deviated septum
- straightening or narrowing the bony pyramid

Having the technical skill needed to perform these maneuvers is only half the battle. The surgeon must also have an artist’s eye. It is the surgeon’s sense of form and beauty that guides him or her in deciding how far to go with each maneuver. This sense of form and beauty ultimately determines the end result: whether or not the nose ends up beautiful by itself and in harmony with the rest of the face. The plastic surgeon is either an artist or not.

When choosing a surgeon for your rhinoplasty, you should make sure the candidate you are considering is either board certified or eligible by either the American Board of Plastic Surgery or the American Board of Facial Plastic and Reconstructive Surgery, AND you should review some of his or her results. When it comes to the appearance of your nose and face, VISUAL RESULTS are what counts. Therefore, demand to see not one but several pairs of “before and after” photos of his or her patients. Great “before and after” photos won’t guarantee a good job on your nose, but it will indicate your candidate, at least, understands the standards of nasal aesthetics and is able to repeatedly

produce a result that incorporates them. If any surgeon is unable or unwilling to display good “before and afters,” you should seek another candidate.

A consultation by Dr. Perrotta is much more than an office visit, it is an extensive process. During the first visit, Dr. Perrotta obtains a thorough history of the presenting problem. He carefully examines the shape of the nose and the quality of its air flow. He and his staff take digital images and measurements of the patient’s nose. Dr. Perrotta performs morphing on those digital images in order to share, at a later visit or via email, different scenarios or possible results with the patient. This is how he makes certain he and the patient are “on the same page.” He uses the measurements to perform *dimensional analysis*, a system which ensures his personal judgments are consistent with established standards of nasal and facial aesthetics. Lastly, during the 2nd or 3rd office visit, he performs the pre-operative physical exam and finalizes the surgical plan.

We perform the majority of our rhinoplasties in the surgery-center, non-hospital setting. Patients undergo IV sedation and local anesthesia or general anesthesia. The procedure normally takes one to two and a half hours. Following surgery, we no longer use the uncomfortable nasal packing of the past. We now insert soft sponges that prevent bleeding at home. We generally remove these sponges on the day after surgery. If we utilize an external splint, it remains in place for 10 days. By the fifth day after surgery, the great majority of swelling has disappeared, however, bruising can last for up to three weeks.

Minor complications are uncommon, and major ones are rare. We are very blessed as we have a certified operating room attached to our office, so if any revisions are in order, we are able to provide them at little or no extra cost to the patient.

In some cases, health insurance companies cover part or all of the rhinoplasty. They usually cover the correction of a deviated septum or any abnormality that interferes with air flow. Occasionally they cover the correction of the external deformity if it resulted from trauma.

Here are a couple “before and after” images of some of Dr. Perrotta’s patients. These noses have not been digitally altered in any way.



This patient actually already had a rhinoplasty and a revision performed by a surgeon of another practice. She still was unhappy with the hump on the dorsum of her nose as well as the shape of the tip. Dr. Perrotta performed an open rhinoplasty (and a mini-face lift). After surgery, she said she felt more attractive than she ever did.



This patient was very self-conscious about the shape and size of her nose. She also felt it was too masculine. Dr. Perrotta enhanced her nose via an open rhinoplasty. She said she feels more beautiful and self confident than she ever has before.

You can review additional before and after photos at www.penplasticsurgery.com. We would be happy to put you in contact with one or more of our patients who have undergone this life-changing procedure.

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