

Aesthetic and Reconstructive Rhinoplasty

A Personal Perspective

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The nose defines the aesthetics of the face and is often the first facial characteristic that the eye catches. Its central location, protrusion from the facial plane and relationship to overall facial proportions makes it a major aesthetic landmark. In addition to its aesthetic role it has several important functions. These include air humidification, filtration and warming. Olfaction is dependent on air reaching the olfactory filaments which are located in the upper nasal vault. The paranasal sinuses drain into the nasal passages, and can be secondarily affected by alterations in nasal anatomy. The external nose is composed of paired nasal bones, upper and lower lateral cartilages which meet at the central septum. The nasal bones are attached to the maxilla creating the piriform aperture, the bony nasal inlet. The septum occupies the central pillar of the nasal pyramid, playing an important role in the support of external nasal structures as well as internal nasal physiology. The paired turbinates line the lateral internal nasal walls and help to regulate airflow, humidify

and filter the air. The nasal mucosa is lined with fine hairs which are important in filtration and mucous producing cells which lubricate the nasal passages and help to carry away the filtered materials.

Rhinoplasty, surgery of the external nose, can be divided into aesthetic and reconstructive procedures which often overlap. Reconstructive rhinoplasty may be required because of trauma, previous surgery, or congenital deformity. There is often a combination of aesthetic and functional goals that need to be considered and discussed between the surgeon and patient. In the initial patient encounter I document significant nasal history such as trauma, previous surgery and perform a detailed external and internal nasal examination. Nasal allergies, smoking history, use of topical or systemic medications, as well as overall physical health are documented. The patients are asked to do their own aesthetic analysis by dividing the nose into thirds and describing it on frontal and lateral view. This leads into a discussion of their goals and expectations followed by photographs. I recommend that my patients who want external nasal changes undergo computerized facial imaging prior to surgery. This allows the patient and surgeon to view the potential surgical results. These computerized images provide a guide or template which I refer to during surgery. The surgery is performed on an outpatient basis under general anesthesia. The procedure takes between one and two hours, depending on the amount of internal nasal surgery that is combined with the aesthetic procedure. Any functional component may be covered by health insurance while the aesthetic component is generally not eligible for coverage. Costs for aesthetic nasal surgery range from \$1500-\$5000, not including operating room and anesthesia charges.

The most common aesthetic nasal procedure is reductive rhinoplasty. The following is a brief synopsis

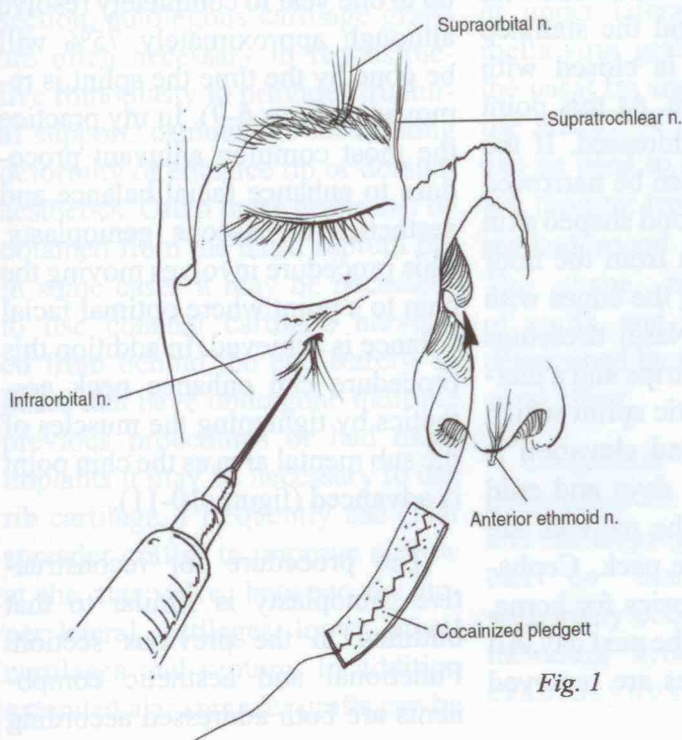


Fig. 1

