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ACHIEVING THE BALANCE IN RHINOPLASTY

Nazim Cerkes MD. Cosmed Plastic Surgery Center Istanbul-TURKEY

-Open approach provides unlimited access to ALAR CARTILAGES, SEPTUM AND NASAL DORSUM -Maximizes the control and predictability and minimizes the risks of a secondary operation

Best results in rhinoplasty are those in which the nose does not appear to have been "operated" upon, balanced between the parts and in harmony with other facial structures.

At the present time rhinoplasty is not a routine reduction procedure of the nose. It is rather a balancing procedure in which the reduction of some skeletal structures and augmentation of some deficient parts are performed together, for aesthetic and functional improvement.

For a predictible outcome stability of bony and cartilaginous skeleton is of upmost importance.

Overresections may lead to the loss of skeletal stability and may cause redraping problems of the skin envelope. Loss of skeletal stability due to agressive resections may lead to the functional and aesthetic deformities and problems related to skin redraping.



Balance Concept is first described by JACK SHEEN

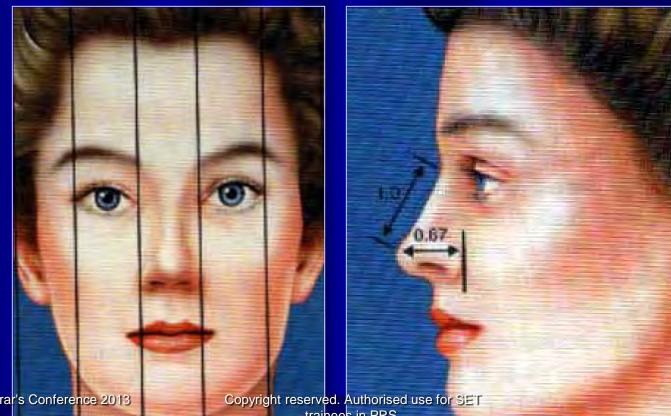
INITIAL CONSULTATION

COMPUTER IMAGING

- Computer imaging is helpful for the surgeon in the planning of the operation
- Computer analysis is useful to show the patient what changes are feasible in surgery
- Computer imaging helps to surgeon to understand the expectations of patient

PREOPERATIVE ANALYSIS

Systematic nasofacial analysis and accurate diagnosis of deformities is essential to establish the operative plan



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For a natural and good rhinoplasty outcome achieving the balance on frontal, lateral and basal views is necessary

ADJUSTMENT OF LATERAL VIEW

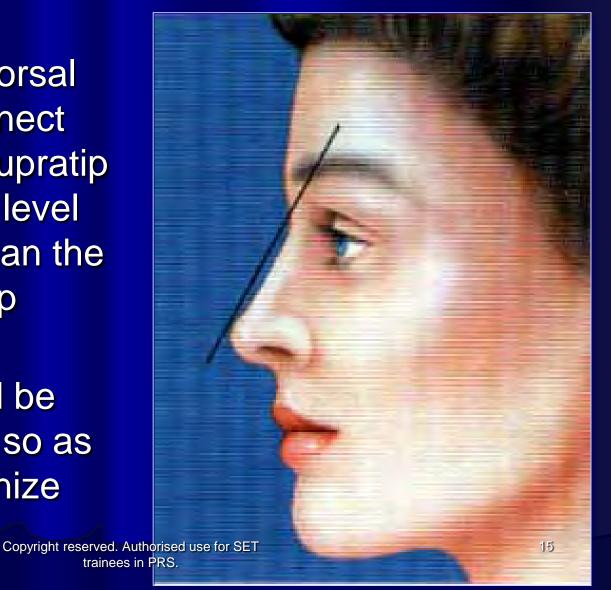
3 IMPORTANT DETERMINANTS OF LATERAL VIEW

Height of Nasal Dorsum
Nasal Tip Projection
Height of Radix

NASAL DORSUM

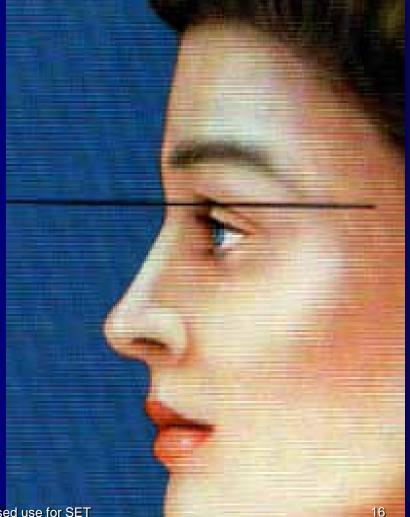
In women the dorsal line should connect the radix with supratip breakpoint at a level slightly lower than the point of nasal tip projection. In men it should be planned higher so as not to overfeminize

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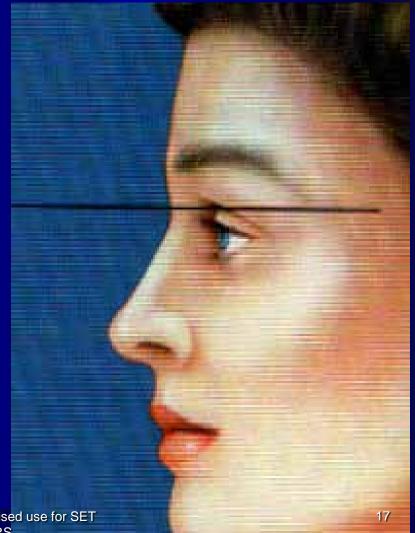
RADIX

Nasofrontal angle determines the character of the radix.Nasofrontal angle is ideally 134 degree. The height of the nasion should be approximately 15 mm. from medial cantus or 11 mm. from corneal ane. straf's Conference 2013



RADIX

Radix area and nasion are the set point for nasofacial and nasofrontal angles, and their consideration is critical when assessing dorsum/base disproportion.



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TRUE DORSAL HUMP



PSEUDOHUMP Due to Low Radix, Drooping Tip



PSEUDOHUMP Due to Underprojecting Nasal Tip



DORSAL HUMP+LOW RADIX+ UNDERPROJECTING NASAL TIP



RADIX AUGMENTATION

Radix augmentation is a balancing procedure to minimize hump reduction, thereby maintaining both dorsal height and a more natural nose. Radix augmentation reduces the need of the dorsal reduction.

GRAFT OPTIONS FOR RADIX AUGMENTATION

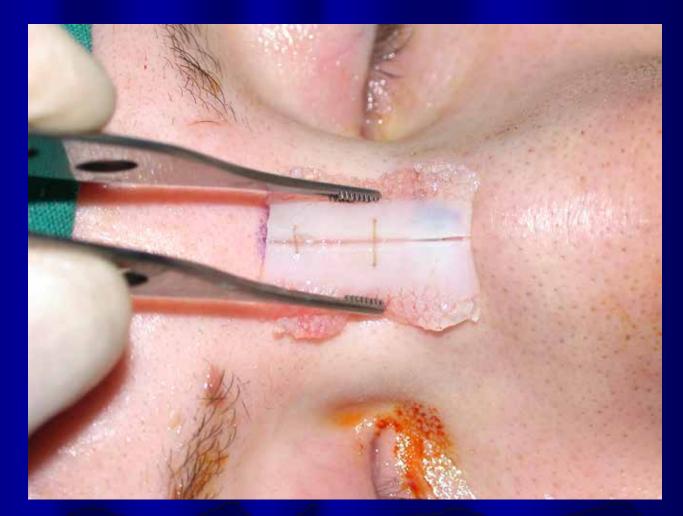
Cartilage

- -Septum
- -Cephalic trim remnants of alar cartilages

Fascia

- -Mastoid
- -Deep temporal
- Cartilage+FasciaFat

Cartilage Graft



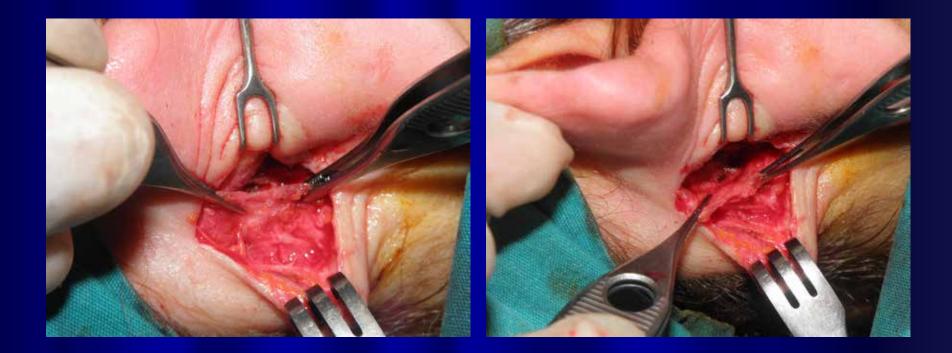
Cartilage Graft



Cartilage Graft



Mastoif Fascia



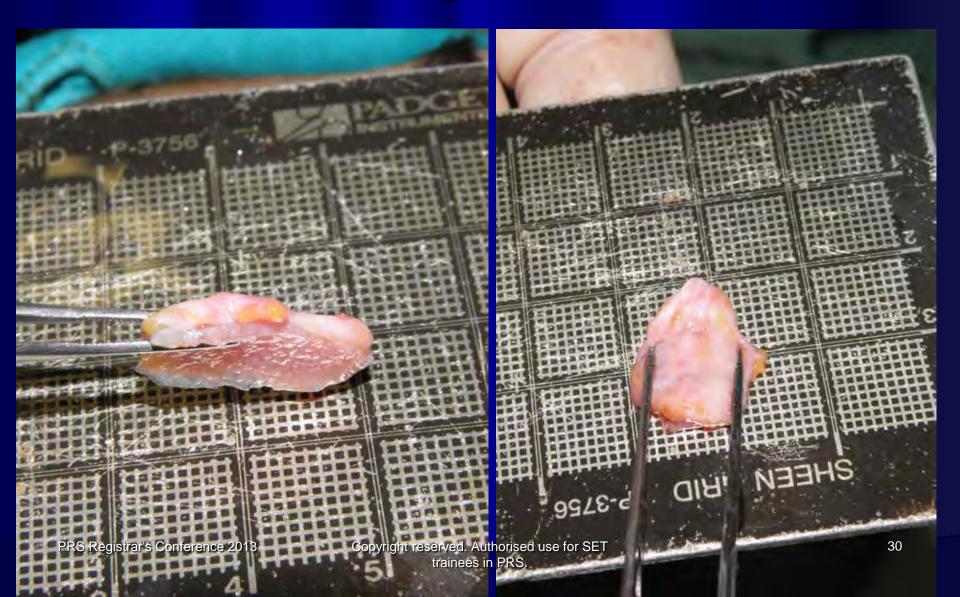
Fascia (Mastoid)

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Mastoid Fascia



Cartilage+Fascia



Cartilage+Fascia

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Double Layer Graft (the graft on top is larger)

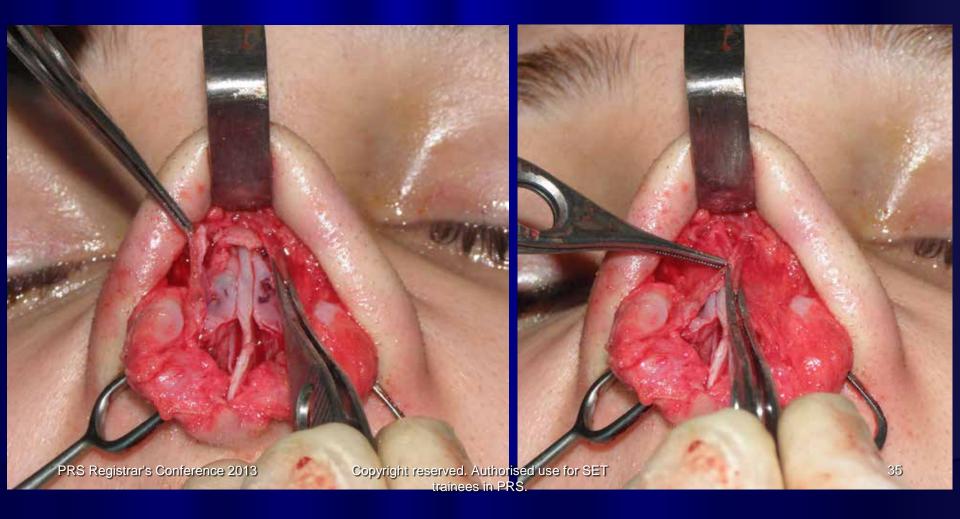


Placement of Radix Graft

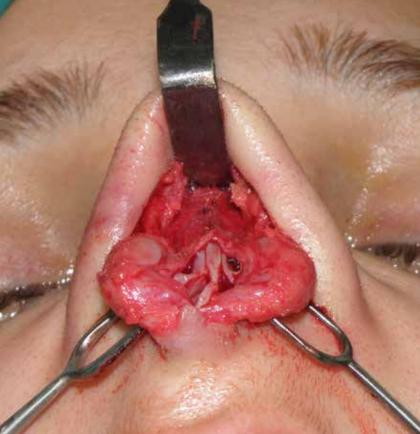


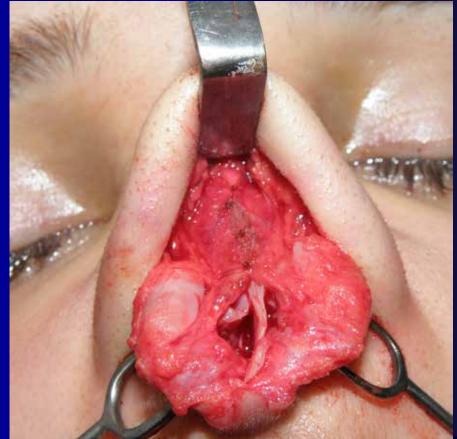


Placement of Radix Graft Under the Periosteum



Stabilization of Radix Graft with Suturing of Perichondro-Periosteal Flaps





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Radix graft for less dorsum reduction





2 layers of radix graft

Minimal dorsum reduction

Cephalic rese ion of lateral cr

Columellar strut

Alar base

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WIDENING AND AUGMENTING OF RADIX



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Radix augmentation Onlay grafts to side walls 2 mm dorsal reduction Low to high osteotomies

Autospreader

Septal extansion graft

Cephalic trim

/ Lat. crural span. suture

Domal mattress suture

Alar base resection

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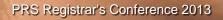






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RADIX REDUCTION



Bony and cartilaginous reduction

Radix reduction ULC spreader flap Median and low to low osteotomies

Cephalic trim

Columellar strut Transdomal

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INCREASING TIP PROJECTION

INCREASING METHODS OF TIP PROJECTION

- 1. Suture Techniques (Transdomal,Interdomal,Lateral Crural Spanning,etc)
- 2. Strong columellar strut and advancement of medial crura with sutures on columellar strut using open approach
- 3. Tongue and groove suture technique
- 4. Stabilization of medial crura to septal extansion graft
- 5. Advancing the lateral crura medially with horizontal mattress sutures and columellar strut or septal extansion graft)

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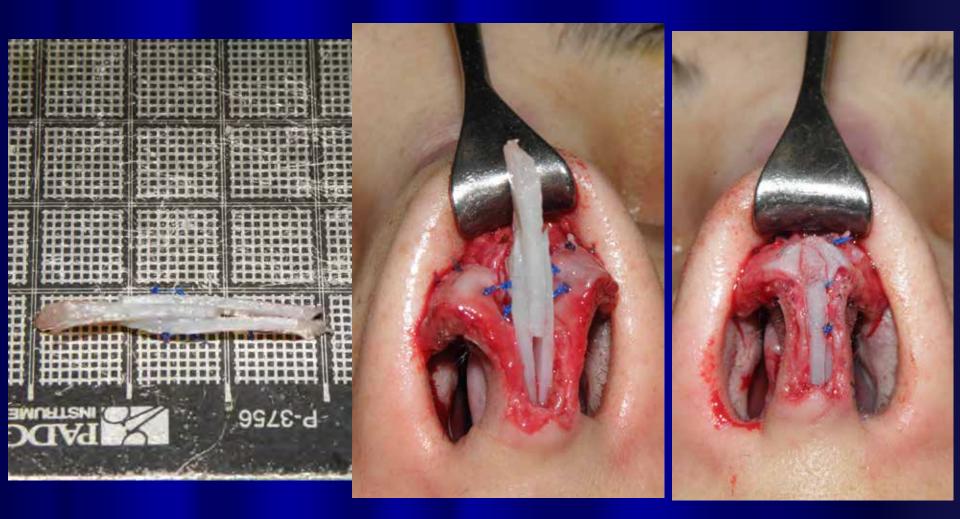
COLUMELLAR STRUT

- Supporting and stabilizing the nasal tip
- Controlling shape and profile configuration of medial crura, and maintaining projection and rotation of tip complex
- Changing columella-lobule angle (Bending medial crura to the desired angle and fix them in that position)
- Controlling the length of the medial or middle crural segments
- Increasing tip projection (with advancing medial crura on the strut)
- Correcting intercrural deformities or asymmetries of medial crura

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COLUMELLAR STRUT (Advancement of medial crura with sutures on a long columellar strut)



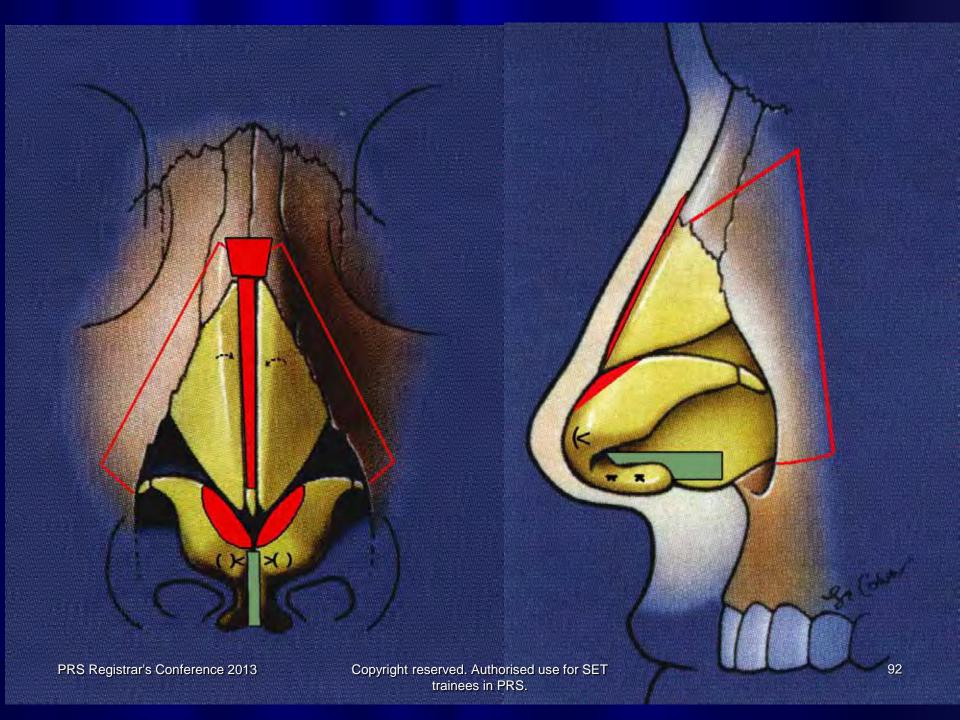




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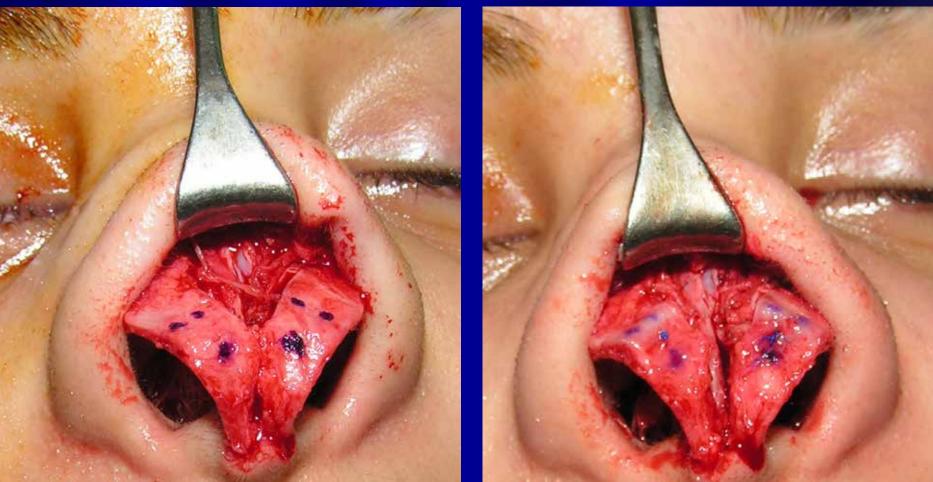
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LATERAL CRURAL STEAL Advancing Lateral Crura Medially with Sutures



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LATERAL CRURAL STEAL

- Lengthens the middle crura
- Shortens the lateral crura
- Increases tip projection
- Rotates the nasal tip upward
- Narrows nasal tip
- Changes columella-lobule angle

LATERAL CRURAL STEAL

To increase tip projection usually combined with a columellar strut or a septal extension graft



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Medial oblique osteotomy with outfracture right side only

Superiorly extended spreader graft right side only

Cephalic trim

Septal extansion /graft

Lat. crural spanning suture

Domal mattress suture

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Tracella

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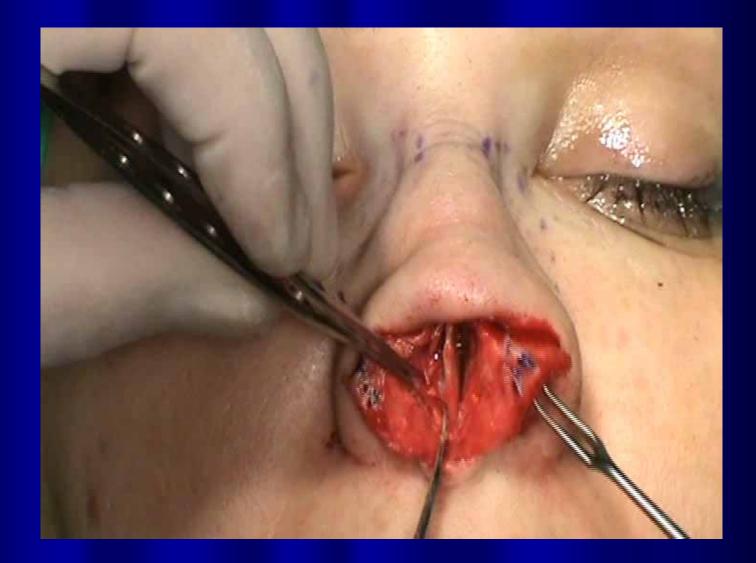


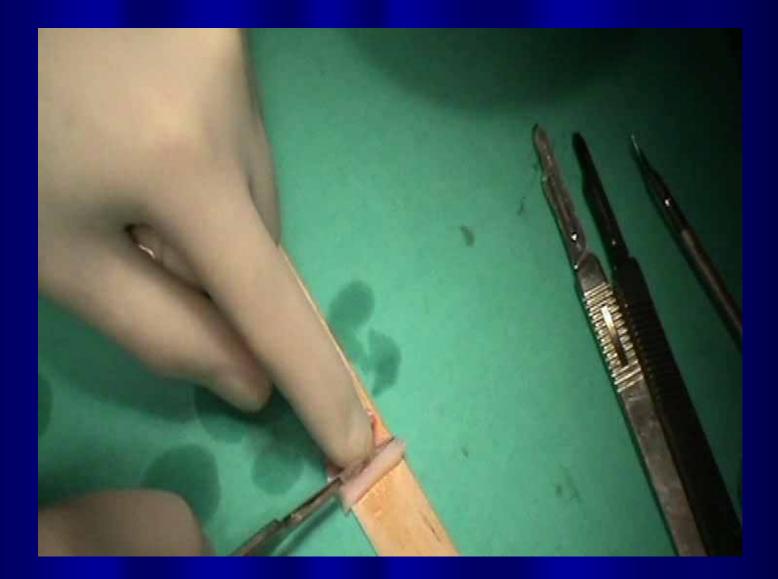


TONGUE IN GROOVE SUTURE TECHNIQUE









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SEPTAL EXTENSION GRAFT





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Badix graft

2-3 mm dorsum reduction

Spreader graft

Suture fixation of medial crura to septal extension graft

Cephalic trim

Interdomal suture

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TIP GRAFTING TO INCREASE TIP PROJECTION

ONLAY TIP GRAFT



ONLAY TIP GRAFT



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ONLAY TIP GRAFT



SHIELD TYPE TIP GRAFT

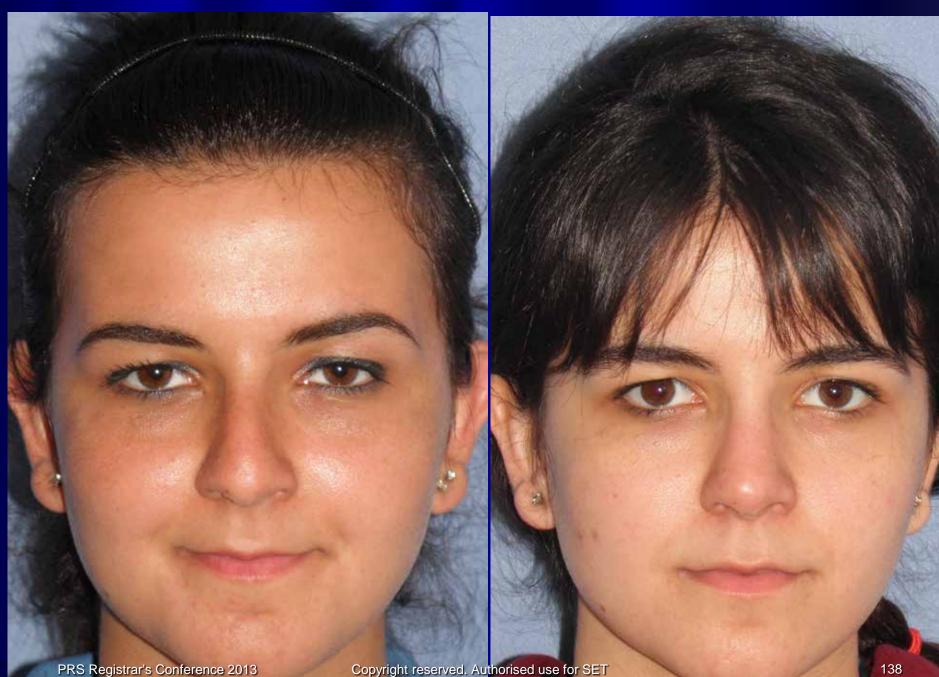


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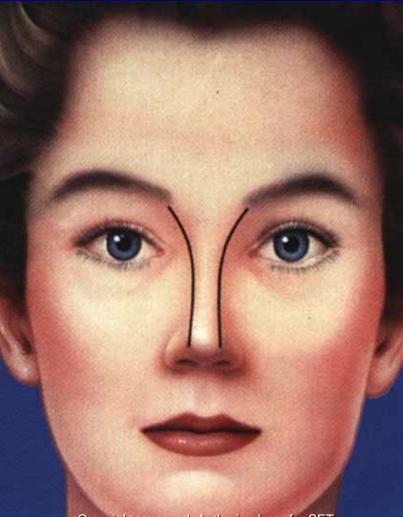


ACHIEVING THE NATURAL FRONTAL VIEW

"Creating an aesthetically pleasing nasal dorsum and anterior appearance is essential to achieve an optimal rhinoplasty outcome..."



DORSAL AESTHETIC LINES



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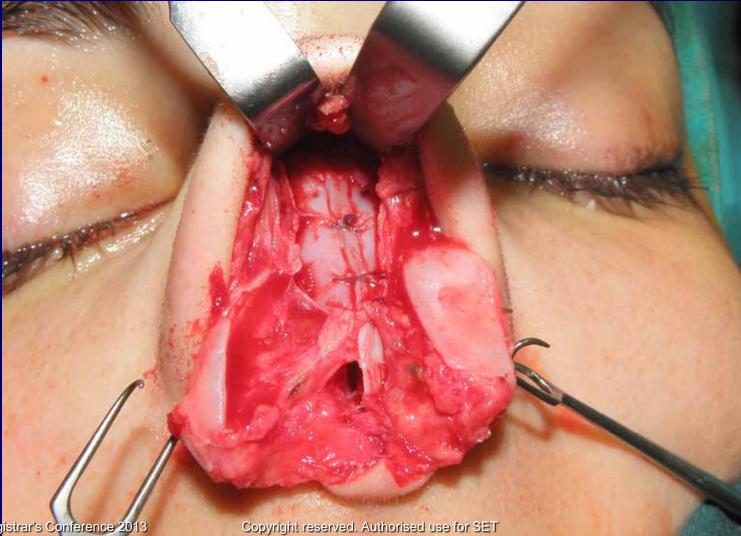
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Restoration Methods of Dorsal Aesthetic Lines Upper lateral cartilage preservation (Spreader flap) Spreader grafts Dorsal onlay graft



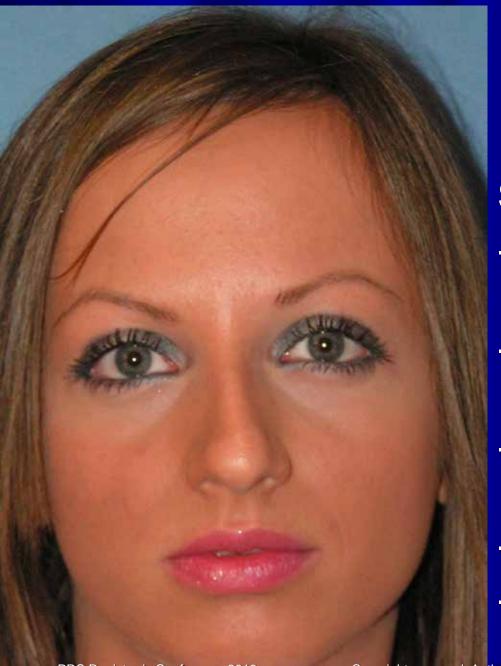
SPREADER FLAPS



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SURGICAL PLAN

- -3 mm.bony hump reduction
- -4 mm.cartilaginous hump reduction
- -2 mm.caudal septal resection
- Spreader flapsTip refinement sutures

SPREADER GRAFTS



SPREADER GRAFTS

- Refinement of dorsal aesthetic lines
- Correction of dorsal deviation
 Correction of internal nasal valve collapse

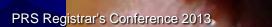
DIFFERENT APPLICATIONS OF SPREADER GRAFTS

- Unilateral Spreader Graft
- Asymmetric Spreader Graft
- Multilayer Spreader Graft
- Spreader Graft as Septal Extansion Graft
- Spreader Graft for Raising the Dorsum

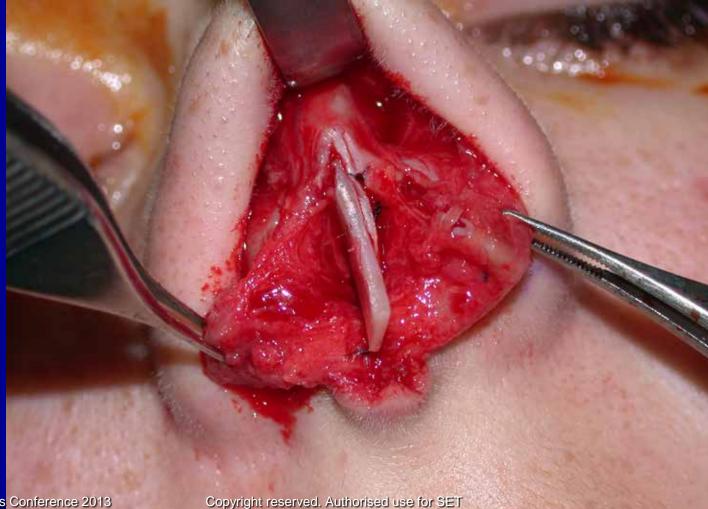
UNILATERAL SPREADER GRAFT

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ASYMMETRIC SPREADER GRAFTS



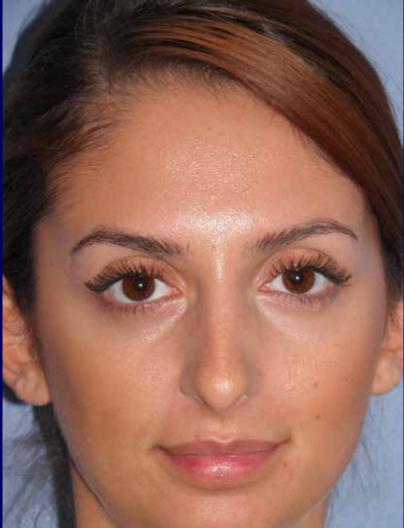
SPREADER AS SEPTAL EXTANSION GRAFT



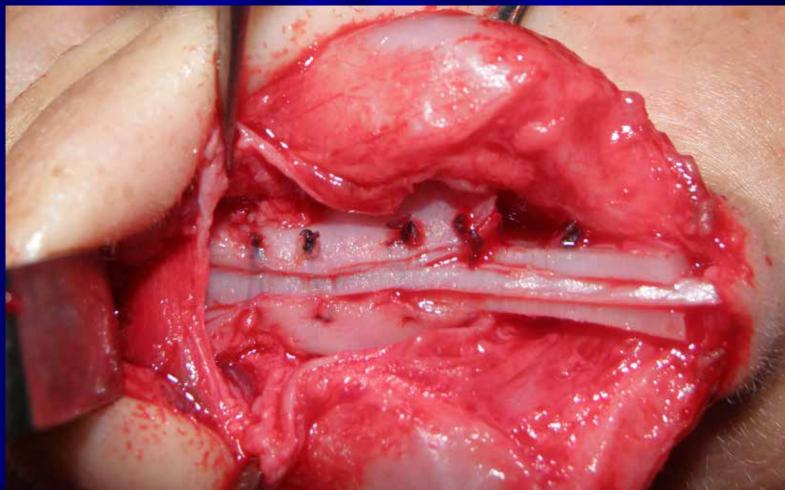
MULTILAYER SPREADER



Refinement of Dorsal Aesthetic Lines







CORRECTION OF SPESIFIC PROBLEMS ON THE FRONTAL VIEW

WIDENING OF NASAL DORSUM

NARROW UPPER AND MIDDLE VAULT BROAD TIP

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Asymmetric dorsal aesthetic lines Low and narrow radix Dorsal hump High septal deviation Narrow middle vault internal valve collapse **Boxy** tip **Cephalic** orientation of lateral crura

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Radix augmentation Medial obl. osteotomies with out fracture 1-2 mm dorsal reduction High septal scoring Extended preader grafts thicker on right

Cephalic trim

Modified lateral crural strut graft

tnterdomal suture

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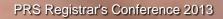


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WIDENING OF MIDDLE VAULT

NARROW MIDDLE VAULT WIDE TIP

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Narrow aesthetic lines on the middle vault

Wide radix

Dorsal hump

Wide nasal tip

Long nose

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2-3 mm dorsum reduction Low to high osteotomies Spreader grafts thicker cephalicly

1-2 mm caudal septal resection

Suture fixation of medial crura to septum

Cephalic trim

Domal mattress suture

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NARROW MIDDLE VAULT WIDE TIP IRREGULER DORSAL AESTHETIC LINES

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Asymmetric dorsal aesthetic lines

Narrow middle vault

Wide nasal tip

Supraalar notching

Dorsal hump

Plunging tip

2 mm dorsal reduction Median oblique and low to low osteotomie

Autospreaders

Spreaders

Modified lat. crural strut graft Cephalic trim Columellar strut Transdomal suture Interdomal suture

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NARROW MIDDLE VAULT AND NARROW TIP



Cas Mad

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Relatively wide radix

Dorsal hump Narrow middle vault internal valve collapse

Low nasolabial angle Plunging tip

> Narrow tip and nostrils

Caudal septal deviation

Long nose

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4 mm dorsum reduction Low to high lateral osteotomies

Spreader grafts thicker caudally

Alar spreader graft

Columella strut

Caudal septal resection

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NARROWING OF NASAL DORSUM

BROAD BONY VAULT BROAD TIP



One layer radix graft Medial oblique osteotomies

Low to low lateral osteotomies

Minimal cartilaginous hump resection

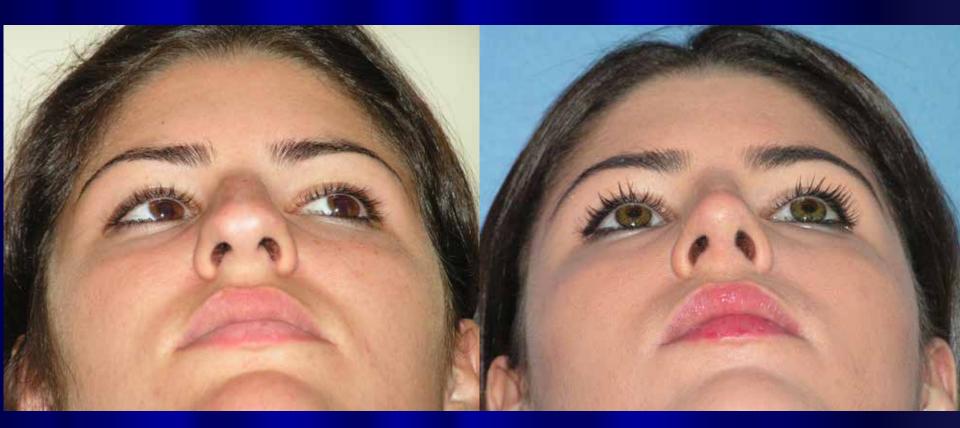
Cephalic trim

Transdomal sutures

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BROAD BONY VAULT



Wide bony pyramid

Wide dorsal aesthetic lines

Minimally broad tip

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Medial oblique osteotomies

Low to low external lateral osteotomies

Transdomal sutures

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