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PLASTIC SURGEON

YOUR GUIDE TO **RHINOPLASTY**:
FROM CONSULTATION TO RECOVERY



Rhinoplasty, or nose reshaping is one of the most common of all plastic surgery procedures.

Many people are unhappy with the size and/or shape of their nose. The nose is central to facial balance and many people opt for surgical nose reshaping, or rhinoplasty, in an effort to find a more harmonious alignment of their features. Sometimes the problem can be more to do with the position of the chin or jaw, but patients tend to focus their dissatisfaction on the nose. While surgical techniques are advanced, there are limitations as to how much the nose can be altered. Outcomes depend on the size of the nose, the condition of the skin and the age of the patient. The most important thing is that there is clear communication between a patient and a surgeon about what is wanted and what is achievable. Patients should also bear in mind that surgery alone will not solve any emotional or social problems they may attribute to their nose or to their appearance.

Cosmetic reasons

Most people who dislike their nose have concerns about the bridge or the tip. At the bridge, or dorsum, people often complain about having a hump.

Meanwhile, people who want to change the tip often see this part of the nose as being too wide, round or lacking in definition.

Medical reasons

Other patients may opt for a rhinoplasty because of an injury to the nose, whereby the nose may be broken or bent following an accident of some kind. Others may have functional breathing problems relating to the nasal airways. In these cases, surgical interventions would be considered reconstructive, whereas for the majority of nose operations the surgery is classed as cosmetic.

Nose operations are most commonly carried out to:

- alter the hump at the bridge of the nose
- reshape the tip of the nose
- alter the length of the nose
- alter the width of the nose
- alter the width of the nostrils
- restructure and reposition the nose after an injury
- open up the nasal airways to help breathing



A nose reshaping operation is either performed from inside the nostrils - this is referred to as a closed rhinoplasty; or else by making a small cut on the nose and elevating the skin - known as an open rhinoplasty. The precise nature of the operation will vary depending on the area of the nose that is being treated.

Bridge (or dorsum)

If the bridge of the nose is being operated on, the surgeon removes the bone and cartilage that is causing 'the hump'. The nose may then be broken to allow the remaining pieces of bone to be moved closer together, resulting in the narrowing of the nose.

Tip

When the tip of the nose is operated on, the cartilage that makes up the tip-support needs to be partly removed or reshaped. This is done through the nostril, or by making a small cut in the bit between the nostrils (known as the columella) in an open rhinoplasty.

Length

A surgeon can adjust and reduce the central structure of the nose, known as the septum, to help shrink the tip and reduce the overall length of the nose. Adjustment to the tip cartilages also helps adjust nasal length.

Width

By breaking and repositioning the side nasal bone, a surgeon can also reduce the width of the nose and achieve a narrower appearance.

Additional rhinoplasty

Surgeons can also add to the nose using cartilage grafts from the septum or, occasionally, silicone implants, in what is called an additional rhinoplasty. This type of operation is used to build up a 'flat' bridge or tip.

The above techniques can also be used to straighten and refine a nose that has been broken through injury, and to relieve breathing difficulties.

Consultation

During your rhinoplasty consultation be prepared to discuss:

- Your surgical goals, with regard to both appearance and breathing
- Medical conditions, drug allergies and previous medical treatments
- Current medications, vitamins, herbal supplements, alcohol, tobacco and drug use
- Previous surgeries

Your rhinoplasty surgeon may also:

- Evaluate your general health status and any pre-existing health conditions or risk factors
- The options available to you for nose reshaping
- Examine and measure your face
- Take photographs
- Discuss your nose surgery options
- Recommend a course of treatment
- Discuss likely outcomes of a nose surgery and any risks or potential complications



Procedure

Rhinoplasty reshapes the nose by reducing or increasing the size, removing or reshaping a hump, changing the shape of the tip or bridge, narrowing the span of the nostrils, or changing the angle between the nose and upper lip. This procedure may also relieve some breathing difficulties when combined with surgery performed on the nasal septum.

Procedure Length

Surgery takes approximately 2 hours or more. In most cases general anaesthesia is used.

Inpatient/Outpatient

This is usually an inpatient operation with one night stay at the hospital however in special cases can be done as a day case.

Possible Side Effects

Temporary swelling, bruising around the eyes and/or nose, and some bleeding and nasal stuffiness may happen. Since using Piezo ultra-surgery the incidences of bruising has substantially become less common.

Rhinoplasty Surgery Risks

- Anesthesia risks
- Infection
- Poor wound healing or scarring
- Temporary change in skin sensation of tip of the nose (numbness or tenderness)
- Nasal septal perforation is rare. Additional surgical treatment may be necessary to repair the septum

but it may be impossible to correct this complication

- Difficulty breathing
- Unsatisfactory nasal appearance
- Skin discoloration and swelling
- Possibility of revisional surgery

Recovery

Typically patients will have a splint over their nose and some sutures under their nose which will be removed in their follow up appointment about 7-10 days after the operation. After tapes will be applied to the nose for a further 2-3 weeks. The patient may go back to work after one week. Activities that are more strenuous may be resumed after two to three weeks. The patient should avoid any activity that could impact on the nose or allow it to become sunburned for at least eight weeks. The use of a sunblock that provides both UVA and UVB protection is useful. The final results may take one year and sometimes longer to achieve.



Dr. Sajjadi is a fellow of The European Board of Plastic, Reconstructive and Aesthetic Surgery (EBOPRAS) and a Member of the Royal College of Surgeons in Ireland (MRCSE).

Dr. Sajjadi's practice goals are to provide compassionate, detailed care for his patients and delicate surgery. He believes that 'beauty is a pleasant blend of harmony and contrast' and based on this concept he aims to create the most natural appearance rather than an artificial look.

Dr. Sajjadi graduated in 1999 as a doctor in general medicine at the University of Pecs in Hungary. Following this he trained in general surgery at the Department of Surgery of The University of Pecs in Hungary and The Royal College of Surgeons in Dublin, Ireland. He was awarded specialist status in general surgery in Hungary and membership of the Royal College of Surgeons in Ireland in 2004 and 2005 respectively.

After completing his training in plastic surgery in 2008, he was awarded the specialist qualification in Plastic, Reconstructive and Aesthetic Surgery from the National Board of Qualifications in Hungary. He then spent 6 months as a fellow of the Dutch Association of Facial Plastic, Reconstructive and Aesthetic Surgery (DAFPRAS) in the Netherlands and Belgium. He has been trained in cosmetic surgery by well known cosmetic plastic surgeons such as Jerome Stevens, Alexis Verpale and Patrick Tonnard in Holland and Belgium. He has also

worked in London for 8 months in St George's University Hospital focusing on reconstructive facial surgery and skin cancer.

Dr. Sajjadi's prime interests are facial aesthetic surgery and rejuvenation, facial fat transfer, injectables, fillers, brow lift, short scar MACS facelift, rhinoplasty, facial reconstructive surgery, breast reconstructive and aesthetic surgery, breast implants, mastopexy, breast reduction, breast lipofilling, gynecomastia, body contouring after massive weight loss, upper and lower body lifts, liposuction and liposculpture, abdominoplasty, hernia repair and female genital and perineal reconstructions.

Dr. Sajjadi attends numerous conferences and workshops both nationally and internationally thus remaining up to date with evolving trends in aesthetic surgery. He is an international speaker in rhinoplasty.



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