

Throughout history and across cultures, noses have incited derision or admiration as the case may be. Think of the hooked nose character of Cyrano de Bergerac in Edmond Rostand's famous play that was said to have fought 1000 duels over insults concerning his enormous nose. Decidedly the most prominent facial feature, altering its size and shape can have a tremendous impact on one's appearance. So it's no surprise that according to the American Society of Plastic Surgeons, Rhinoplasty was the second most popular procedure performed in 2010, behind only breast augmentation? Saadiya **Ahmad** investigates the art of perfecting a nose.



TO START

Rhinoplasty, defines Dr. Qassim Ahli, Consultant Plastic Surgeon at Dermalase Clinic is reshaping of the nose, either aesthetically as requested by the patient for reconstructive purposes after trauma or a birth defect of the nose. Consultation before rhinoplasty is paramount, suggests Dr. Hervé Raspaldo, board certified Consultant Facial Plastic Surgeon in Dubai's Aesthetica Clinic and Nice University Hospital. He elaborates: "In a rhinoplasty consultation, I welcome the patient in an atmosphere of trust and listen to them, so they can explain their trouble and express their desires. I then analyse the face, palpate the soft tissue and architecture of the nose to better understand the anatomy and the problems to correct. I examine into the nostrils with a video-camera known as an endoscope to analyse the airway, septum deviation, mucosa, physiology. Next we take photos to measure, compare and propose a digital morphing top sequence of the consultation because it helps to illustrate the project I have in mind, to understand what is in the patient's mind, to draw the final project together and agree for the possible future result." Furthermore, shaping any body structure, points out Dr. Firas A. Hamdan, double board certified Cosmetic Surgeon is usually not recommended until the full growth for that organ has been completed. "Therefore it is recommended that rhinoplasty is not performed until the age of 16 years and preferably not until the age of 18 for legal consent issues," he notes, except in conditions of trauma or severe deformities but is the exception rather than the norm.

RHINOPLASTY

Dr. Ahli explains that rhinoplasty is usually performed under light sleep anaesthesia or using general anaesthesia. "The patient usually arrives early in the morning and goes home the same day or day after."

TECHNIQUE

Depending on the surgery, the surgeon may operate using incisions inside the nostrils which is known as 'closed Rhinoplasty' or just under the nose which is known as 'open Rhinoplasty.' The procedure may involve reshaping cartilage

in the nose or breaking the bones of the bridge of the nose and reshaping them. "A splint or cast is applied and will be worn for approximately seven days,"

he elaborates. After cast removal, the new shape will be immediately visible however the definitive result requires 6 to 12 months.

RISKS infection, bruising, scars, asymmetrical nose shape, breathing difficulty after operation, bleeding after operation and/or sensation loss for two to three months

PRICE between Dhs15,000 to Dhs21,000

TIME Depends on type of procedure, between 30 minutes to two hours

PAIN FACTOR Pain is minimal and can be controlled by pain killers. Downtime will take between three to five days for face swelling, 10 days for bruises.

RESULTS there will be bruises and swelling of the nose and face for approximately 10 days and final result is visible after six months to one year.





RHINOPLASTY-BIO®

INTERNAL RHINOPLASTY TECHNIQUE

Dr. Raspaldo uses only the internal approach of rhinoplasty with no visible scars (except for nostrils, or hare-lips nose or very severe damaged secondary noses). "I reduce or remodel the small cartilages and bones of the nose through tiny intra-nasal incisions of approximately two centimetres with closure using reabsorbable biologic threads so there is no need to remove them," he explains. "Eighty percent of the cases are under general anaesthesia; in some cases of tip remodelling or limited touch-up we can use local anaesthesia and sedation." He suggests that when considering Rhinoplasty, it is vital to ask to an experienced doctor who knows the anatomy of the nose and who has an artistic. An "ideal candidate is any patient who is not satisfied with his nose and with justified and acceptable demand and expectations." With regards to corrective rhinoplasty where the patient has had a previously dissatisfying rhinoplasty from another doctor, Dr. Raspaldo explains that it is more difficult because the tissues are somewhat damaged. "However I like it; it is a great challenge to give back an attractive and natural nose to those patients," he remarks.

In the case of a small defect, he prefers to use Rhinoplasty using injectables such as Botox® combined with hyaluronic acids such as Juvéderm®, Voluma®, Restylane®, or Teosyal. "This actually represents 10 percent of my rhinoplasty cases," he says as it is a first step into the procedure and especially good for patients who are afraid.

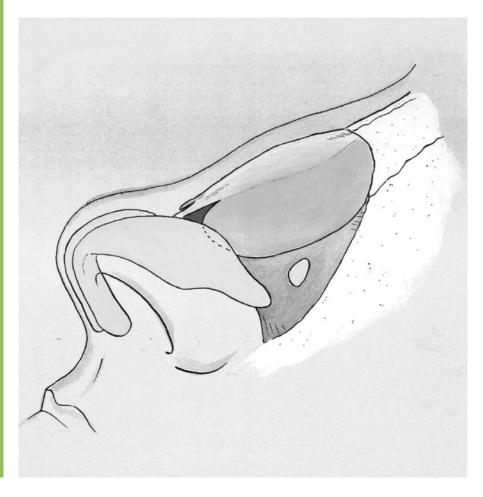
RISKS Very few: bleeding, hematoma and rarely infection as each individual must take antibiotics. A blood test and a visit with the anaesthesiologist is conducted prior to any surgery for safety.

PRICE Available on request

TIME 35 minutes up to two and a half
hours

PAIN FACTOR Recovery time is highly individualised, but most patients feel well enough to resume many normal activities and return to work or school in one to two weeks.

RESULTS Although you'll be able to notice improvement in the shape of your nose right away, you won't see the final results for up to twelve months.





NON-SURGICAL RHINOPLASTY

Some minor flaws actually don't require surgery and can be corrected quickly. Dr. Maria Angelo-Khattar, Managing Director of Aesthetica Clinic explains that Rhinomodulation is the term currently used to describe non-surgical improvement in the shape of the nose using a combination of filler injections and Botox. "The procedure is not for everyone and cannot shrink a large nose," she explains and is mainly used in cases where there is a small imperfection, for example, to make a crooked nose look straighter or to correct contour irregularities from post surgical rhinoplasty. It can, however, be used to make a bumpy nose look better by straightening the profile or raising a droopy tip, anyone with a mild bump or a drooping nose. "Correcting such imperfections often makes the nose look more symmetrical and in harmony with the rest of the face," she suggests, pointing out, "However an individual who is not a good candidate for this procedure is someone with a large nose or very wide nostrils." The main advantage of non-surgical nasal correction is that it is easily reversible and requires barely 15 minutes however bear in mind the results are not permanent and the procedure may have to be repeated every few months." Hyaluronic acid fillers are commonly used due to the fact that they are easily reversible. "The use of the biostimulating filler, Calcium hydroxylapetite, has also gained popularity in non-surgical rhinoplasty," she observes.

TECHNIQUE

The nose is numbed with a topical anaesthetic cream. "A filler may be injected to fill out depressions on the bridge of the nose or slightly raise the tip," suggests Dr. Angelo-Khattar while Botox may be used to relax a muscle known as the dilator naris that normally dilates the nostrils, hence giving the nostrils a more refined shape. Furthermore Botox, she adds, may be injected into the *Depressor Septi Nasi* muscle which typically pulls down the tip of the nose which will help to raise the tip.

RISKS The nose is a highly vascular area and it is paramount not to occlude any of the blood vessels, which may lead to skin necrosis.

PRICE from Dhs1500 onwards

TIME An office based procedure which takes approximately 15 minutes; depending on the filler may need to be repeated every six months to one year.

PAIN FACTOR Very relative and it depends on the patient

RESULTS Typically no downtime; there may be slight swelling and minor bruising.

CULTURAL PERSPECTIVES

The ideal nose has changed over the decades, points out Dr. Hamdan. "In the early 70s and 80s there was the attempt to have a very thin and pointy

nose with a definite slope, hence the name 'Goldman's tip' named after Dr. Goldman," he says while today, the attempt is to be as conservative as possible because the nose as a structure changes with time and over resection of cartilage can only lead to altering of the shape and may be function 10, 20 or even 30 years later. Today there is a wide range of variations in the perceptions of rhinoplasty both culturally as well as regionally, stresses Dr. Hamdan. "In the Middle East people tend to have a thicker oily skin, and the western culture and movies icons are usually fair light skinned individuals with thin skin," he explains and as such this provides the first challenge in rhinoplasty in how thin a surgeon can make a nose and the limitations they face when the skin is thick, or oily or both. In addition, the variations are also tremendous from one country to another in the Middle East. He illustrates: "I feel the Kuwaitis in Kuwait prefer to have a nose as small as possible, where as in Saudi and UAE the main interest is to have an acceptable shape. In Lebanon and Syria the trend is also toward smaller size noses." Another major issue in trend setting is when a patient asks for his or her nose to be shaped after a celebrity. Here, he says, the role of the doctor becomes crucial to identify if this patient has an obsession or a fetish or just has reasonable wishes and expectations.

Celebrity Ideals

Nowadays, Dr. Hamdan says there are variable demands depending on region but for a female it is not unusual to be asked for a Haifa nose or a Nancy nose, compared to men ask for a Brad Pitt or Antonio Bandero nose, or they have a cutout of a magazine that shows a male or a female model. "Repeating nose surgery is another hot topic for debate both among surgeons or even patients; whether the patient is mine or not, my rule of thumb that is I will not offer any redo within less than nine months of the previous operations because the healing has not completed and final shape is still in the making," he suggests however the exception to the rule is a major deformity or if the function is compromised (breathing or bleeding). "If nine months has passed and the patient wants some additional minor changes that may improve their satisfaction rate, then I may consider a minor touch up, but if I believe the nose is alright and the patient is seeking a major change that I can't achieve aesthetically or functionally then I will turn them away," he says. "As a surgeon I hope and expect that I perform rhinoplasty only once with the chances of minor touch up in the future and also because every time the nose is opened, the healing phase will be long and more unpredictable. " Also there may come a point where multiple operated noses become very hard like cement from the extent of fibrotic non-viable tissue and operating in those conditions increases the risks of skin necrosis and major deformities.

Expert Profile



Dr. Hervé Raspaldo is a board certified Consultant Facial Plastic Surgeon in Dubai's Aesthetica Clinic and Nice University Hospital (France) with over 25 years of experience in conducting aesthetic and reconstructive facial plastic surgery.



Dr. Maria Angelo-Khattar is an anti-ageing expert and a member of the *American Academy* of *Anti-Aging Medicine*. She is specialised in scientific skin care and research for evidence-based preparations that have rejuvenating and refining effects on the skin.



Dr. Qassim Ahli, Consultant Plastic Surgeon at Dubai's *Dermalase Clinic* is also Head of the Plastic Surgery Unit in *Sheikh Rashid Hospital*. A board certified medical doctor, he has over 12 years of experience in conducting aesthetic and reconstructive plastic surgery.



Dr. Firas A. Hamdan, double board certified Cosmetic Surgeon at Cosmetic Surgery Clinic. He received his medical degree from American University of Beirut and is also a founding Member of the World Academy of Cosmetic Surgery.

MICHELANGELO

Italian artist, 1475-1564

His nose was so squashed against his face that, in the words of one historian, "his forehead almost overhangs the nose." As a boy, Michelangelo had mercilessly teased the painter Pietro Torrigiano while Torrigiano

was trying to study some art inside a church. Angered, Torrigiano turned on young Michelangelo and, in his own words, "dealt him such a blow on the nose that I felt the bone and the cartilage yield under my fist as if they had been made of crisp wafer. And so he'll go with my mark on him to his dying day."

Prominent Schnozzles throughout history

MATTHEW PARKER

English clergyman, 1504-1575

His name entered the English language as 'Nosey' Parker, meaning someone who pokes his nose into other people's business. Parker was Archbishop of Canterbury under Queen Elizabeth I. Though

shy and modest, he was over-inquisitive about church matters, and his enemies began to call him 'Nosey' Parker.

THOMAS WEDDERS

English circus freak, 1700s

He had the longest known nose of any human being in history. It measured 7 1/2 in. in length. He was exhibited throughout England and was said to be mentally retarded.