

PAUL HARRIS

PLASTIC SURGEON

www.paulharrisplasticsurgeon.co.uk

Rhinoplasty Information Sheet

This information sheet is a general guide for patients undergoing rhinoplasty (nose reshaping) under the care of Paul Harris. It should provide the answers to some questions that you may have. There are many additional factors that can have an effect upon your individual operation, your recovery and the long-term result. Some of these factors include your overall health, previous nasal and facial surgery, any bleeding tendencies that you have and your healing capabilities, some of which will be affected by smoking, alcohol and various medications. Such issues that are specific to you need to be discussed with Mr Harris and are not covered here. Please feel free to ask him any further questions before you sign the consent form.

Introduction

Changing the shape or reducing the size of the nose (rhinoplasty) is a common operation and was one of the first cosmetic procedures performed at the turn of the century. Many of the early surgeons were European. Nowadays an experienced plastic surgeon should be able to produce predictable results. It is, however, extremely delicate surgery where millimetres count and nowhere more is the surgeon's skill put to the test nor are the results more obvious.

The aim of a good rhinoplasty is to provide a harmoniously shaped nose with regard to the other features of the face, with an un-operated look, which does not draw attention to itself. It should be undertaken in such a way that there are minimal complications and time off work.

At the first consultation you will be asked what exactly you feel is wrong. Your face will be evaluated to see if it is symmetrical and to see if the nose is in proportion to the rest of your features. Sometimes the chin is too long or too small compared with the nose and you may be advised if it should be altered. The shape of the nose will also be assessed, looking at the upper bony part, the central cartilage part and the lower nasal tip. The inside of the nose will be examined to look at the septum, which is often bent, and to assess if the airway is clear.

Photographs may also be taken for further analysis by Mr Harris. He may also undertake 3D photography which can be reviewed immediately. This allows simulation or 'morphing' analysis of the changes that are needed to achieve the desired nasal shape. Morphing can be useful to discuss with you the practicalities of what can, and cannot, be sensibly achieved. However, the computer image is not, and can never be, an exact picture of how your nose will be, as unfortunately scarring and the thickness of the skin of the nose will ultimately decide how things turn out. It is important to therefore recognise that this technique, whilst being extremely useful for communication, can give a false prediction and mislead some patients.

What will happen before the operation?

If you are unwell before the operation, please call Mr Harris' secretary (Tel: 0207 927 6520) as the date of surgery may need to be postponed. No aspirin or medication containing aspirin should be taken for ten days before surgery. If you smoke you should cut down for one week before surgery and stop smoking completely three days before surgery to reduce the likelihood of post-operative complications. The operation is performed under general anaesthetic as a day-case procedure or with one night stay in hospital following the operation. If you are staying overnight, then please bring with

you some night clothes, a dressing gown, slippers and toiletries. Do not bring cosmetics or jewellery. Before you go to hospital you should have a shower at home, or the morning of the operation on the ward.

When you arrive in hospital, you will be seen by a nurse who will talk to you about your general health and measure your blood pressure to make sure that you are fit for surgery. They may also arrange for you to have some blood tests, a heart trace (ECG) and a chest X-ray. An anaesthetist will visit you to discuss the anaesthetic. Mr Harris will also come and discuss your surgery in detail with you once more.

You will then be asked to sign a consent form. Make sure that you are fully informed of and fully understand all the consequences of the surgery prior to signing this. It does not take any of your normal rights away, it merely states that Mr Harris has explained the operation to you and that you have had an opportunity to discuss the anaesthesia with an anaesthetist.

Where will the incisions be?

Many Plastic Surgeons only perform surgery on the nose by making their incisions inside the nostrils (endonasal or closed approach). This can produce unpredictable results and is now only indicated in the most straightforward of rhinoplasties. An open procedure is currently the more frequent approach because it gives greater access to the underlying structure of the nose and therefore greater control over the result. A small incision is used across the base of the nose on the columella, which is the vertical strip of tissue separating the nostrils. This scar is rarely visible.

How will I feel when I wake up after the operation?

The operation usually takes one to two hours. You will then wake up in the recovery area before transfer back to the ward. It is usual to feel groggy and a little disorientated for a short period. If you have pain or feel sick, you should tell the nursing staff so that they can give you the appropriate medication. The nose will feel sore after surgery particularly when lying flat, but this rapidly improves over the first few days.

Are nasal packs used?

It is extremely rare for nasal packs to be used by Mr Harris. In the past, their removal was rather traumatic for most patients. An internal nasal splint is sometimes used, which allows you to breathe through your nose as soon as you wake up and stops the nose becoming blocked in the recovery period. This is usually removed one week following the surgery without any difficulty or discomfort.

What post-operative care do I need and when can I go back to work or exercise?

When the surgery is completed an external splint is applied to your nose that maintains its new shape. A little cotton gauze bib may also be placed across the tip of the nose, this can be removed the following day. You should try to sit up with several pillows to support your shoulders as this will help to reduce the post-operative swelling around the eyes. You may also be given ice packs to apply to the eyes. Operations on the nose are usually not painful which surprises most people, although you will be given some mild pain-killing tablets. You should insert nothing up the nose, especially Q-tips for at least three weeks.

On discharge from the hospital, you should get someone to take you home and stay with you for at least a further two nights. An appointment will be made for approximately one week after the

operation to see the practice nurse. At that appointment the dressings will be removed and the wound checked. Any stitches on the lower nose will also be removed. All internal stitches are dissolvable. You will only see a doctor if there is a problem. You will then be permitted to shower or bath but it is inadvisable to soak in the bath with the wounds submerged for at least three weeks. An appointment will be made to see Mr Harris the following week and then between four and six weeks following the surgery.

Four weeks after your operation you may resume gentle exercise, but violent movements of the head such as sit-ups is inadvisable for six weeks. You should refrain from contact sport for three months.

For the first few days after surgery try to avoid sneezing vigorously, very hot baths, hot food, alcohol and exercise. You will have bruising around the eyes and sometimes a swollen upper lip. Usually the swelling reaches a peak two days after surgery and then subsides. There will be a feeling of numbness and stiffness in the tip of the nose for several months. There is also a small degree of persistent swelling that takes many months to subside but is not noticeable to anyone else but you.

Will I like my new look?

Whilst many patients want to see the final result immediately upon removal of the splint, the presence of early swelling can be misleading and a premature judgement should not be made. By six weeks the new shape of the nose will be clear but changes will continue for many more months. It is common for relatives and friends not to comment on any difference after a rhinoplasty. Do not consider such a reaction as an indication of failure, on the contrary if it looks better and natural it will go unnoticed. The intention is to create a new nose that draws little attention to itself and that blends into the overall features of your face in proper proportions.

What are the possible complications?

Complications are fortunately rare. The most common is persistent swelling around the nose. This should settle with time and some massage exercises. Nose bleeds and infections are possible complications but extremely rare and easily corrected if early treatment is obtained. Should a nosebleed occur, then the first aid treatment is to sit with the head held backwards and plug the nostrils with some gauze or tissue.

Very occasionally a small secondary adjustment procedure will be required. This can usually be undertaken under local anaesthetic but it is difficult for patients to understand that the scarring on the nose must be allowed to mature and soften before this can be safely carried out. This usually means at least one year.

The Practice

Mr Harris practices from 5 Devonshire Place in Central London, where he also performs minor outpatient procedures. Assisted by his regular anaesthetist, he operates at The London Clinic (<http://www.thelondonclinic.com>) and at The Royal Marsden Hospital, Fulham (<http://www.royalmarsden.nhs.uk>). He also consults and operates at Parkside Hospital, Wimbledon (<http://www.parkside-hospital.co.uk>). All provide a full range of medical support services.

Main correspondence, appointments and administration

Many patients are referred by their General Practitioner or their Breast Cancer Surgeon. You may, however, arrange your own appointment with Mr Harris, without referral.

Please refer all correspondence to:
5 Devonshire Place
London
W1G 6HL

For appointments please contact:
appointments@paulharrisplasticsurgeon.co.uk, tel: 020 7927 6520

For information and payments:
admin@paulharrisplasticsurgeon.co.uk, tel: 020 7927 6521

For nursing support please contact:
nurse@paulharrisplasticsurgeon.co.uk, tel: 074 9622 8878