

Michael Evan Sachs

Mastering Revision Rhinoplasty






MASTERING
REVISION
RHINOPLASTY

MICHAEL EVAN SACHS, M.D.

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 Springer

DEDICATIONS

To my mother Celia
who inspired in me a thirst for knowledge and exploration

To my father David
who taught me to always do my best and expect nothing less

To my wife Linda
my best friend and foundation, who guides me through life and continually
shows me the true meaning of love

To my children Blake, Courtney and Steven
whose boundless creativity, insight, and wonderfully optimistic view of life
continue to inspire my view of humanity

And to all my courageous patients
a very special thank you for your boundless confidence, trust, and support:
without you, this book would not exist

ACKNOWLEDGMENTS

The practice of surgery is at first glance a very personal and intimate profession. It is essentially one surgeon affecting the visage of one patient through the use of one's hands.

Deeper analysis reveals however an entire team of individuals who help make this process rewarding and successful.

Firstly is the partner in the intimate setting of the operating room, the operating room nurse. This person is a critical component in guiding, enlightening and aiding the surgeon. I have been blessed to have had for the past twenty years, a most ingenious and gifted nurse, Liza Uy. Liza has helped me perform the most difficult and yet the most gratifying of surgeries over the past years. Her infinite skill and judgment has helped to turn the most difficult case into a work of art. I cannot thank Liza enough for her years of service to me and my patients. I hope that her experience with me has been as fun and gratifying to her as it was for me.

The next member of the team who is equally responsible for the success of my practice and the comfort of my patients is Lillian Guido. Lillian, who has been with me for almost 15 years, is the epitome of quiet grace and stream-lined efficiency. My patients and I are both lucky to have her help us with the myriad tasks which she performs flawlessly. I am indebted to Lillian for all her years of tireless and selfless service.

Theresa Wiatroska has worked tirelessly for over 15 years, contributing dearly to the health and welfare of my patients. She has taken care of all the needs of our office staff in a cheerful and caring manner. We are all indebted to Theresa for her service.

Although there are many other members of our team that have contributed to the happiness and health and welfare of my patients through the years, the person who has kept the office together by helping out in any way possible for more than twenty years is Rosa Giammarco. Helping, listening, and guiding the patients through all the steps of their surgeries, she has been the most compassionate and efficient of office managers. I often tell my patients that Rosa gets more letters of thanks for her delightful and wonderful "way" than anyone else in the office. Simply said, without Rosa the office would not be the loving compassionate place it has become.

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INTRODUCTION

Mastering Revision Rhinoplasty is a compendium of ideas that have been formulated during the past twenty years. These years encompass more than thirty five thousand primary and revision rhinoplasties, the sum experience that have been analyzed in an attempt to categorize and clarify the technically and aesthetically challenging sub-specialty of Revisional Rhinoplasty.

During this analysis certain basic themes began to emerge, which allowed me to organize the book in a manner, which when followed carefully will allow the experienced rhinoplastic surgeon to adequately handle most of the common problems associated with Revisional Rhinoplasty. It is commonly thought that Revisional Rhinoplasty is very difficult not only to perform, but also to accomplish successfully. Thus this art form has been shrouded in mystery and for the most part has never really been associated with much enthusiasm or promise of excellent or even good results.

While reading this book it will become obvious that indeed many revisional rhinoplasties are relatively easy to accomplish, as one begins to realize the basic mistakes, that led to the initial failure. It is indeed interesting how many major deformities fall into very specific and set categories or collections of mistakes, and when analyzed fully, can be dependably fixed, and hopefully in the future avoided.

It is axiomatic that the more one learns about Revisional Rhinoplasty the better one's primary rhinoplasty results become. It is certainly impossible for all primary rhinoplasties to turn out successfully. However, it is true that a large percentage of these failures can be repaired immediately following the incident. It is therefore, my fervent hope and wish, that by mastering these techniques, most primary revisions can be performed intra-operatively thereby obviating the need for a secondary revisional surgery. One can almost state that the true purpose of this book is to abolish the need for revisions by hopefully avoiding the error in the first place, or secondarily allowing for an intraoperative revision at the time of the primary rhinoplasty.

Thus my true impetus for writing this book stems from a desire to see Revisional Rhinoplasty become an integral part of the primary procedure, thus improving the aesthetic and functional results of this most intriguing procedure.

Rhinoplasty is an art as well as a science, and although one might possess the technical prowess to successfully finish the operation, it is the intrinsic artistic expression of the surgeon that dictates natural from artificial; beautiful from ugly, and success from failure. As one would practice a technical skill, the truly successful surgeon appreciates the artistic aspects of this surgery and consciously develops this appreciation, methodically incorporating the two disciplines into a cohesive force. This combined artistic and scientific force over time will grow and strengthen if the surgeon is open to new ideas of form, function, art and expression.

The book of course will serve many purposes. As one reads the book and learns various techniques for repairing problems, the thinking surgeon will critically examine one's own techniques, subsequently modifying and improving them, thereby enhancing one's ability to perform primary rhinoplasty.

It has become abundantly clear during the preparation of this book that certain mistakes, are made repeatedly. Some of the mistakes are technical in nature, either iatrogenic or secondarily due to some problem occurring during the very delicate healing process. Most however, are due to an aesthetic misjudgment, which leads to an unnatural, operated look. Some of these results are almost expected because the very nature of the operation initially was designed to offer unnatural results as a matter of course. The developers of this fascinating operation were offering patients, a change in ethnic image and identity and not an aesthetically beautiful and natural nose. This however is no longer the case. Rhinoplasty has crossed all ethnic lines and cultures and is now designed not only to change the nasal visage, but also to do it in a more secretive way.

Cosmetic surgery today mirrors the fashions and attitudes of a generation that demands natural as a definition of beauty. Natural is what we should strive for in the primary operative setting, however it is essential in a revisional setting. One could actually define Revisional Rhinoplasty as the process of naturalizing an artificial nose.

This book is designed to present a variety of techniques that have proven successful. It is most definitely not a compendium of all techniques on revisional plastic surgery. It is very much a personal approach to the complicated and diverse problems that present themselves. The genesis of many of the techniques discussed emanate from a dissatisfaction with previously published procedures which I feel do not have a high enough index of success to be used routinely. I have included techniques in this textbook, which have predictably and reliably been used over the last 20 years to solve the basic as well as the unusual problems that occur during Revisional Rhinoplasty.

Thus this book should be viewed as an attempt to systematically categorize post rhinoplastic problems, which are in need of revision. It will become readily obvious how limited a number of specific groups can be defined which concern functional and aesthetic deformities of Revisional Rhinoplasty. The book is

designed to be read section by section in the order in which it is presented. I would then recommend a re-reading of the first section so that the tenets laid down in this area are more readily understood after having experienced the technical presentations. The serious student will then utilize the book as an atlas of techniques that can be conveniently referenced when needed in any particular situation. All surgeons should then use any new information as a beginning platform of information from which to develop and refine their own experience, collecting and analyzing their own personal library of techniques, as they advance through this most wonderful and satisfying Discipline.