

## A PRACTICAL GUIDE TO OPTIMIZE THE APPROACH TO THE NASAL TIP

Volney PITOMBO, MD

### Abstract

**Background** – The author presents an algorithm to approach the nasal tip. He believes that the semi-open technique, which delivers the cartilage, should be elected in the majority of the primary rhinoplasty and that the open technique should be reserved for secondary cases or noses, that presents unusual deformity. He thoroughly describes the technique and also suggests a nasal tip classification based on the strength of the alar cartilage aiming to make the pre-operative planning to correct the tip deformities easier.

**Methods:** Based on an experience of 1,050 rhinoplasties performed over the last 6 years and aware that the treatment to achieve a good result in a rhinoplasty, the definition of nasal tip with elegant projection requires good cartilage support, a classification and an organized approach to tip plasty have been elaborated. The approach includes: 1. Accurate pre-operative anatomic diagnosis; 2. Choice of proper technique: either for primary nose or for secondary nose; 3. Use of the cartilage suture technique and cartilage graft, whenever necessary.<sup>1,2,3</sup>

**Results:** 1050 patients have been operated over last six years using this algorithm. The aesthetic results were good and with minimal complications.

**Conclusions:** The use of this method has provided considerable satisfactory and predictable results providing a natural appearing tip with elegant projection. I believe that the semi-open technique can be employed satisfactorily in primary noses to approach the nasal tip. The open technique should only be reserved for special primary cases or secondary rhinoplasty.

### References

1. Tard M. E. Jr. Patt BS, Walter MA. *Transdomal suture refinement of the nasal tip: long-term outcomes*. Facial Plast Surg 1993; 9:275-284.
2. Tebbetts JB. *Shaping and position the nasal tip without structural disruption: a new, systematic approach*. Plast Reconstr Surg 1994; 94:61-77.
3. Cardenas-Camarena L, Guerrero MT. *Improving nasal tip projection and definition using interdomal sutures and open approach without transcolumellar incision*. Aesthetic Plast Surg 2002; 26:161-166.
4. Lee KC, Kwon YS, Park JM, Kim SK, Park SH, Kim JH. *Nasal tip plasty using various techniques in rhinoplasty*. Aesthetic Plast Surg 2004; 28:445-455.
5. Constantin MB. *The two essential elements for planning tip surgery in primary and secondary rhinoplasty: observation based on review on 100 consecutive patients*. Plast Reconstr Surg 2004; 114:1571-1581.
6. Teichgraeber JF, Riley WB, Russo RC: *External rhinoplasty: indications for use*. Br J Plast Surg 1992; 45:47.
7. Vilar-Sancho B: *The use and abuse of external rhinoplasties*. Aesth Plast Surg 1989; 13:63.
8. Rees TD, Krupp S, Wood-Smith D. *Secondary rhinoplasty*. Plast Reconstr Surg 1970; 46:332.
9. Sheen JH, Sheen AP. *Aesthetic Rhinoplasty*, 2nd ed. St. Louis: Quality Medical Publishing, 1998.
10. Rees TD. *Aesthetic Plastic Surgery*. Philadelphia: WB Saunders, 1980.
11. Sheen JH. *Secondary Rhinoplasty*. Plast Reconstr Surg 1975; 56:137.
12. Anderson JR. *External Approach to rhinoplasty (discussion)*. Laryngoscope 1974; 84:2201.
13. Gunter JP, Landecker A, Cochran CS. *Frequently used grafts in rhinoplasty: nomenclature and analysis*. Plast Reconstr Surg 2006; 118:14e.
14. Gunter JP, Rohrich RJ. *The open approach to secondary rhinoplasty*. In: Plast Reconstr Surg 1987; 80:161.
15. Matthews, DN. *The nose tip*. Br Journal of Plastic Surgery 1972; 21:138-142.

- 16.** Pitombo, V. Rhinoplasty: *The nasal tip and the aging process*. In: Operative Techniques in oculoplastic, Orbital and Reconstructive Surgery, 2000;(3) 2: 74-80.
- 17.** Peck, G. C. *Onlay grafts for augmentation of nasal tip projection*. In: G.C Peck (ed.) Techniques in Aesthetic Rhinoplasty. Philadelphia: Lippincott, 1990; 60-65.
- 18.** Constantin, M. B. *Four common anatomic variants that predispose to unfavorable Rhinoplasty results*. Presented at the Annual Meeting of the American Society For Aesthetic Plastic Surgery, Dallas, Texas, May 17<sup>th</sup>, 1999.