

SOUTHWESTERN NEWS

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UT SOUTHWESTERN PLASTIC SURGEONS SET NATIONAL STANDARD FOR UPDATED RHINOPLASTY PROCEDURE

DALLAS—July 12, 1993—When plastic surgeons around the nation seek an alternative to the "blind" approach to nasal plastic surgery, they look to their colleagues at The University of Texas Southwestern Medical Center at Dallas.

Plastic surgeons traditionally conduct surgery virtually blind to nasal deformities when they perform rhinoplasty—surgery done to enhance the nose cosmetically, correct nasal deformities and clear obstructions in the nasal airway.

But an alternative surgical procedure, perfected by plastic surgeons at UT Southwestern and taught by them to hundreds of surgeons annually, allows plastic surgeons to see the entire nasal cavity during surgery, said Dr. Rod J. Rohrich, chairman of the Division of Plastic and Reconstructive Surgery at UT Southwestern. The majority of rhinoplasty procedures Rohrich performs are at Zale Lipshy University Hospital, UT Southwestern's referral hospital, where Rohrich also is chief of plastic surgery. He said the new technique provides better results.

With the traditional closed approach to rhinoplasty, surgeons draw lines on a patient's nose and make incisions to the area of the nose affected but do not expose the entire nasal cavity. This approach does not allow surgeons to see inner deformities in relation to the entire nasal cavity.

When using the newer open technique, surgeons expose the entire nasal cavity after making a 6 mm incision through the columella, the thin piece of flesh between the nostrils, and lifting the nasal tissue upward.

"This allows you to see the actual anatomy of the nose so that you can see what you are doing, just as in any other surgery," Rohrich said. "Once you do this, it is easier to correct the deformity and get more consistent aesthetic results."

(More)

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Patients who undergo the newer surgery experience minimal discomfort, equal to that of the traditional approach, Rohrich said. "The surgery may take a little longer, but we get better results and have to do fewer revisions. Using either method, it usually takes the patient about seven to 10 days to recover."

While rhinoplasty patients get a more precise result from the open approach to rhinoplasty, plastic surgeons also reap a benefit. The technique cuts by one-fourth the number of times a plastic surgeon must perform rhinoplasty before becoming proficient at the surgery, Rohrich said.

The new rhinoplasty procedure, which has been perfected over the past 10 years, is the focus of an annual symposium sponsored by UT Southwestern. "Medical schools around the country send their residents and faculty to this program for an annual update," Rohrich said. Plastic surgeons in private practice also attend the annual meeting.

"We have really set the standard and revolutionized how plastic surgeons approach rhinoplasty," he said.

During the symposium, visiting plastic surgeons and residents are instructed on procedures, view videotaped demonstrations of the technique and practice it on cadavers, Rohrich said. The procedure also is part of the plastic surgery curriculum at UT Southwestern. The symposium is endorsed by the Plastic Surgery Educational Foundation.

The 1994 rhinoplasty symposium is scheduled for March 5-7 and is coordinated by Rohrich and chaired by Dr. Jack P. Gunter, clinical professor of plastic surgery at UT Southwestern, who originated the symposium.

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