

form & function

Sydney ENT and facial plastic surgeon **Dr William Mooney** says the primary aim of rhinoplasty is to achieve a nose that is attractive as well as functional. Lise Taylor reports.

Nose surgery, also called rhinoplasty, is a procedure with broad application. Sydney ENT and facial plastic surgeon Dr William Mooney says he has treated patients of all ages, from as young as 15 to a 70 year old with a post-traumatic condition.

‘Because I am an ear, nose and throat surgeon, people come to me with both functional and cosmetic concerns,’ Dr Mooney explains. ‘Often patients simply want function improvements, but sometimes this can’t actually be done without cosmetic improvements. The corollary is also true: I often unearth and address functional problems when I am doing cosmetic work.’

Dr Mooney says when you look at a person, or indeed yourself, you tend to focus on the dynamic features: the eyes, the mouth, the general expression. You tend not to look at the nose directly. He says, ‘One of the hallmarks of success of a good rhinoplasty is to make the nose a feature that does not attract attention. That said, it is incredible the difference that the appearance of the nose can make to the face overall.’

Although he has been trained in both closed and open-structure rhinoplasty, Dr Mooney favours the open-structure method. ‘Open-structure rhinoplasty is not frequently executed, but I believe it is the best way to perform nose surgery. It involves a small incision between the nostrils, which leaves an almost imperceptible scar.’

‘Open-structure rhinoplasty is the best way to perform nose surgery’

He says this technique affords the best access and results, especially for a twisted nose and for tip deformities. ‘The tip of the nose is the most difficult part of the procedure to achieve a good result with because it is made of soft cartilage, which has to be sculpted into place. I frequently see patients who are unhappy with the result of a previous rhinoplasty. Most often it is the tip that they have found disappointing. Open-structure rhinoplasty is ideal for these candidates.’

There is much more to good rhinoplasty than promising every patient a ‘good nose’, as though there were only one model. As Dr Mooney explains, ‘Rhinoplasty planning means creating a nose that is right for that patient’s face. Matters such as age and gender, and the racial and cultural

background of the patient have to be carefully considered. The personality of the patient is also a very important factor when planning changes to the face.

‘You can’t give a woman who is a boardroom director a cute little nose just as – particularly in our nation of ‘blokes’ – you must not make a man too pretty.’

Dr Mooney’s clinic offers the latest in advanced computer imaging technology. He says, ‘I find this is an excellent tool to discuss planned outcomes with the patient. Patients are often amazed by the changes they can see and the difference that their projected nose surgery can make to their overall appearance.’

Often two or three preoperative consultations are required to get this right. When patients see Dr Mooney for their first consultation, they undergo both cosmetic and functional assessment. The functional assessment includes the taking of a full history and a fibre-optic examination of the nose, sinuses and throat. Dr Mooney often performs CT scans as well.

He says, ‘It is not enough to give a patient a nose that looks good,’ he says. ‘It must work as well. Issues such as nasal obstruction, sinusitis, hayfever and snoring can all be addressed, while improving the appearance of the nose. I find patients are often as delighted with their improved breathing and nasal function as with the cosmetic result.’

Rhinoplasty is performed under a general anaesthetic and takes around two hours. When patients wake up, Dr Mooney says they are often surprised that pain isn’t a big feature in the postoperative period, but they may have black eyes. Patients are required to wear a splint over the top of their nose and have a little stitch under their nose until both are removed at seven days.

He explains, ‘After two weeks patients usually look completely normal but the final result can take a few months; and up to a year if it has been an extensive procedure. These final changes are usually only minor and can only be noticed by the surgeon and patient. In the short term there is a risk of bleeding and infection, but these are most unlikely. It is also rare for the patient not to be satisfied with the outcome, particularly if preoperative preparation has been thorough.’

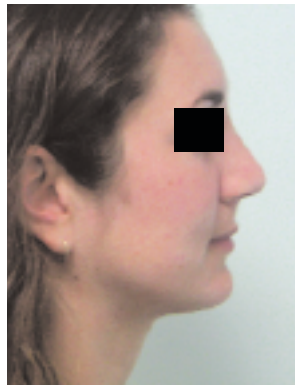
For an optimal outcome, sometimes a rhinoplasty can be teamed with other procedures. These include Aptos threads, blepharoplasty (eye surgery), lip augmentation, otoplasty (ear surgery), facelifting, facial implants, and even

other rejuvenating options as simple as Botox. Facial implants are of particular interest in relation to nose surgery. 'Chin implants, in particular, can really help to improve the appearance of the nose because often an over-projected nose is really only a slightly over-projected nose with a receding chin,' says Dr Mooney.

He concludes, 'The nose serves as the axis of the face: the static structure around which the expression, dynamism and beauty of the face play. For cosmetic surgery to succeed, the surgeon must strike a delicate balance between artistry and medical science. Perhaps more than any other procedure, rhinoplasty highlights the delicacy of both aspects of surgery – the art and the science – and the interconnectedness of form and function. A better nose tends to improve your health and your looks.' **acsm**



BEFORE



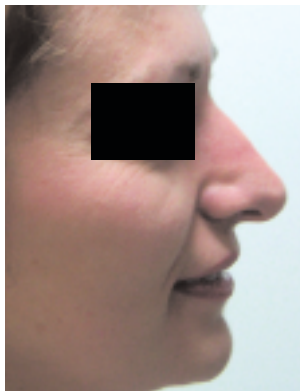
AFTER rhinoplasty by Dr Mooney



BEFORE



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