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## REVIEW

# Instruments in rhinoplasty: Who is behind the name?



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## KEYWORDS

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**Summary** Rhinoplasty is considered one of the most commonly performed and most challenging operations in facial plastic surgery. The modern facial plastic surgeon utilizes many instruments in performing this procedure. Many of these instruments take their names from the pioneers who invented or designed them. Although meritorious, the recent trend in medicine to move away from eponyms in lieu of descriptive names should not come at the price of forgetting history. Although this communication does not seek to provide a comprehensive history of rhinoplasty or of its pioneers, our aim is to mention several of the salient contributing figures upon whose shoulders we stand and whose eponymous instruments we use commonly in rhinoplasty.

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## Introduction

The modern facial plastic surgeon utilizes many instruments to perform a rhinoplasty. Many of these

instruments take their names from the pioneers who invented or designed them. This paper's aim is to add supplemental historical accounts by collating the stories of selected eponymous surgeons or medical inventors who have contributed to this surgery by the instruments they have passed on to us.

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**Figure 1** Joseph elevator (Used with permission from Black and Black Surgical, Inc.).

## The instruments and their makers

### Joseph elevator and scissors

Jacques L. Joseph (1865–1934), widely considered the father of facial plastic surgery and a pioneer in the techniques and intranasal approach to modern rhinoplasty, firmly believed that esthetic surgery had profound psychosocial implications and was well worth the risks of surgical intervention.<sup>1</sup> In 1898, Joseph performed the first reduction rhinoplasty by means of an external approach. Joseph subsequently performed the first intranasal approach to correct a dorsal hump with concomitant correction of the patient's anterior septum. He later honed his skills as a facial plastic surgeon on the myriad facial trauma injuries he encountered while treating wounded soldiers during World War I, most notably his facial reconstruction of the severely wounded soldier Musafer Ipar. Joseph had numerous reputed students, including Gustave Aufricht, Joseph Safian, Samuel Fomon, and Joseph Cottle to name a few. Joseph designed numerous instruments, including pliers, elevators, saws, and knives.<sup>2</sup> The Institute for Medical Education and Development in Berlin has on display many of Joseph's original instruments (Figures 1 and 2).

### Cottle elevator and Cottle speculum

Born in England in 1898, Maurice Cottle (1898–1981) had an itinerant early life, moving from England to France and then settling in Chicago, Illinois, where he trained and pursued his surgical practice. In Chicago, Cottle ascended the ranks as one of the country's most prominent otorhinolaryngologists, ultimately founding the American Rhinologic Society in 1954 and the International Rhinologic Society in 1961.<sup>2</sup> In a 1958 article titled *The "Maxilla-Pre-maxilla" Approach to Extensive Nasal Septum Surgery*, Cottle describes techniques utilized in the total submucosal removal of the nasal septum. Cottle describes the use of a "short, round, stiff, sharp, knife-like instrument" that he termed the "cottle knife," for use in detaching overlying



**Figure 2** Joseph scissor (Used with permission from Black and Black Surgical, Inc.).



**Figure 3** Cottle elevator (Used with permission from Black and Black Surgical, Inc.).



**Figure 4** Cottle speculum (Used with permission from Black and Black Surgical, Inc.).

soft tissues from the medial cartilage. To raise submucosal tissues further, Cottle advocated the use of a "bent dull-ended elevator" followed by a sharper elevator to create a submucosal tunnel until the posterior bone is reached and the bulk of the overlying tissue is raised. In the same article, the author supports the use of a "narrow-bladed nasal speculum" that is introduced in between undermined tissue to achieve further separation. Cottle describes a novel approach to the treatment of surgically problematic noses and provides sequential steps using optimized instruments (Figures 3 and 4).<sup>2</sup>

### Aufricht retractor

Gustave Aufricht (1894–1980), while moderating the Symposium on Corrective Rhinoplasty in 1960, elegantly described the art that is rhinoplasty. He purported that the ultimate success of the procedure rests on the artistic and esthetic considerations of the surgeon.<sup>3</sup> Aufricht stressed the importance of considering the proportions and features of the face as a whole and tailoring the rhinoplasty accordingly. Born in Budapest, Hungary, Aufricht left the unstable and increasingly anti-Semitic Europe and settled in New York City. Aufricht was a leader in the field of plastic surgery, and at one point studied under Jacques Joseph at Charite Hospital in Berlin, Germany.<sup>3</sup> Convivial and well-liked by colleagues and students alike, Aufricht was one of the founding members of the American Society of Plastic Surgeons (Figure 5).

### Brown-Adson forceps

Alfred W. Adson was among the pioneers of neurologic surgery during the early to mid-20th century. Adson first



**Figure 5** Aufricht retractor (Used with permission from Black and Black Surgical, Inc.).

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