

Hybrid Approach for Asian Rhinoplasty

Open Approach Without Transcolumellar Incision



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KEYWORDS

- Open approach without transcolumellar incision • Modified septal extension graft
- Approach for Asian rhinoplasty • Nonopen approach

KEY POINTS

- An essential merit of endonasal rhinoplasty is the ability of the surgeon to fine-tune the nasal shape from intact skin, which is not always possible with the open approach.
- The hybrid approach (open approach without transcolumellar incision) delivers unlimited exposure and technical access, enabling all the procedures possible in the open approach while offering the surface feedback of endonasal surgery.
- The hybrid approach follows the same logic, sequence, and techniques of the open structural rhinoplasty, putting great emphasis on gaining maximal access to the skeleton.
- The hybrid approach also enables both a left-brain mode of operation (analysis and technical precision; from open access to the anatomy) and right-brain mode of surgery (appreciation of shape, balance, or proportion from intact skin).
- Technically, only the marginal incisions are required for the open approach.

INTRODUCTION

Is the Endonasal Approach Working for Asian Noses?

Contemporary endonasal rhinoplasty has broadened its indications and now embraces maneuvers that are typically reserved for an open approach.^{1–3} The infracartilaginous approach allows technical access for most tip-modifying maneuvers.⁴ More complex and profound changes of the lower lateral cartilage (LLC), such as medial advancement of the dome and lateral crural strut, are performed from complete release of the lateral crus via endonasal approach.⁵ The transvestibular approach of

Fuleihan⁶ is a recent addition of endonasal expansion, giving improved access and manipulation of the LLC through the transvestibular dissection.

Nonetheless, all of these approaches share essential ingredients of endonasal rhinoplasty: respect or preserve the innate tip support mechanism of the medial crura, and disrupt the medial crura or skin attachment as minimally as possible.⁷ The advantages stemming from this are multiple: less surgery, less morbidity, and less graft requirement, while offering an equivalent (if not superior) and quicker outcome. Preservation of the natural softness of the tip is appreciable on

Disclosure Statement: The authors have nothing to disclose.

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Facial Plast Surg Clin N Am 26 (2018) 269–283

<https://doi.org/10.1016/j.fsc.2018.03.002>

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the postoperative visit, attesting to the real merit and elegance of the endonasal surgery.

However, these endonasal benefits are not available for every nose. What if there are substantial problems in the sacred region, the columellar anatomy? These include

1. Severe deficiencies of medial crural support
2. Major asymmetries in the medial crura, such as in cleft deformities.

Even advocates of endonasal surgery prefer an open approach for direct repair of deficient medial crura and the use of grafts to attain a well-supported and aesthetic nasal tip.⁸⁻¹⁰ It is inevitable the nose be opened if the surgeon wants a precise correction of the deficient anatomy. However, in the open approach, the surgeon loses not only the inherent tip support but also the most precious advantage of endonasal rhinoplasty: the opportunity to see the undisturbed surface and, hence, fine-tune or control the nasal shape. Endonasal rhinoplasty is an operation designed so that intraoperative skin surface changes can be observed, providing appropriate feedback for subsequent decisions.⁷ However, the weak or deficient medial crura of Asian noses (**Fig. 1A**) do not permit using this endonasal merit. Surgeons must expose or manipulate the medial crura, thus losing the surface control of endonasal surgery. It seems unavoidable; however, there is a way to retain this endonasal merit (availability of the surface feedback) while performing a complete dissection of open rhinoplasty.

An Open Approach Without Opening the Nose

The approach reported by Guerrerosantos and echoed by other surgeons¹¹⁻¹³ is essentially an open approach without transcolumellar incision, as its name implies. It is not a wider dissection version of endonasal surgery because there is little respect for basic endonasal tenets (limited dissection, pocket-grafting, and minimizing inadvertent loss of supporting system). Instead, it follows the same logic, sequence, and techniques of open structural rhinoplasty (OSR), placing great emphasis on gaining maximal access to the skeleton.¹⁴⁻¹⁶ Its emergence was prompted by the same demand of open rhinoplasty for increased surgical versatility and technical accuracy.

As shown in the figures in this article, excellent visualization of this approach allows virtually all the procedures possible in the open approach: manipulation on the entire septal strut (spreader graft and correction of the caudal septum) and various surgical techniques on the nasal tip (cephalic resection, lateral crural flap, sutures, or graft placement). It really is an open approach, having the same precision and surgical control (**Fig. 1B**). The difference from the open approach is that it avoids transcolumellar incision and retains skin continuity throughout the entire operation. This difference is not merely sparing 1 incision but provides the surgeon a significant benefit: the unique opportunity to control surface change in real time

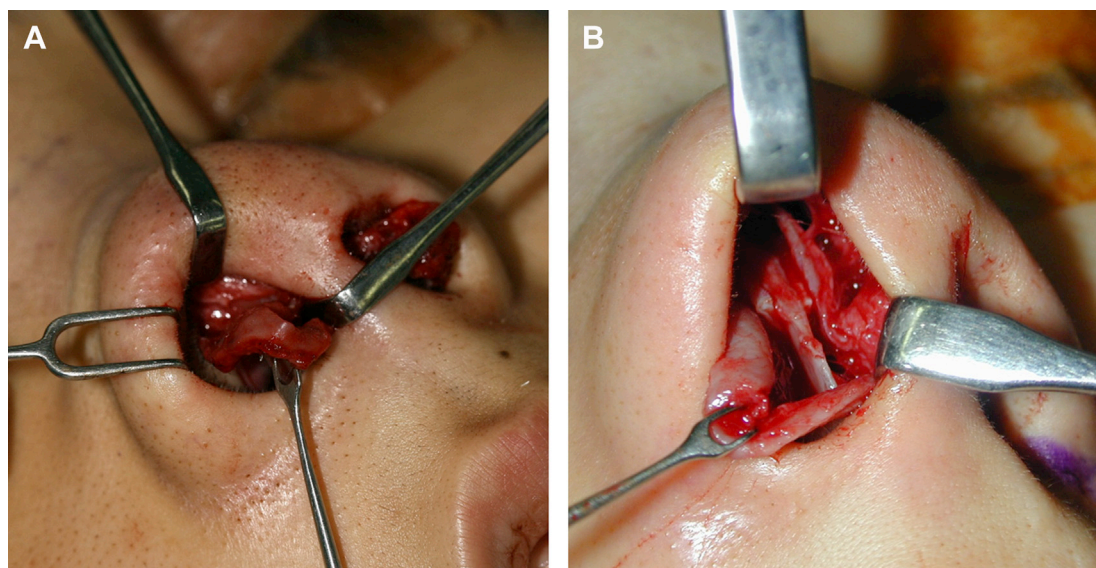


Fig. 1. (A) Medial crura of Asian noses demand an open exposure for direct repair and support of the weak or deficient anatomy. (B) The hybrid approach delivers unlimited exposure and technical access, comparable to an open approach.

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