

## Patient Information

---

### ENT Department

# Rhinoplasty

### What is a Rhinoplasty?

Rhinoplasty is the operation to change the shape of the nose. The type of rhinoplasty depends on which particular area of the nose needs correcting. The nose can be straightened, made smaller or bigger and bumps can be removed. The shape of the tip of the nose can be changed. Pieces of cartilage or bone may be removed from or added to the nose to change its shape.

Sometimes the wall that separates the nose into right and left nostrils (nasal septum) is twisted. We may need to correct this at the same time. The combined operation is called Septorhinoplasty.

### How is the operation done?

Rhinoplasty and septorhinoplasty are performed under general anaesthetic. Small incisions are made on the inside and usually the outside of your nose. Occasionally a small cut on the skin between the nostrils at the bottom of the nose may be necessary. A hairline fracture may be made in the nasal bones to allow the surgeon to change the shape of the nose. Pieces of bone and cartilage can be removed from or added to the nose to smooth out any bumps or dips.

Photographs will be taken to allow a record to be kept in your notes of how your nose looked before surgery and to allow the surgeon to plan your operation.

### Packs

We may need to put a dressing in each side of your nose to keep things in place and prevent bleeding. The dressings are called 'packs' and they will block your nose up so that you have to breathe through your mouth. Packs are easy to remove and are usually removed within a few hours of the surgery.

You will have a temporary splint on the outside of the nose for a week to maintain its' shape. This should be kept dry.

### Will my nose bleed when the packs come out?

It is quite normal to expect some bleeding when the packs are removed. This is normally stopped easily with the aid of an ice pack.

### How long will I need to stay in hospital?

Some patients may be able to go home the same day as surgery, otherwise you will stay in hospital overnight.

### How long should I take off work / school?

We recommend two weeks off work after the operation. A certificate can be provided for work or sickness benefit.

## Patient Information

---

### ENT Department

## Rhinoplasty – continued...

### Will I be able to breathe through my nose after the operation?

Initially you will find it difficult breathing through your nose if packs have been inserted. Once the packs are removed, your nose will still feel congested for several weeks after the operation, whilst the swelling on the inside goes down.

### Pain

Following your operation, your nose may feel uncomfortable, especially whilst the packs are in. Painkillers will be given whilst you are in hospital and you may need to take regular painkillers for a while when you get home.

### What happens after the operation?

Only blow your nose gently in the first week following surgery or it might start bleeding. If you are going to sneeze, sneeze with your mouth open to protect your nose.

You may get some blood-stained watery fluid from your nose for the first two weeks or so – this is normal. Your nose will be blocked on both sides, like a heavy cold for up to 14 days after the operation. You may be given some nose drops or spray to help this. It may take up to three months for your nose to settle down and for your breathing to be clear again. Try to stay away from dusty or smoky places.

There will be some stitches inside your nose which will dissolve and fall out by themselves.

You may have some bruising and swelling around your nose and eyes for up to two weeks. Sleeping with extra pillows for a few days helps.

The nose may feel a little stiff and numb for up to three months, particularly around the tip. Fine swelling may take up to a year to settle, at which time the final results of surgery may be judged.

### Can there be problems?

Sometimes your nose can bleed after the operation and we may have to put packs into your nose to stop it.

Infection in your nose is rare after this operation but if it happens it can be serious, so you should see a doctor if your nose is getting increasingly blocked and sore.

Rarely, the operation may leave a hole in the septum inside the nose going from one side of your nose to the other. This can cause a whistling noise when you breathe, crusting with blockage or nosebleeds. Most of the time it causes no problems at all and needs no treatment. Further surgery can be carried out if necessary to repair a hole in the septum.

Very rarely, you can experience some numbness of your teeth, which often settles with time.

Up to 10 percent of patients require a further operation in the future to further adjust the shape of the nose.

## Patient Information

---

### ENT Department

### Rhinoplasty – continued...

#### What to do if you have nose bleeds

1. Apply ice wrapped in a plastic bag (or a pack of frozen vegetables) to the back of your neck or the bridge of your nose.
2. Sit down with your head bent forward over a bowl.
3. Pinch the soft fleshy part of your nose between thumb and forefinger for 10 minutes.
4. If bleeding does not stop after 10 minutes, repeat for a further 10 minutes.

If the bleeding does not stop and is heavy you must go to Glynde Unit at Eastbourne District General Hospital immediately for assessment and possible readmission.

**If the bleeding is very heavy, do not drive yourself and ask someone to accompany you. If severe and you feel faint and weak, it may be necessary to call an ambulance.**

#### For the two weeks after your operation

##### AVOID

1. Swimming.
2. Contact with people who have coughs, colds or infections.
3. Dust, smoke or other irritants.
4. Long distance travelling.
5. Hot baths or showers.
6. Smoking.
7. Alcohol (or keep to a minimum).
8. Discos, pubs etc.
9. Contact sports.
10. Blowing your nose - after which you may blow your nose **gently**, one side at a time.
11. Picking or rubbing your nose. You may sniff gently and dab the end of your nose.

##### DO

1. Sneeze with your mouth open – do not suppress it.
2. Eat a healthy and varied diet.
3. Take painkillers if you need them.
4. Take gentle exercise.
5. Use steam inhalations to keep your nose comfortable.

#### For female patients

If you are on the oral contraceptive pill, remember that some antibiotics alter the effect of the Pill. Extra precautions should therefore be taken until you have completed the first week or your next packet of pills after finishing the course of antibiotics.

#### Outpatient Clinic

You will be followed up in the outpatient clinic one week after the operation for removal of the nasal splint. The appointment will either be given to you on discharge or sent through the post.

## Patient Information

---

### ENT Department

## Rhinoplasty – continued...

### Important information

Please remember that this leaflet is intended as general information only. It is not definitive. We aim to make the information as up to date and accurate as possible, but please be warned that it is always subject to change. Please, therefore, always check specific advice on the procedure or any concerns you may have with your doctor.

### Hand Hygiene

In the interests of our patients the trust is committed to maintaining a clean, safe environment. Hand hygiene is a very important factor in controlling infection. Alcohol gel is widely available throughout our hospitals at the patient bedside for staff to use and also at the entrance of each clinical area for visitors to clean their hands before and after entering.

### Other formats

Should you need this leaflet in an alternative format such as larger print, Braille and/or require interpreting services, please notify your nurse or doctor as soon as possible.

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

---

---

---

---

---

---

---

---

### Reference

The following clinicians have been consulted and agreed this patient information:

Mr Paul Kirkland, Consultant (ENT Surgeon)

Chin Barton, ENT Nurse Practitioner

Sandra Field, Senior Sister

Date Agreed: March 2010

Review Date: March 2012

Responsible Clinician: Mr Paul Kirkland, Consultant (ENT Surgeon)