



Non-surgical Rhinoplasty

myFACE training

Surgical rhinoplasty

- Invasive
- Traumatic
- IRREVERSIBLE
- Costly
- Down time
- Requires general anaesthesia
- Dramatic/obvious change
- Can REDUCE size of nose



Non-surgical rhinoplasty

- REVERSIBLE
- Topical anaesthesia
- Subtle changes
- Short down time
- Cost effective
- Short treatment time
- Re-models nasal framework



Patient assessment

- Eyebrow-tip aesthetic line



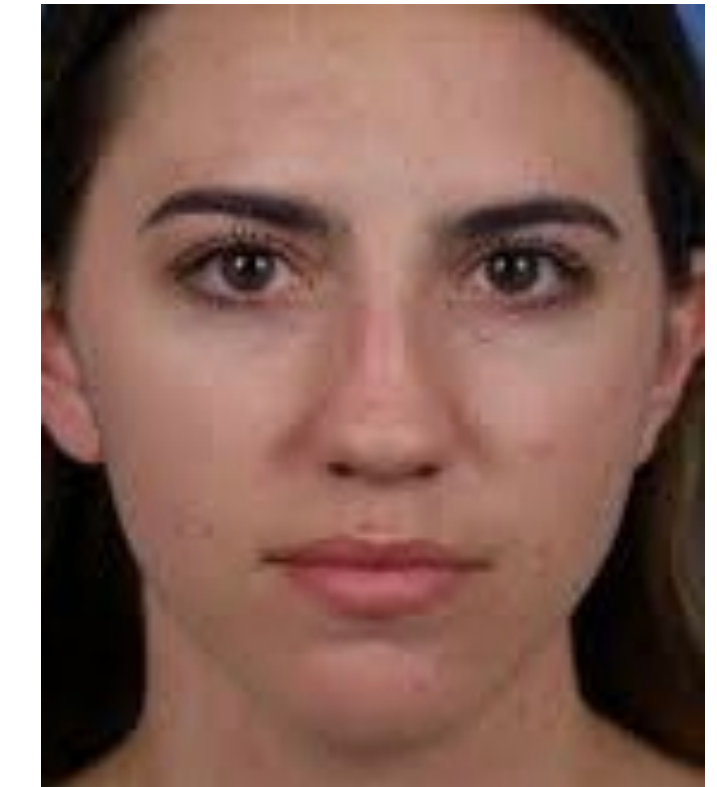
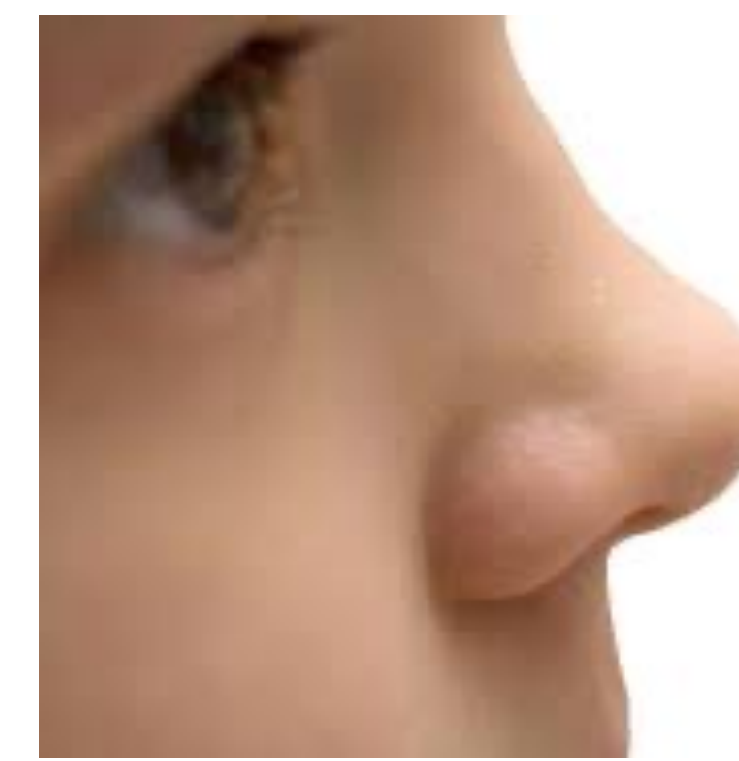
Patient suitability

- Structural defect
- Size of nose
- Degree of deformity



Common deformities

- Tip rotation
- Saddle nose
- Tension nose
- Pollybeak
- Retracted columella
- Pinched lobule
- Bulbous tip
- Hanging columella
- Inverted 'V'



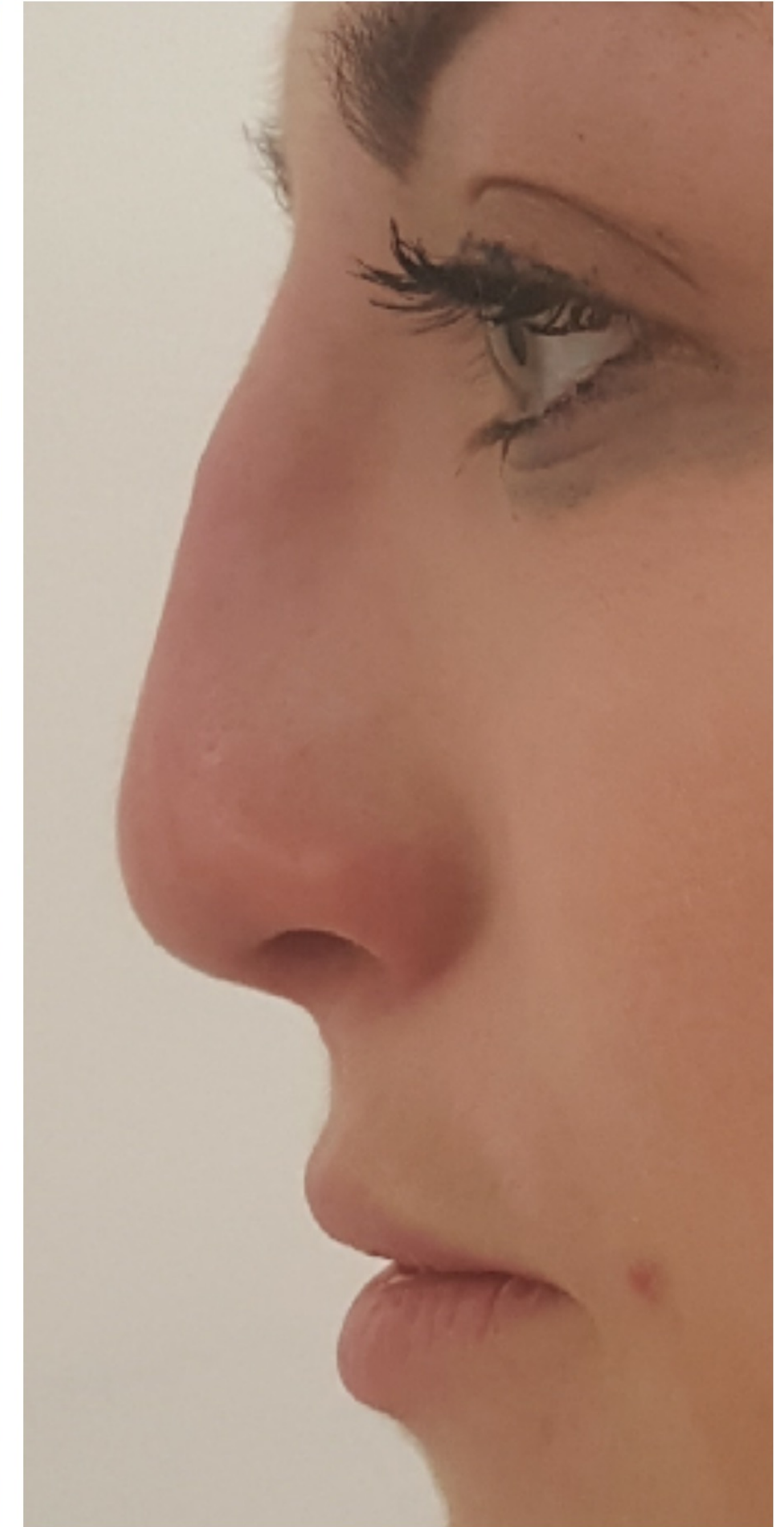
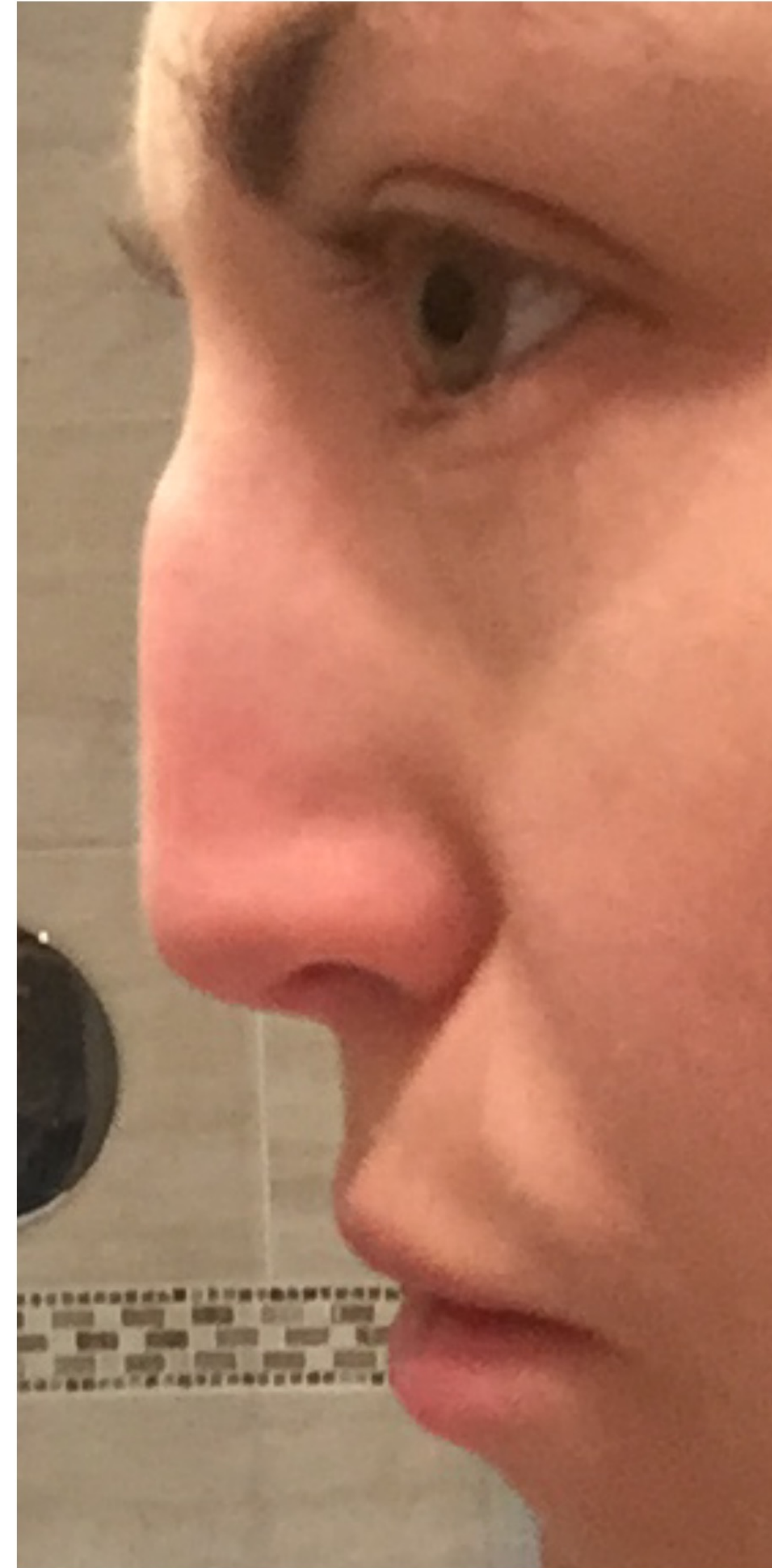
Lower risk areas

- Mild dorsal hump
- Saddle deformity
- Short nose and flat nose



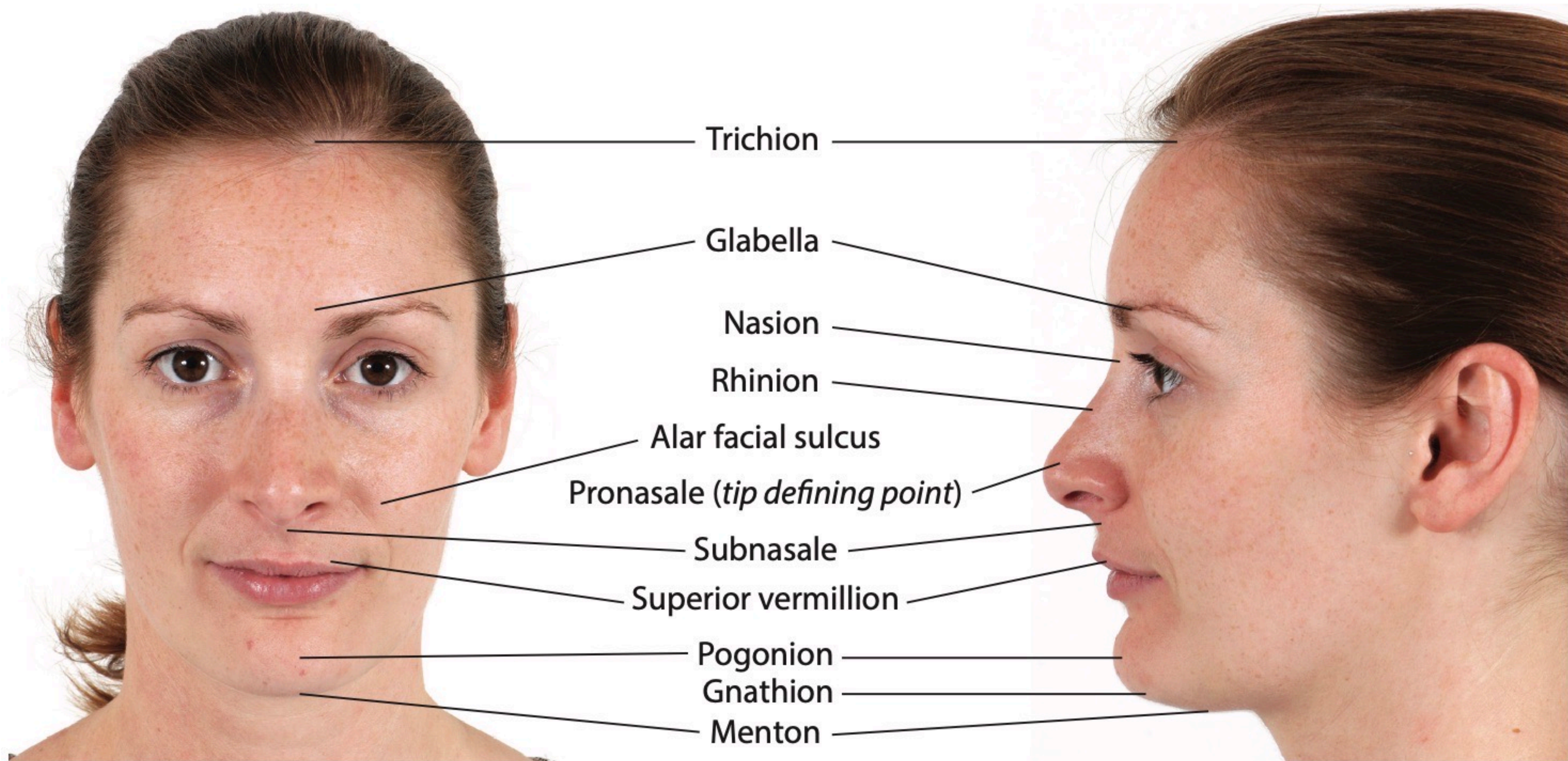
Higher risk areas

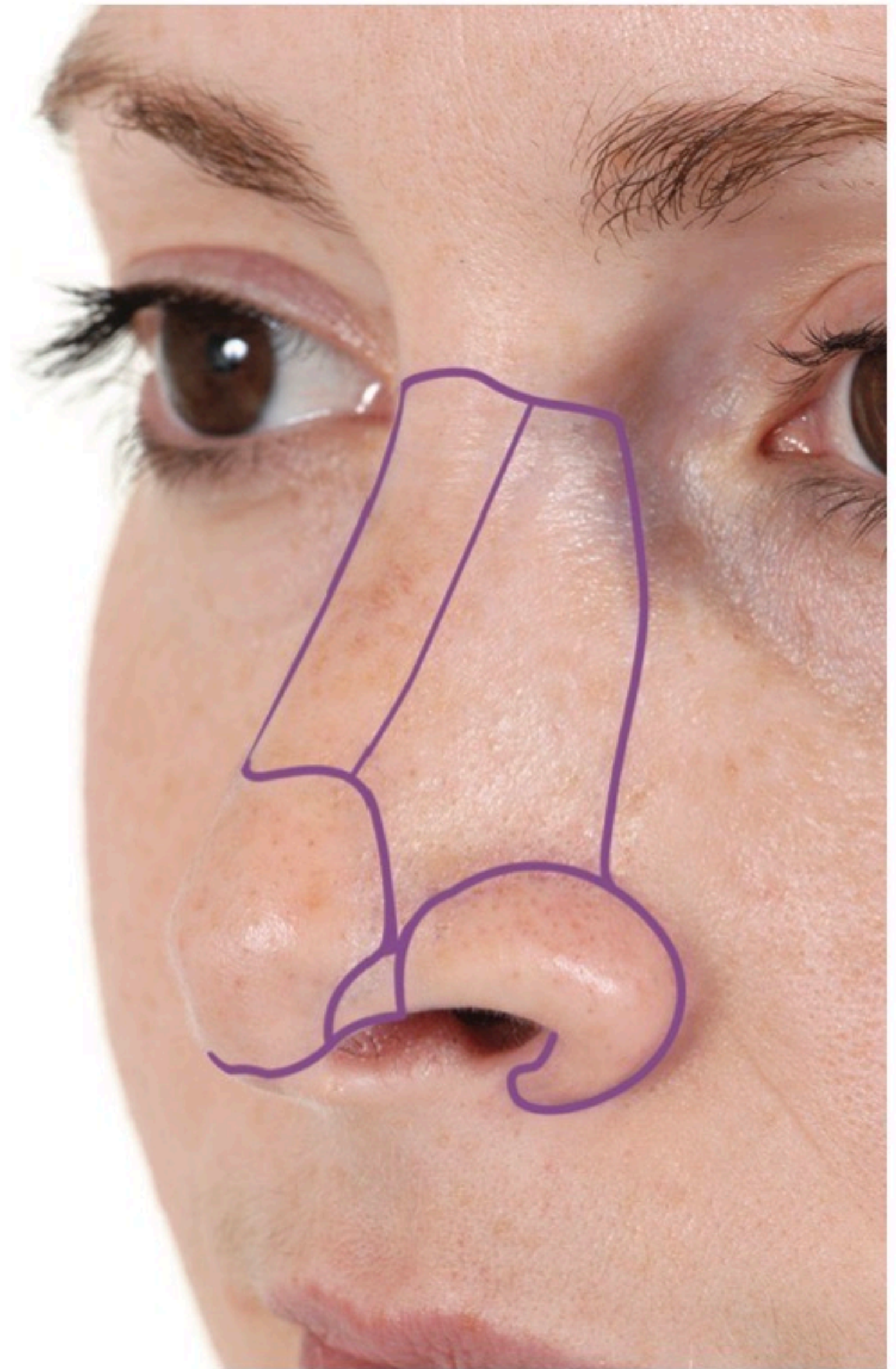
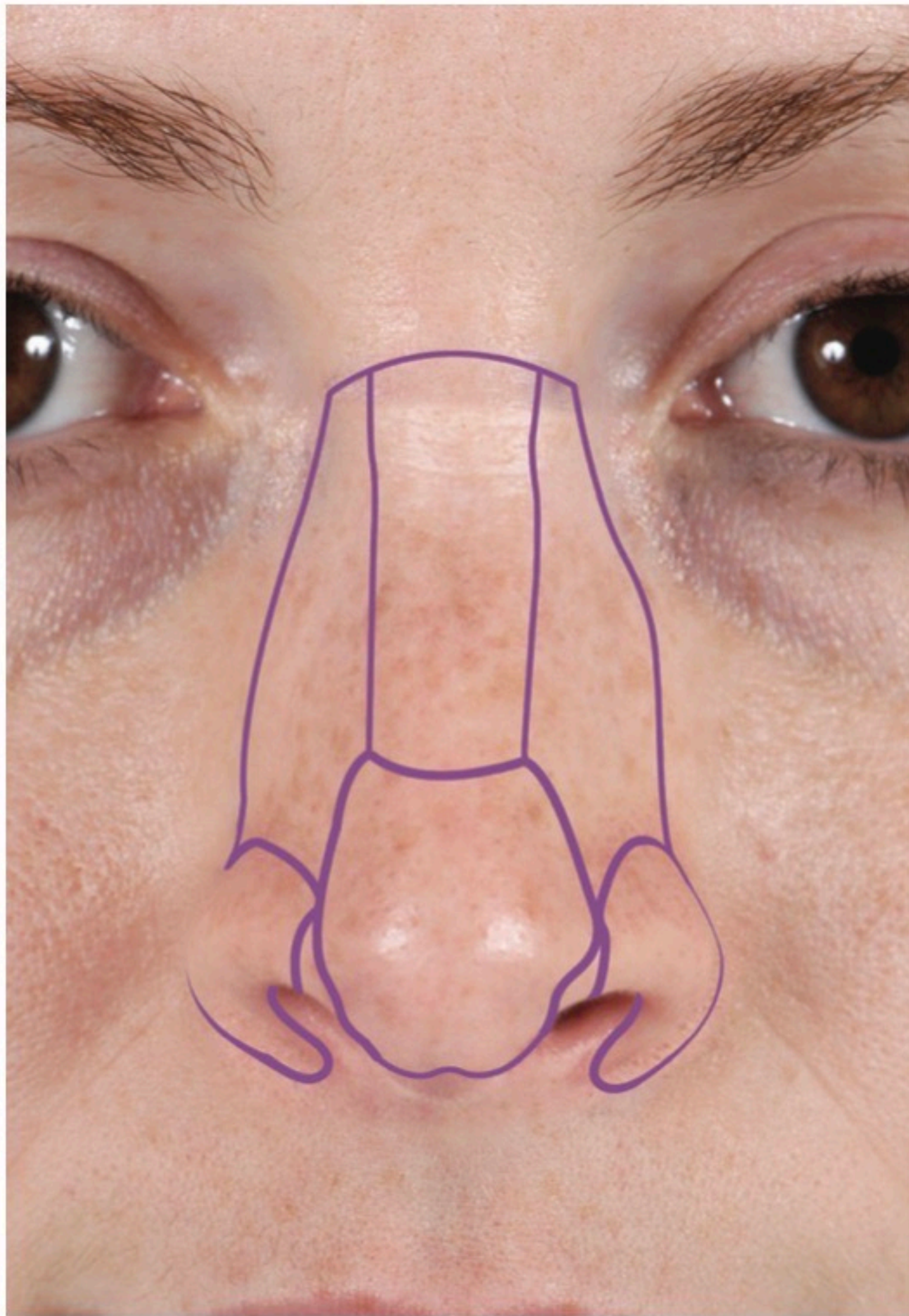
- Nasal tip
- Alar recess
- Glabella
- Large volume augmentation
- Post surgical rhinoplasty



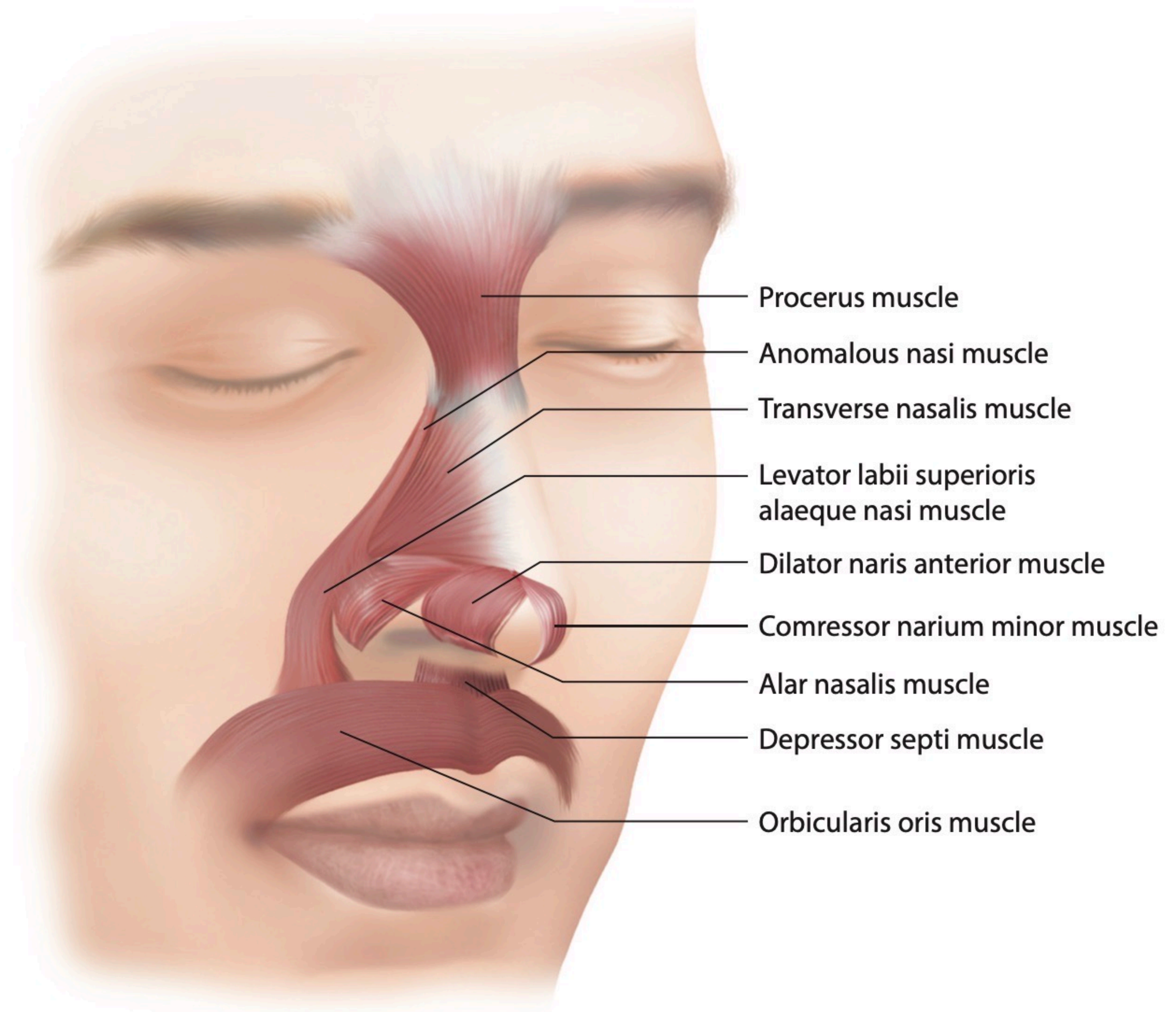
Anatomy



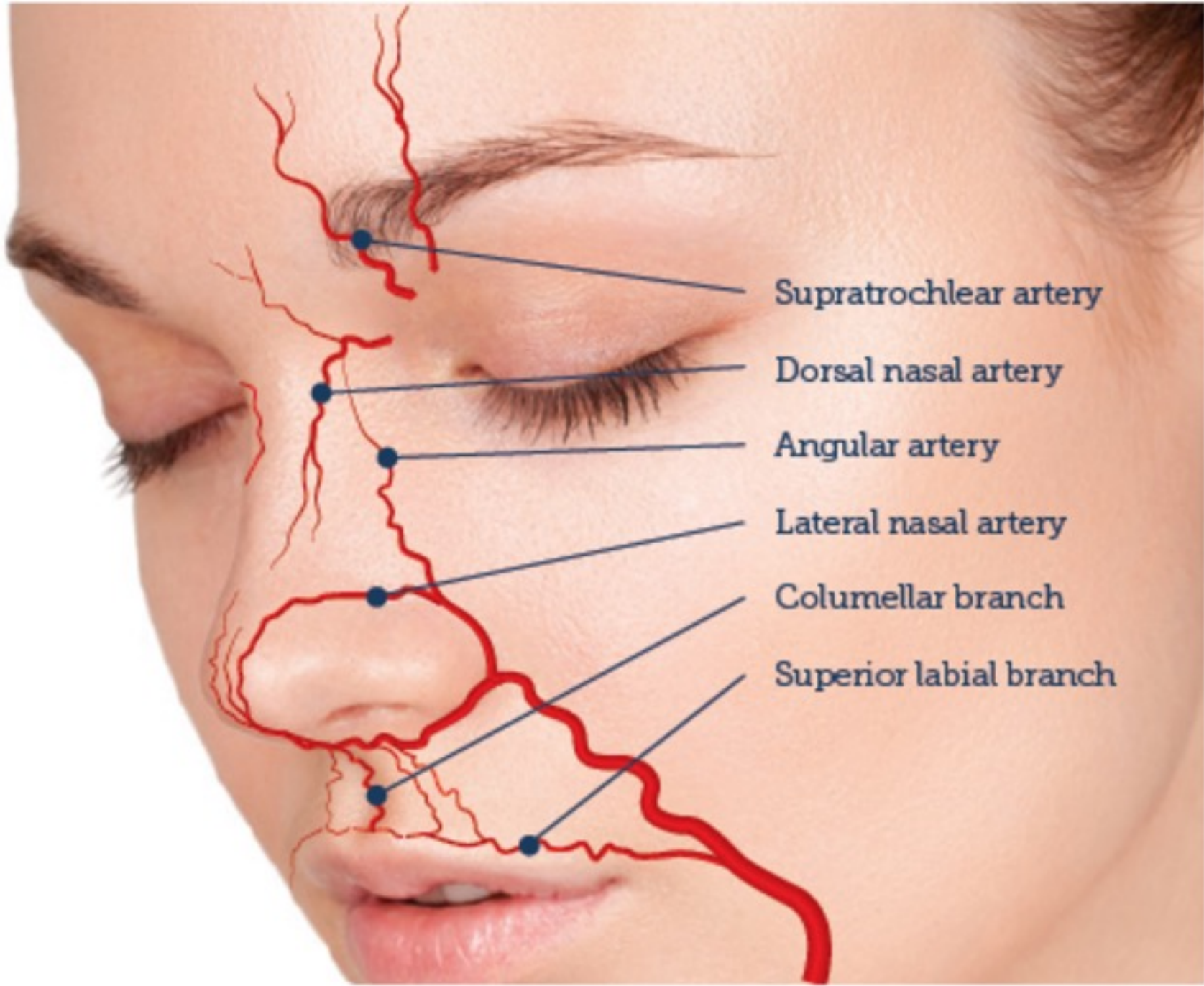




Muscular Anatomy



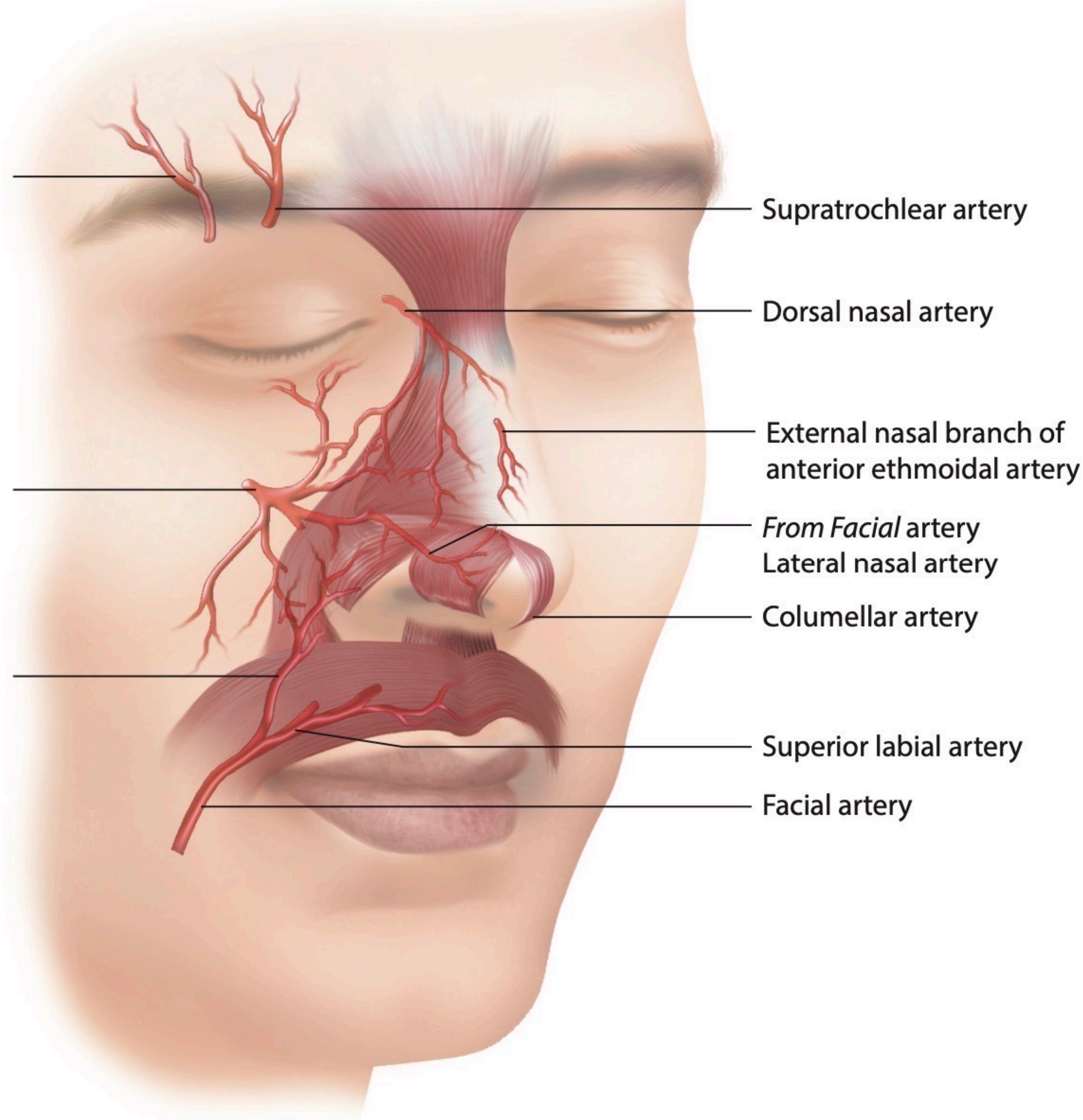
Arterial Anatomy

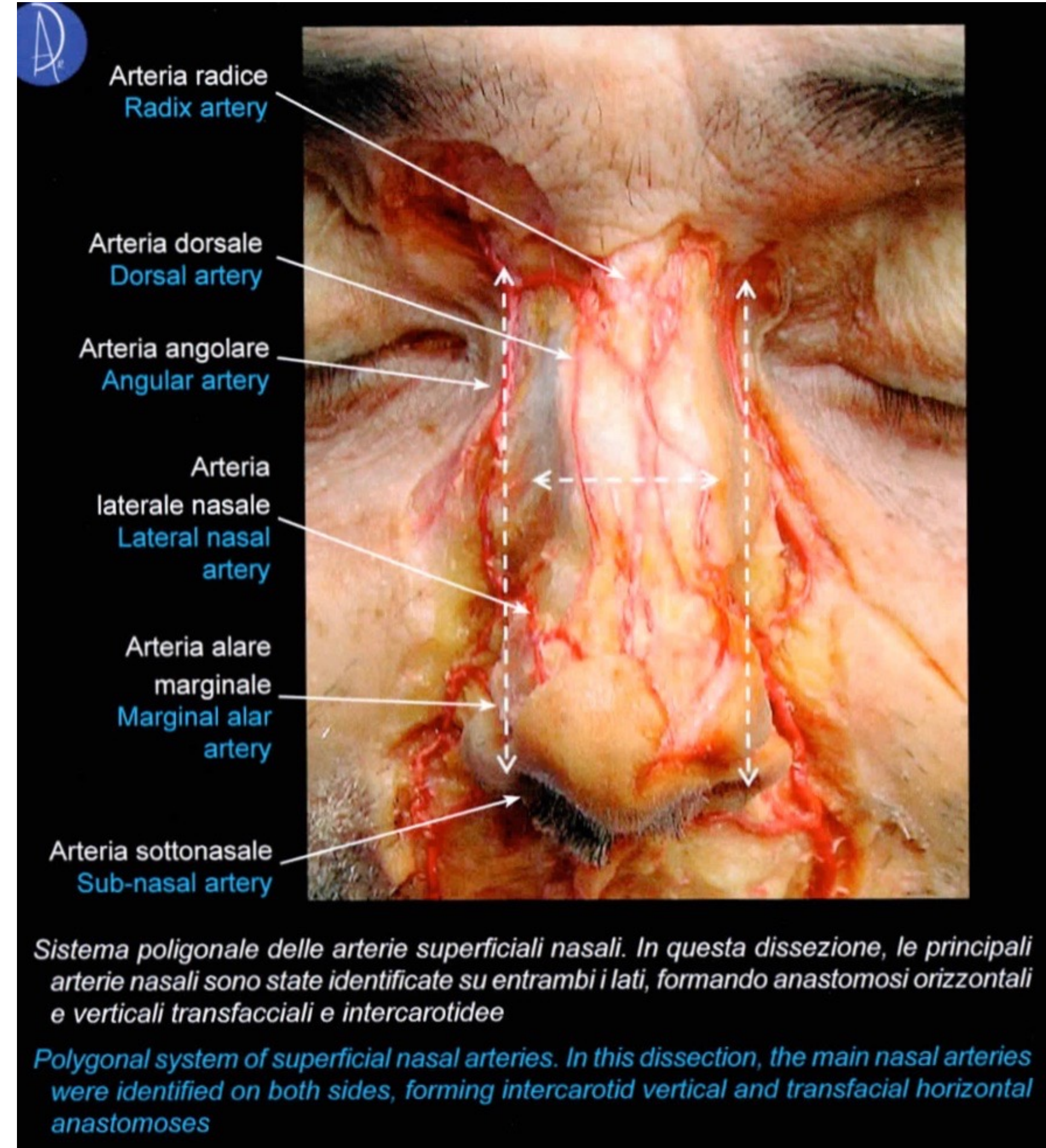
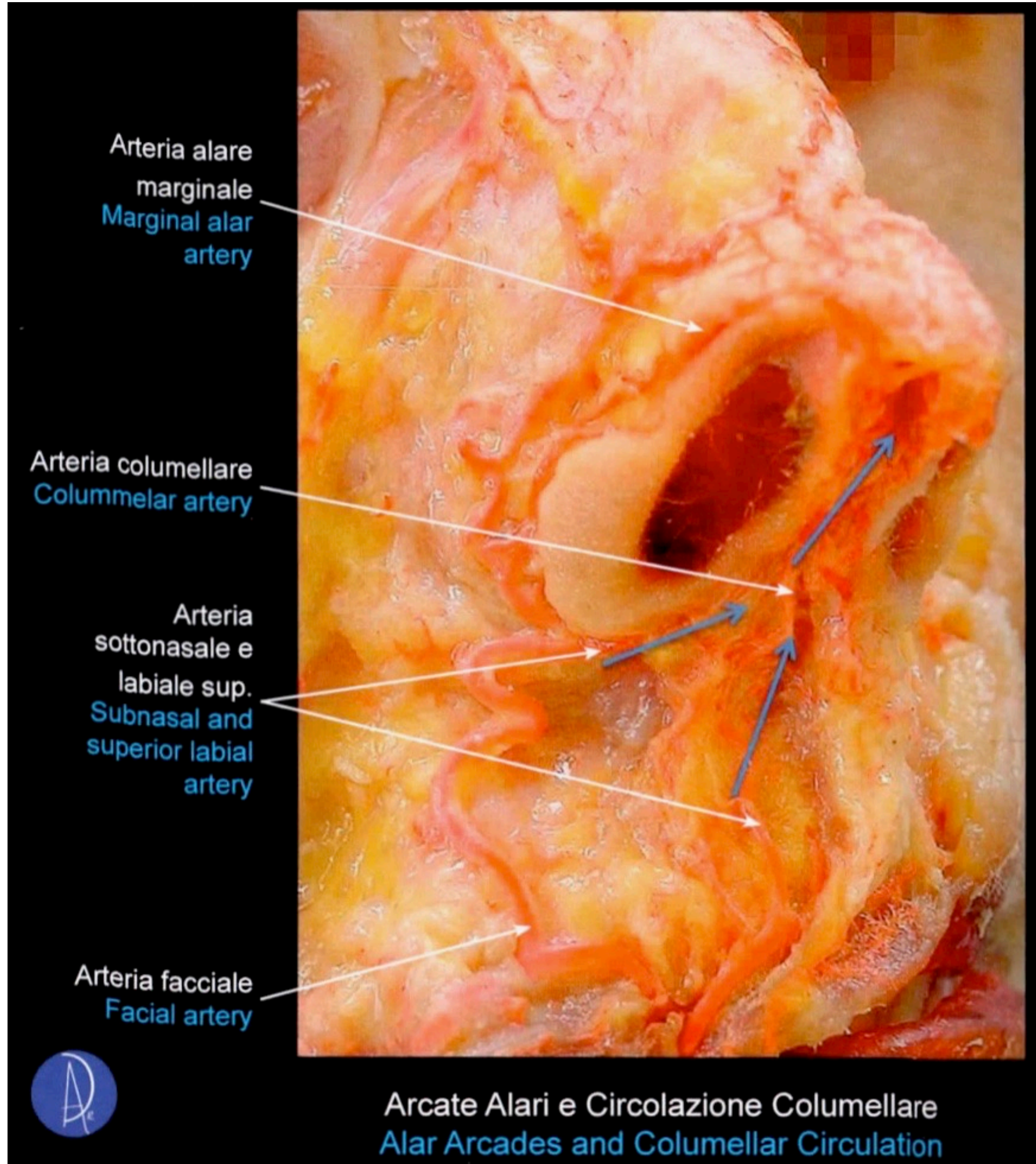


From Ophthalmic artery
Supraorbital artery

From Maxillary artery
Infraorbital artery

Angular artery





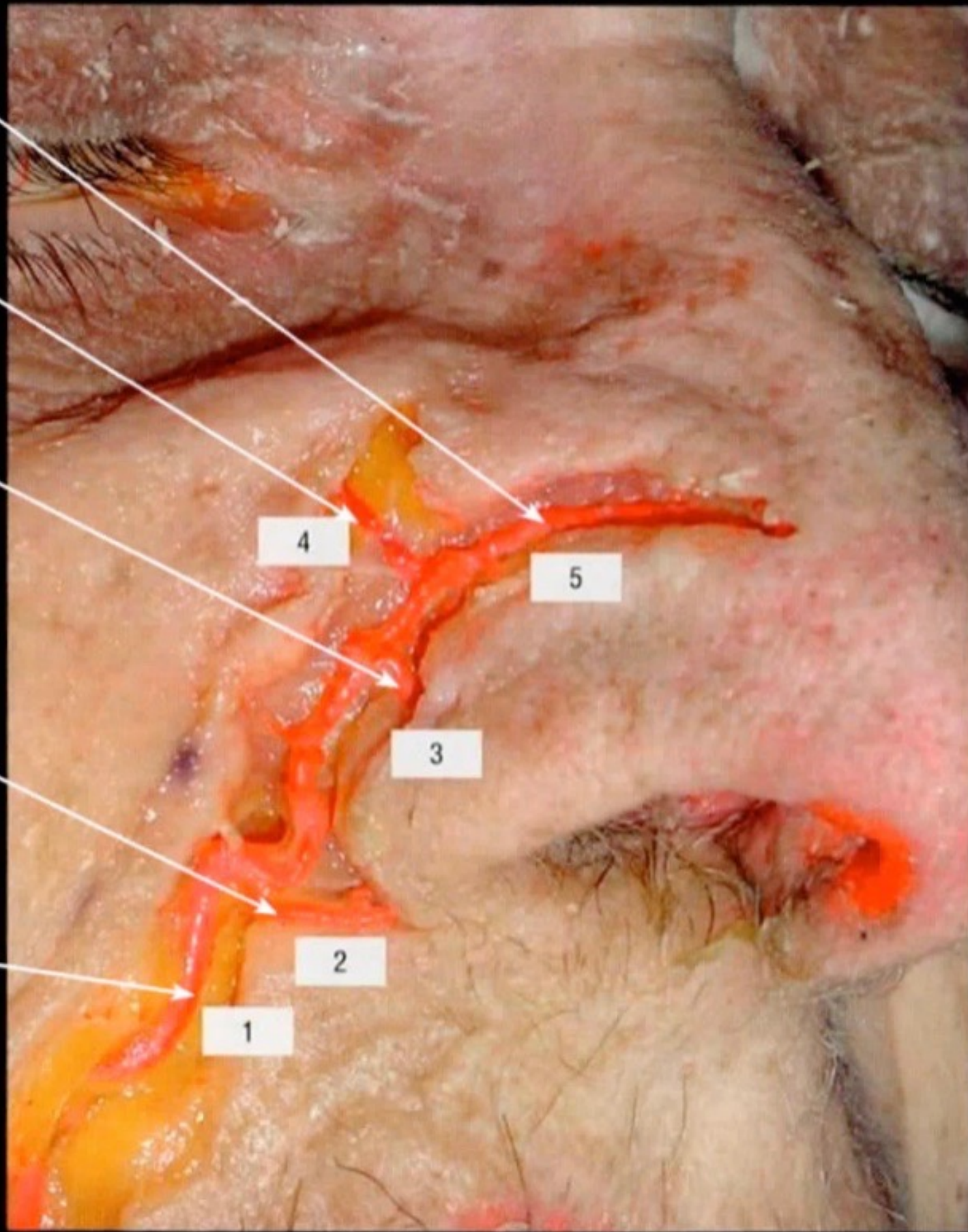
Arteria laterale nasale
Lateral nasal artery

Arteria angolare
Angular artery

Arteria alare marginare
Marginal alar artery

Arteria sottonasale
Sub-nasal artery

Arteria facciale
Facial artery



Dissezione dei principali rami dell'arteria facciale
e dei suoi rami principale
Dissection of the main branches of the facial
artery and its main branches.



Arteria angolare
Angular artery

Arteria laterale nasale
Lateral nasal artery

Arteria alare marginale
Marginal alar artery

Arteria sottonasale
Sub-nasal artery

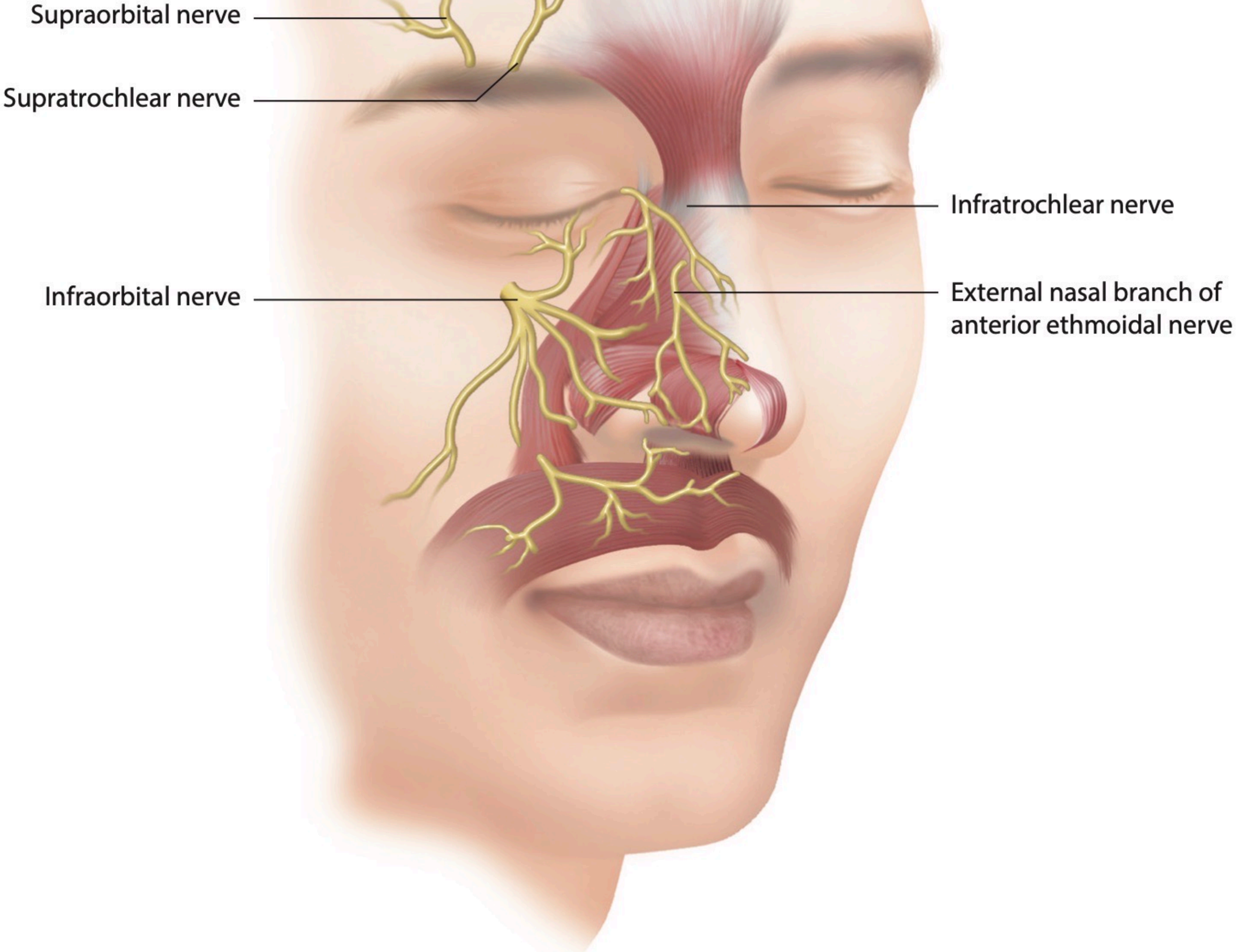
Arteria facciale
Facial artery



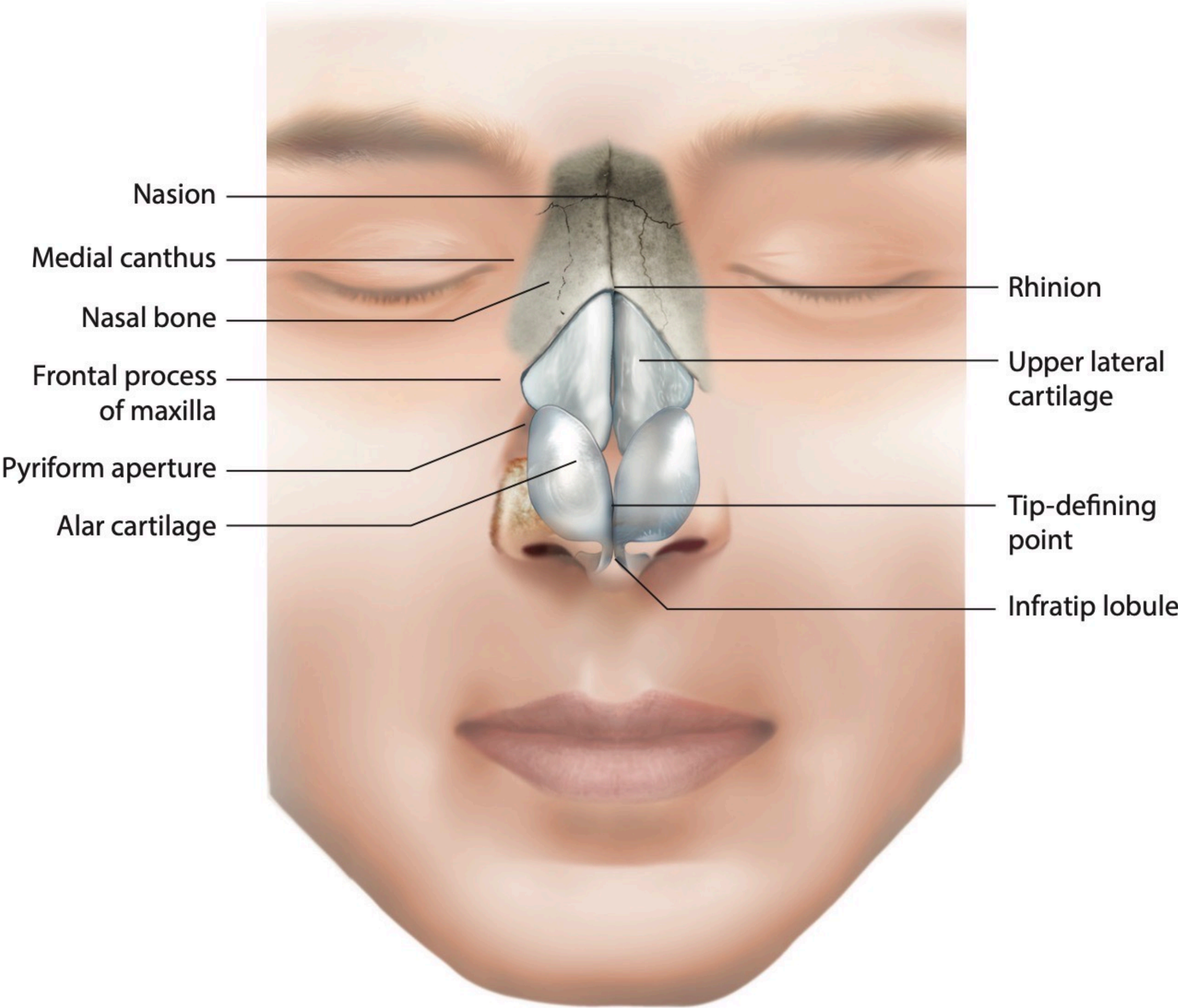
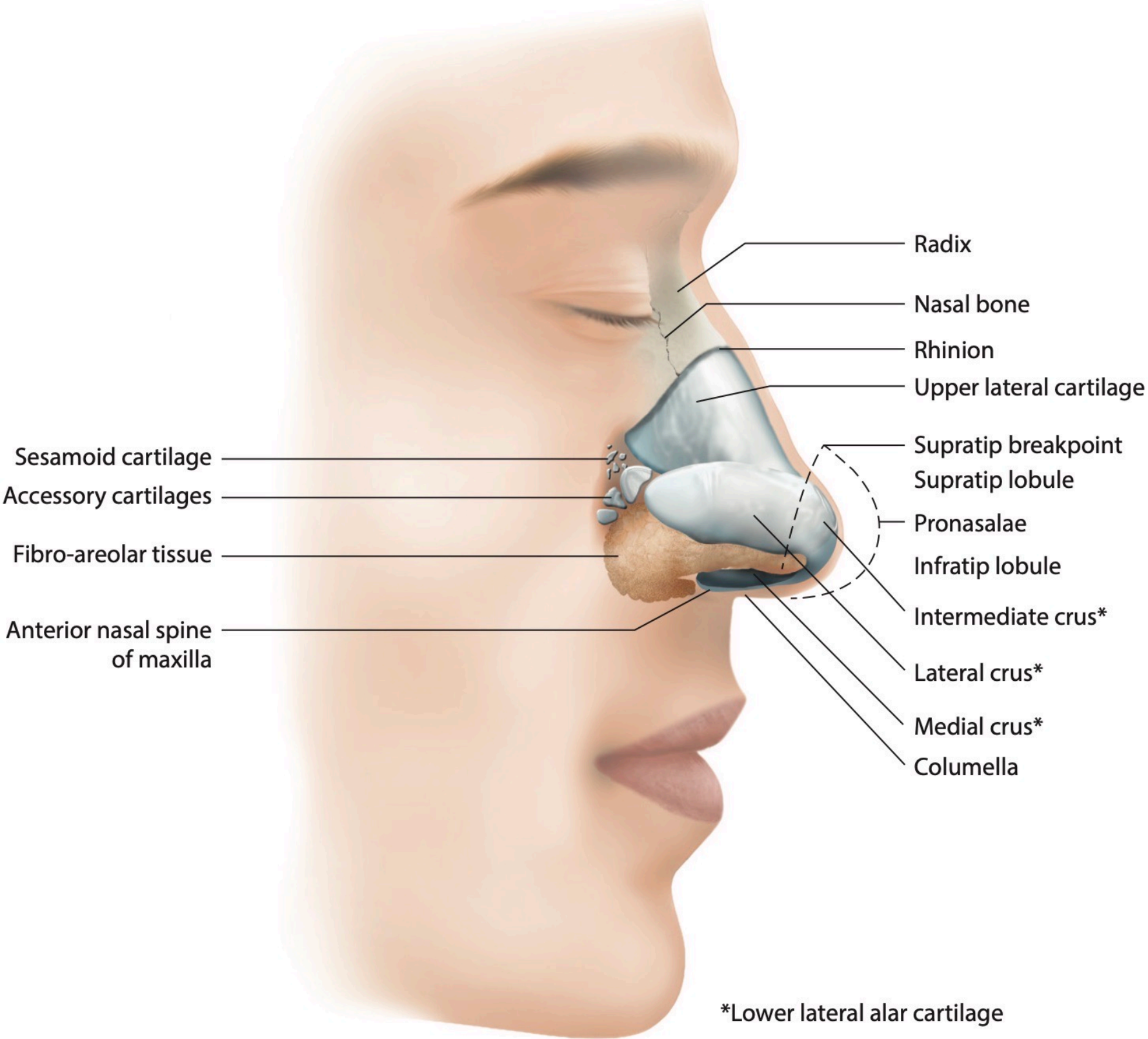
Tipica arteria facciale
Typical facial artery

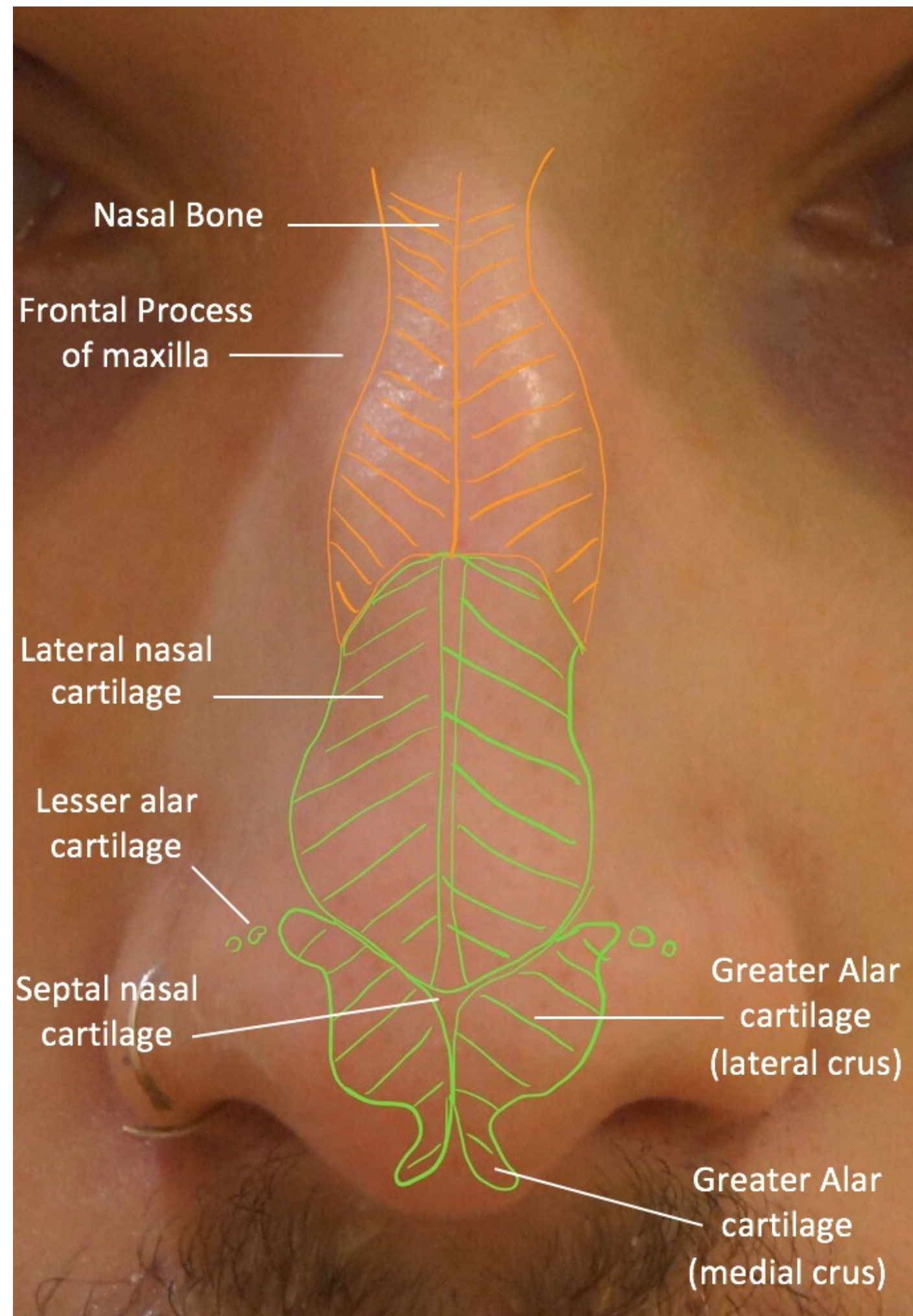
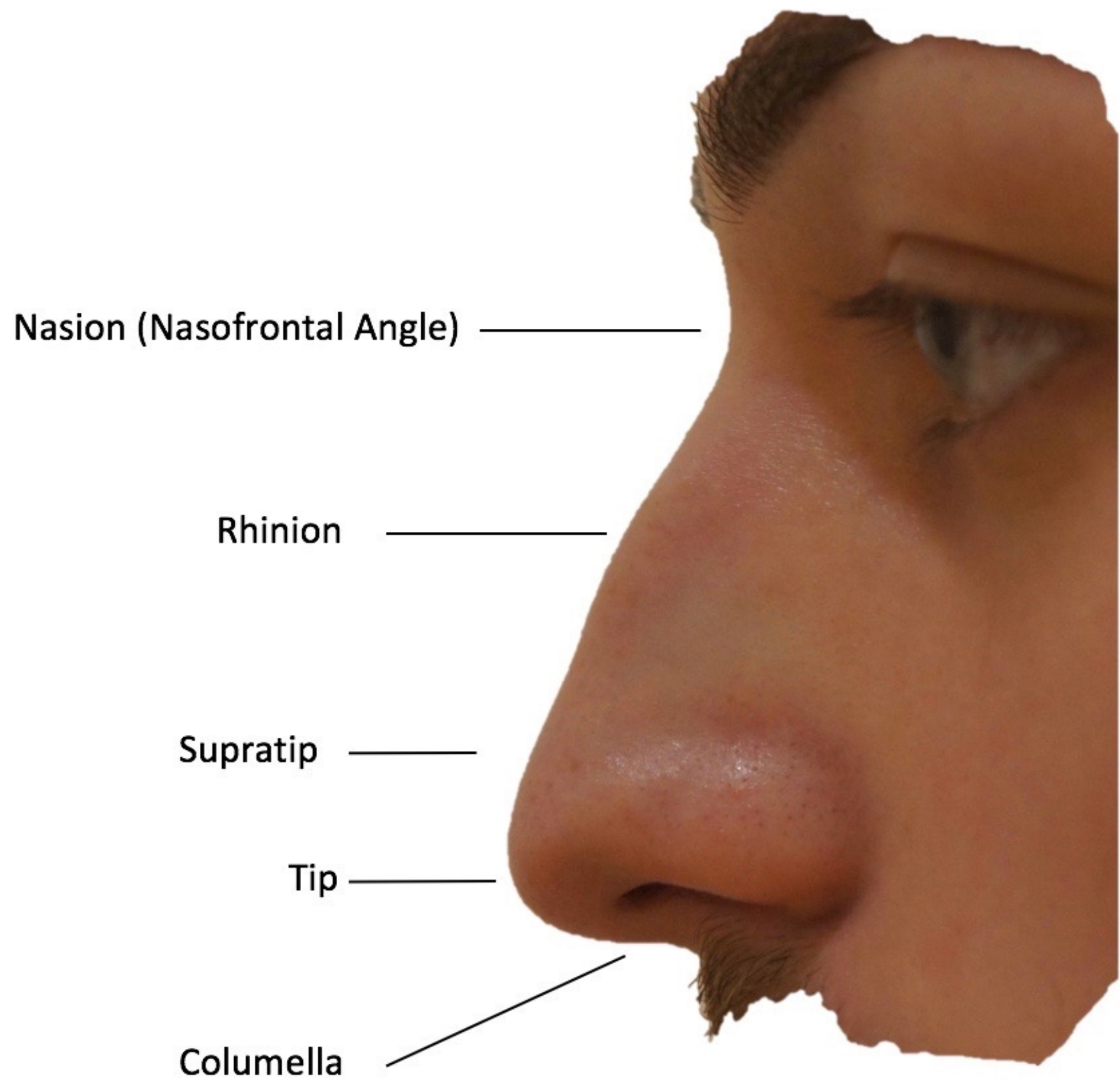


Innervation of the nose

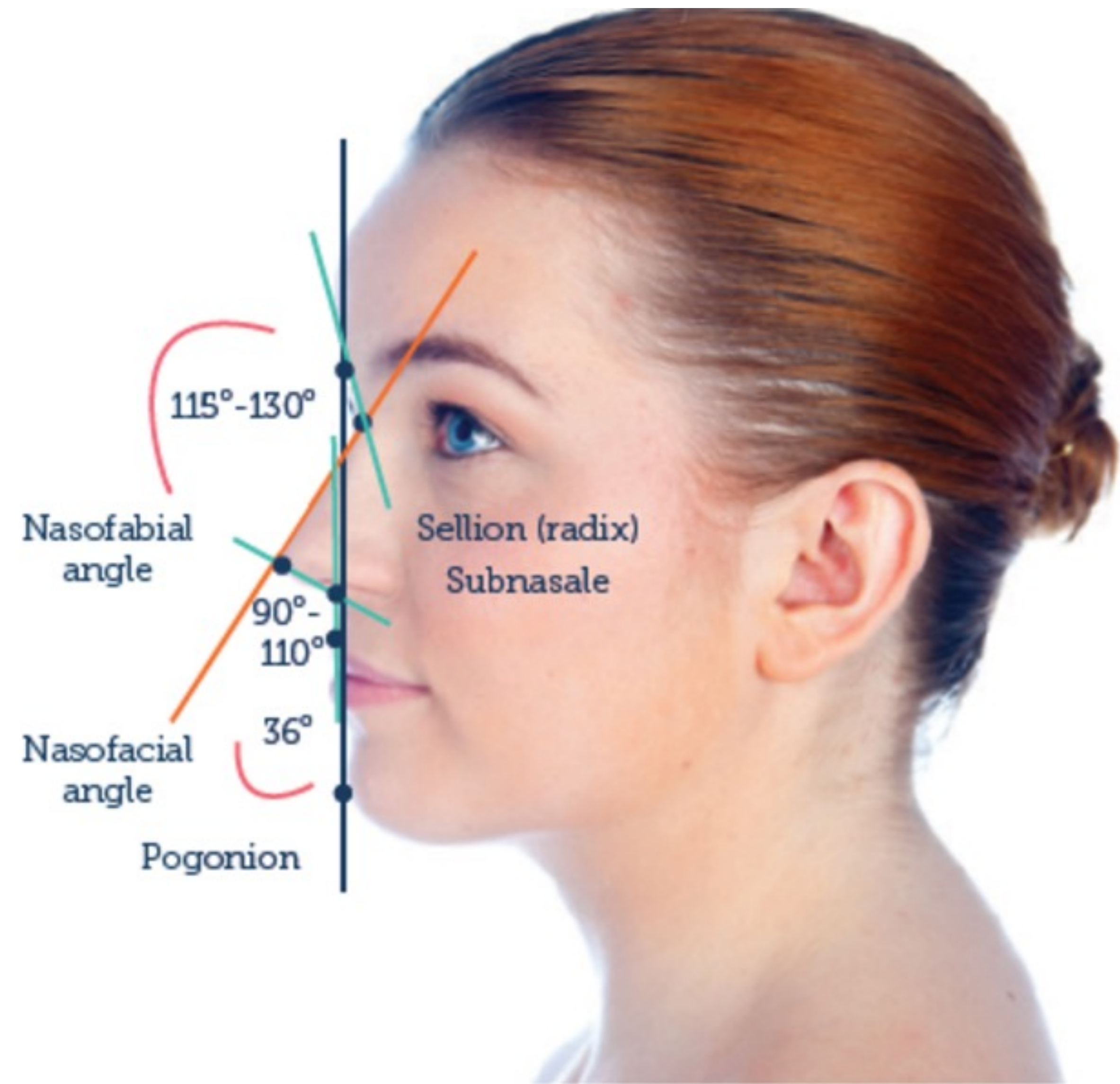


Anatomy of the nose

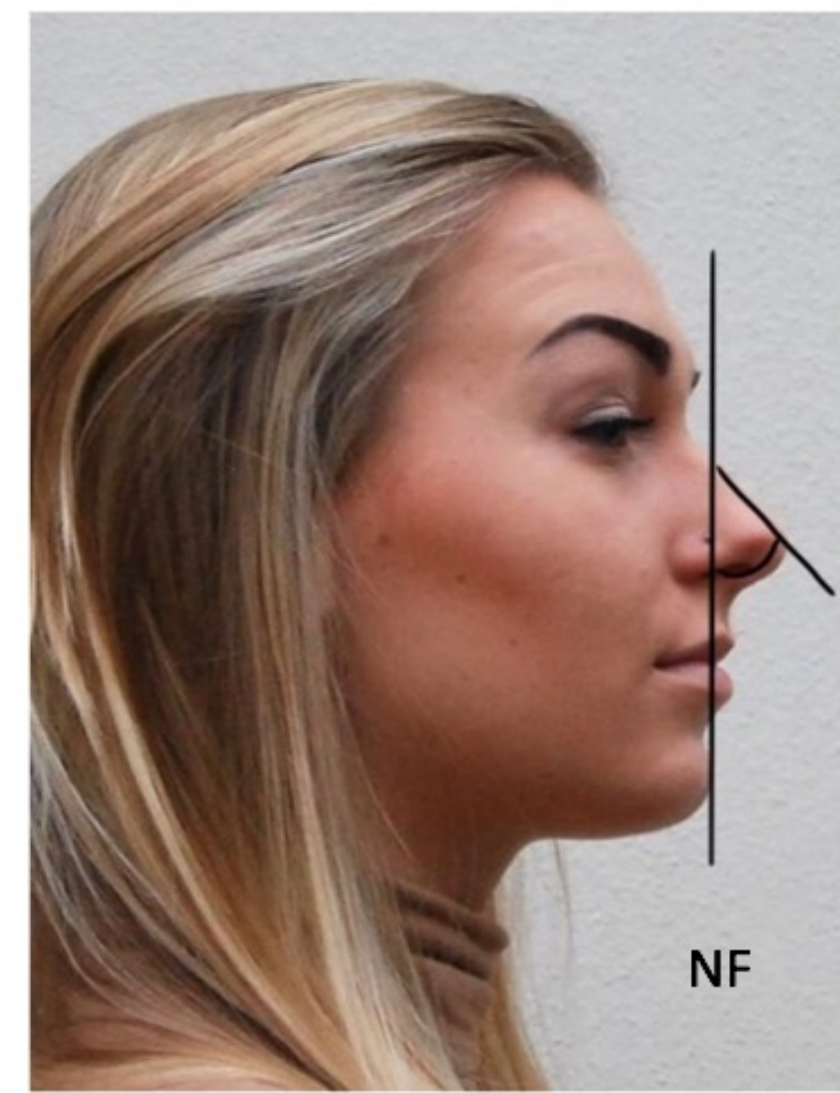
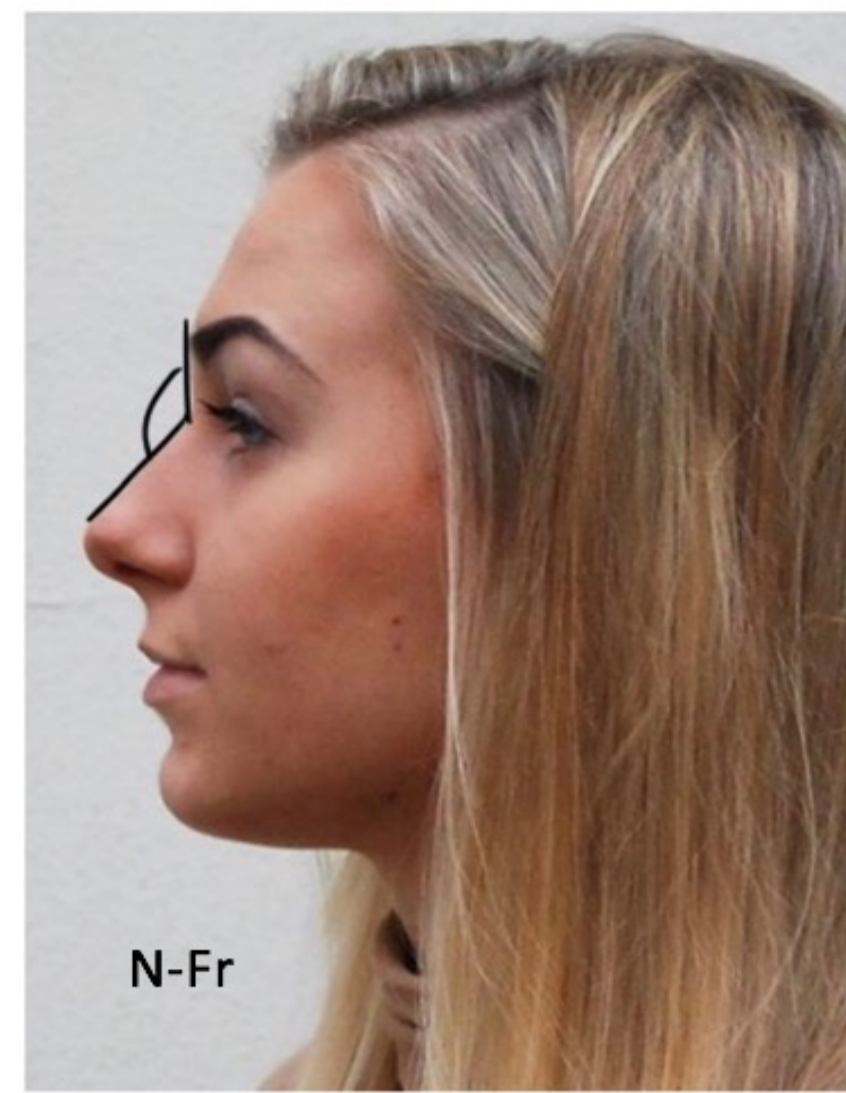




Angles of the nose

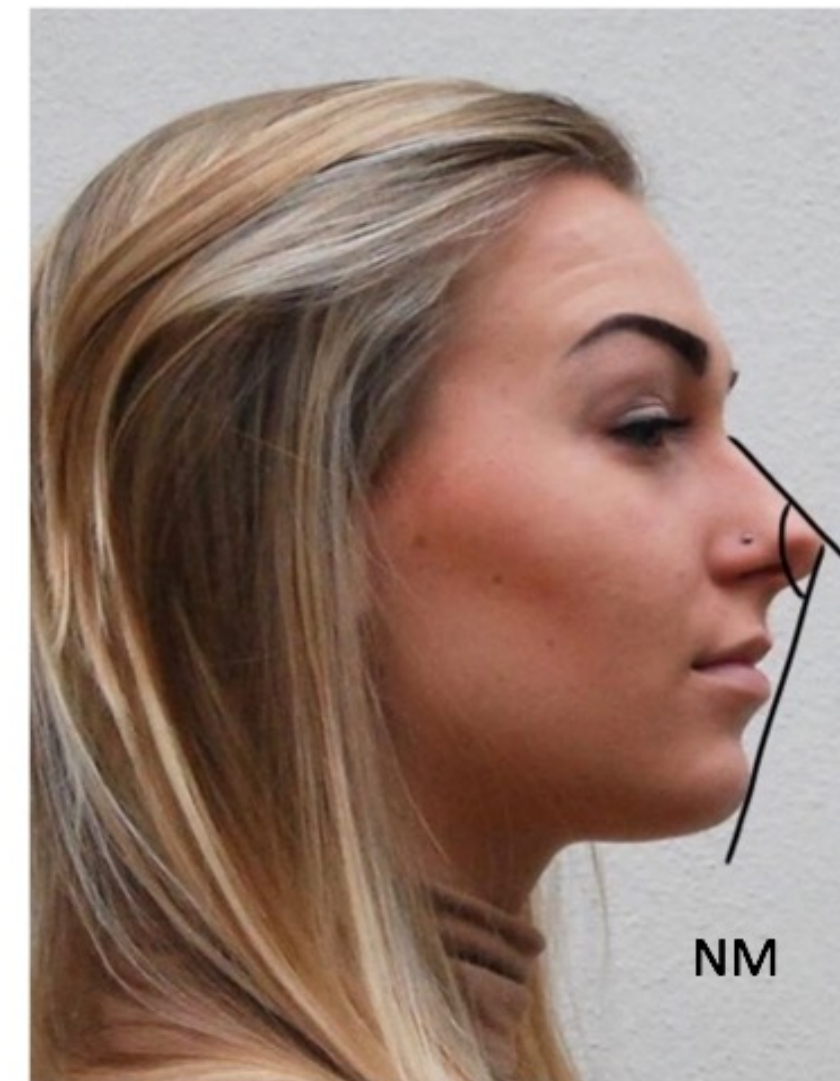
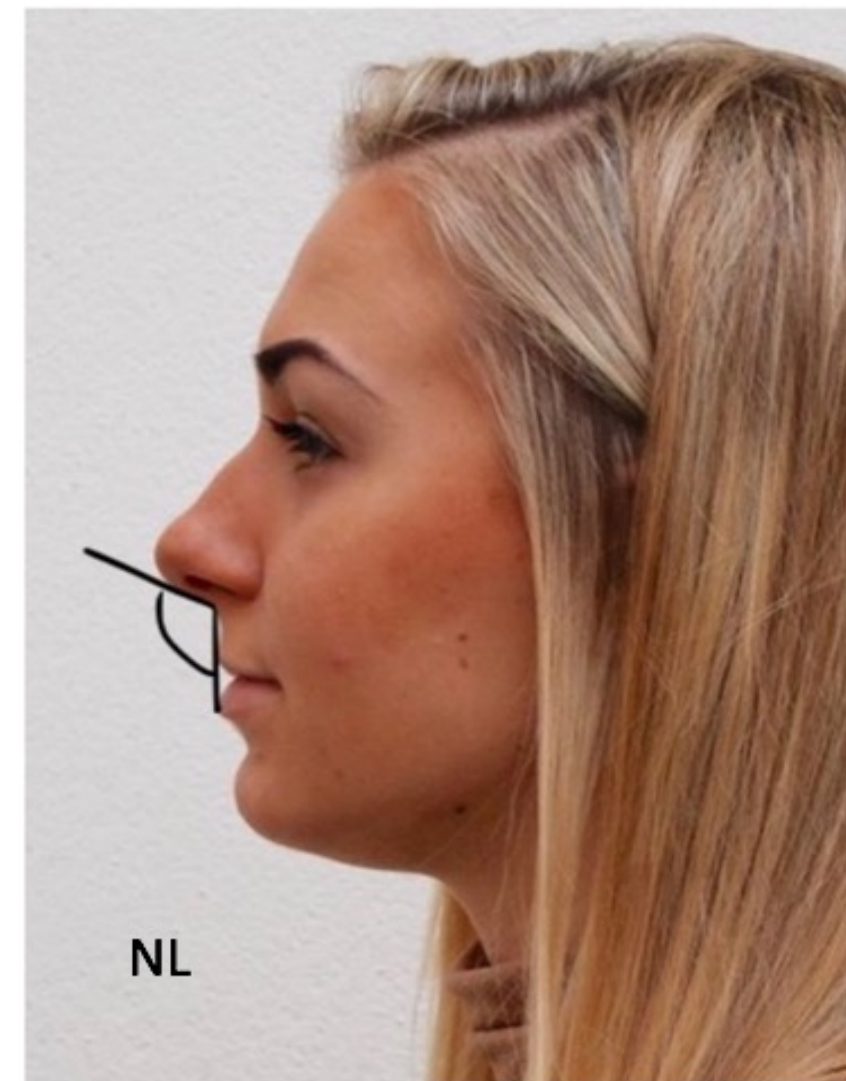


115-135 men
120-125 women



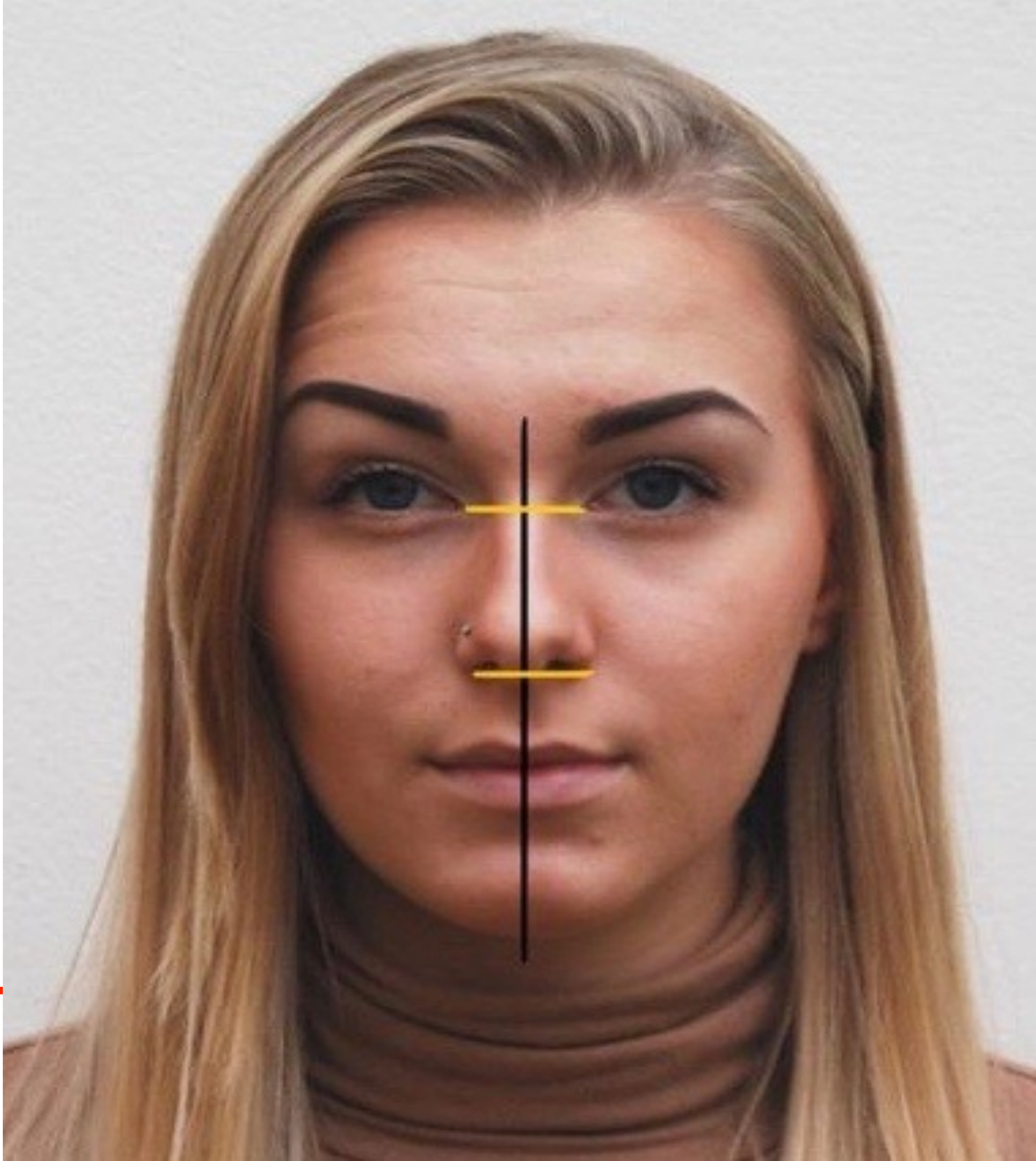
30-40 men/women

90-96 men
95-110 women



120-132 men/women

Identifying deviations



Can we treat aesthetically?

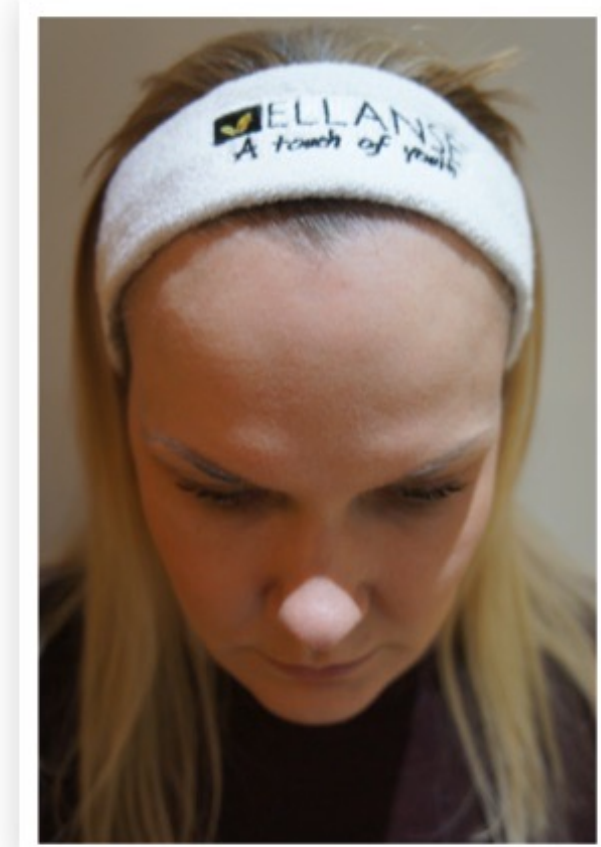
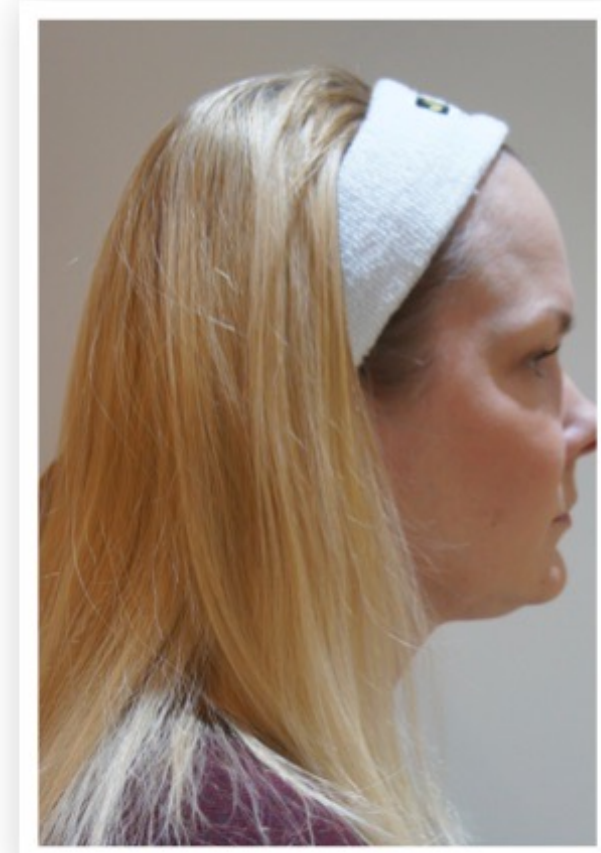
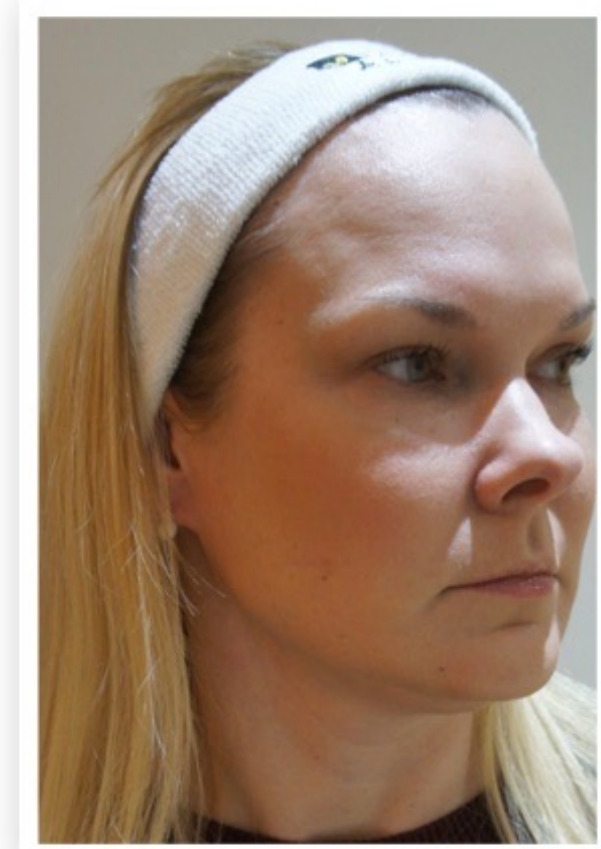
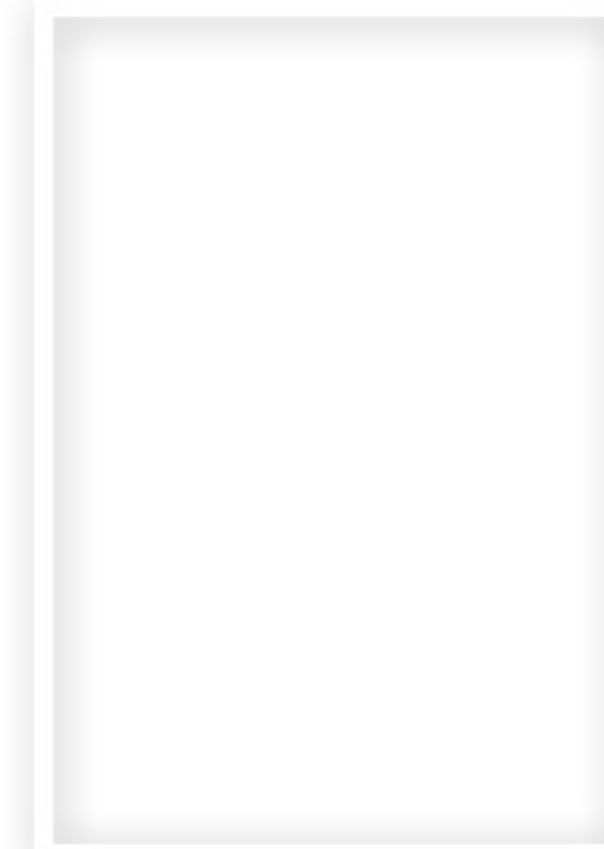
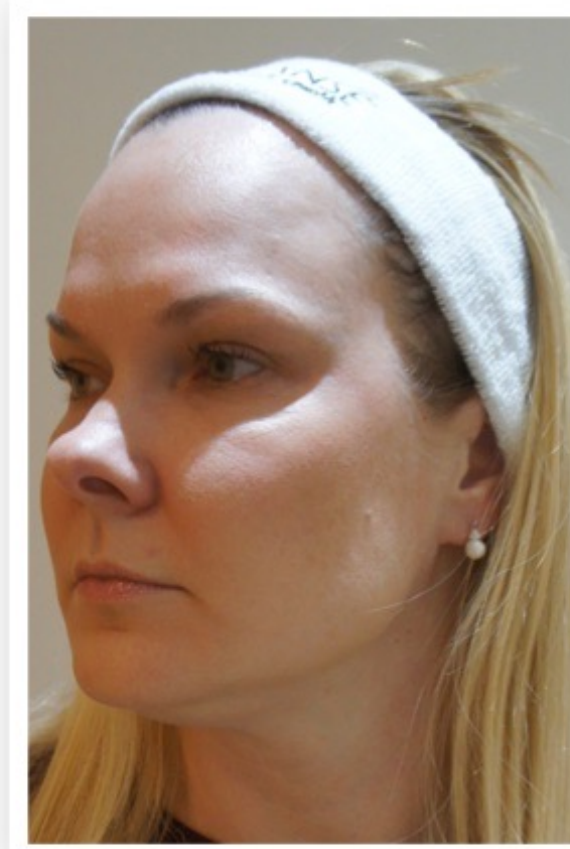


Augmenting the dorsum



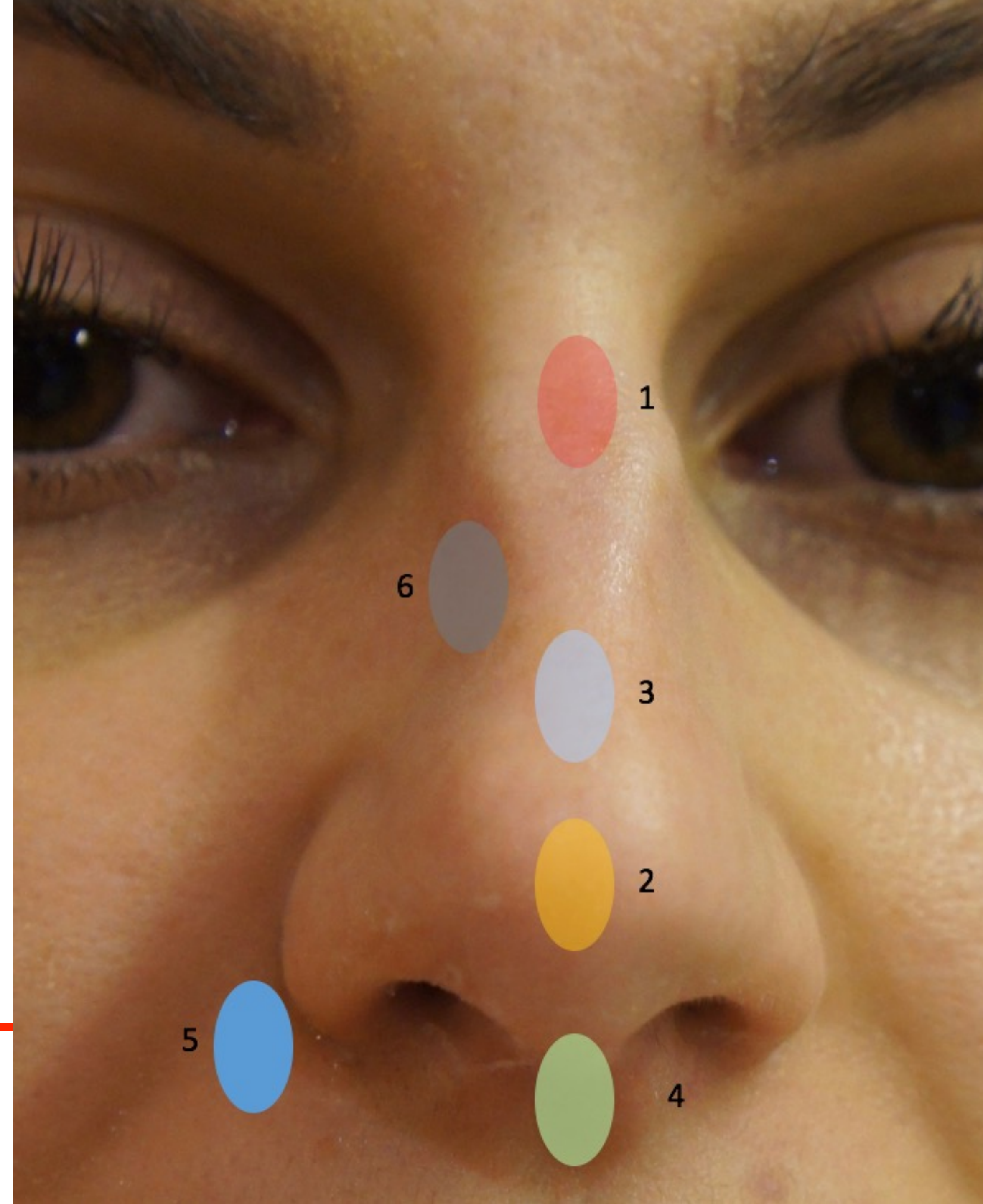
Photography

- Not in the chair
- Standing/sitting
- Plain background white/black
- 7 angles
- Consider 3 D photography
- Reproducible



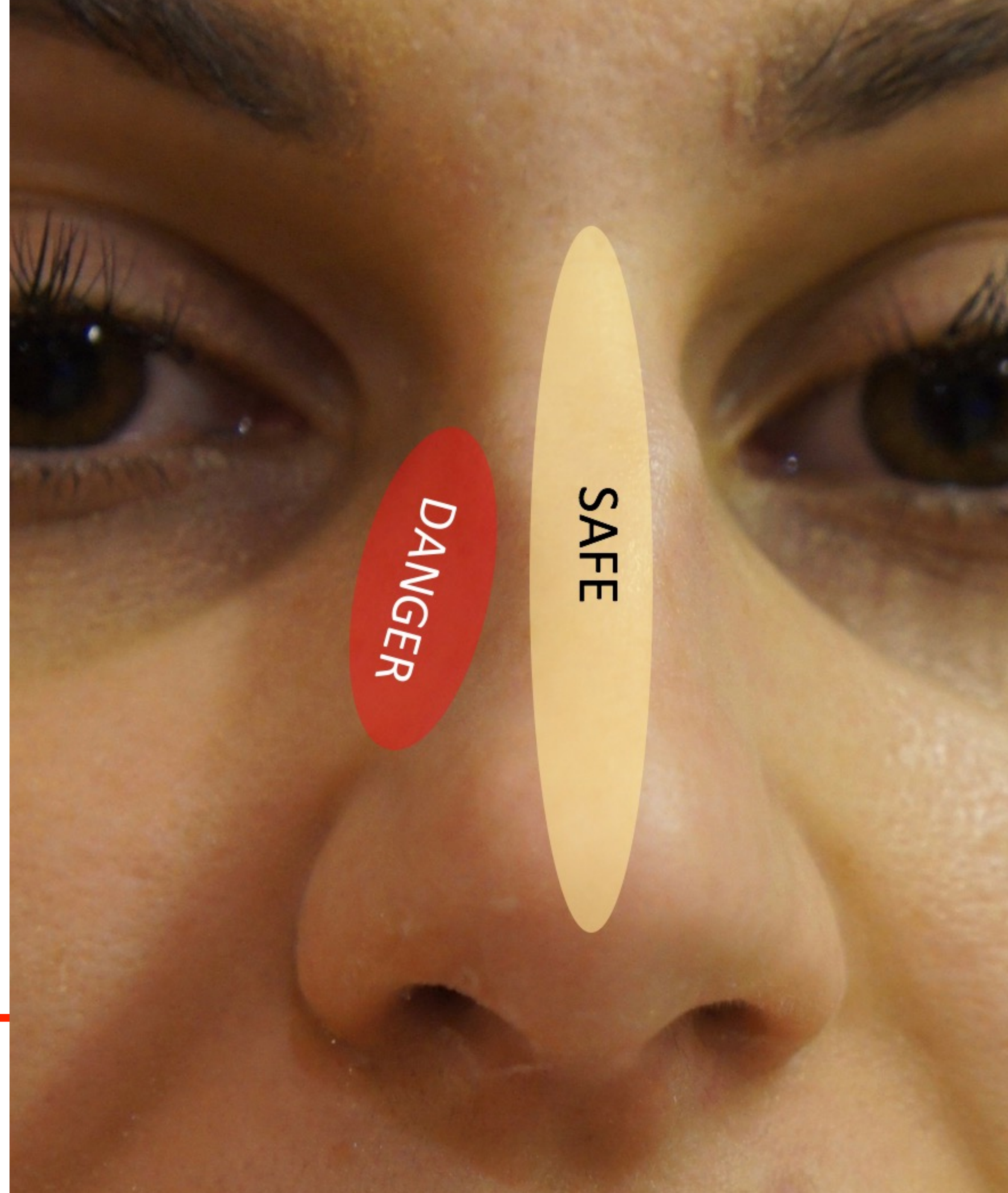
Technique

- 1) Naso frontal angle
- 2) Nasal tip
- 3) Nasal supra tip
- 4) Naso labial angle
- 5) Piriform fossa
- ~~• 6) Side of nose~~



Staying safe

- Always aspirate
- Small volumes



1 Nasofrontal

- Good for nose with large dorsum
- After filling the naso-frontal angle, nose will look straighter and smaller
- DO NOT inject too much and reduce angle too much – Roman nose
- Treat with needle or cannula



2 Tip projection

- Tip projection = Width of alar base
- If reduced nasolabial angle then need to increase tip rotation
- Increase nasal tip projection by injecting directly into the domes
- What is required augmentation of domes and or middle cura
- If only domes inject into upper portion of tip
- If whole tip then upper and lower
- Too much product = widening middle cura and boxy tip appearance
- Always inject slowly look for discolouration/blanching
- **PROBLEM AREA**



3 Supratip deformation

- Normally small amount of product to avoid distorting the supratip break
- Over filling can drop the tip



4 Nasolabial angle

- Open nasolabial angle by filling anterior nasal spine
- Injecting deeper adjacent to the nasal spine expands the inferior part of the membranous septum
- If widening of the medial Cura is desired inject into the columella base



5 Piriform fossa

- Injecting down onto bone and aspirate
- Inject into Piriform Fossa
- NOT always required
- ALWAYS ASPIRATE



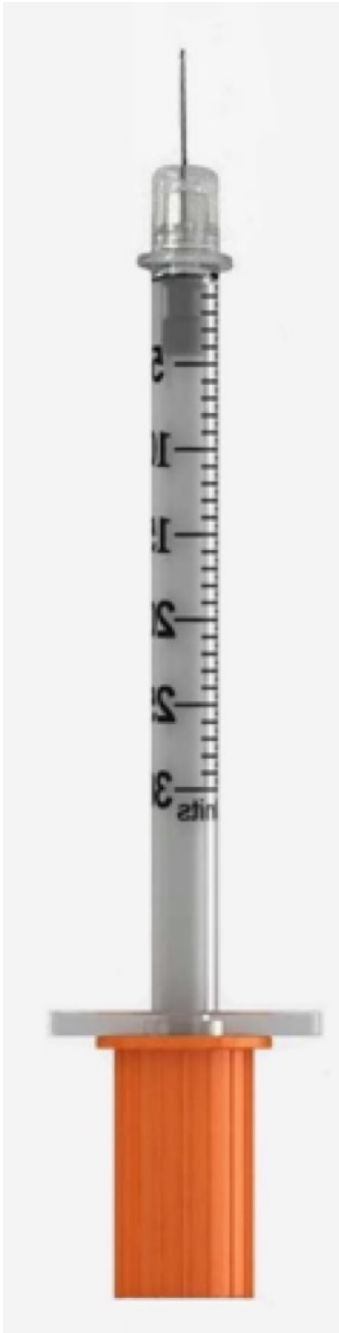
6 Side of nose

- If inject side of nose in danger area
- Inject along centre of nose and massage into side of nose
- Always aspirate
- NOT always required





Needle or Cannula?



27G
13mm

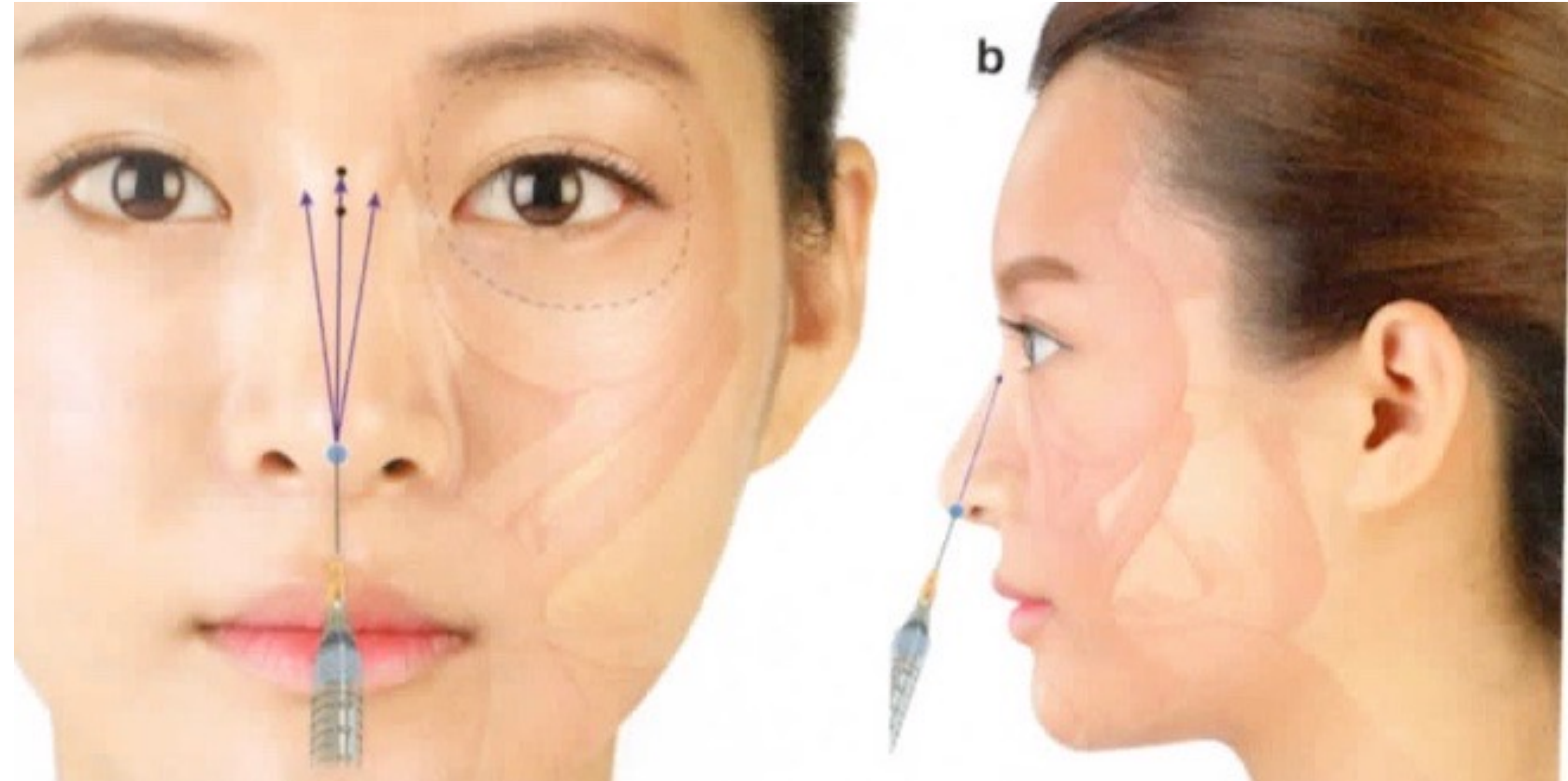


25G
50mm



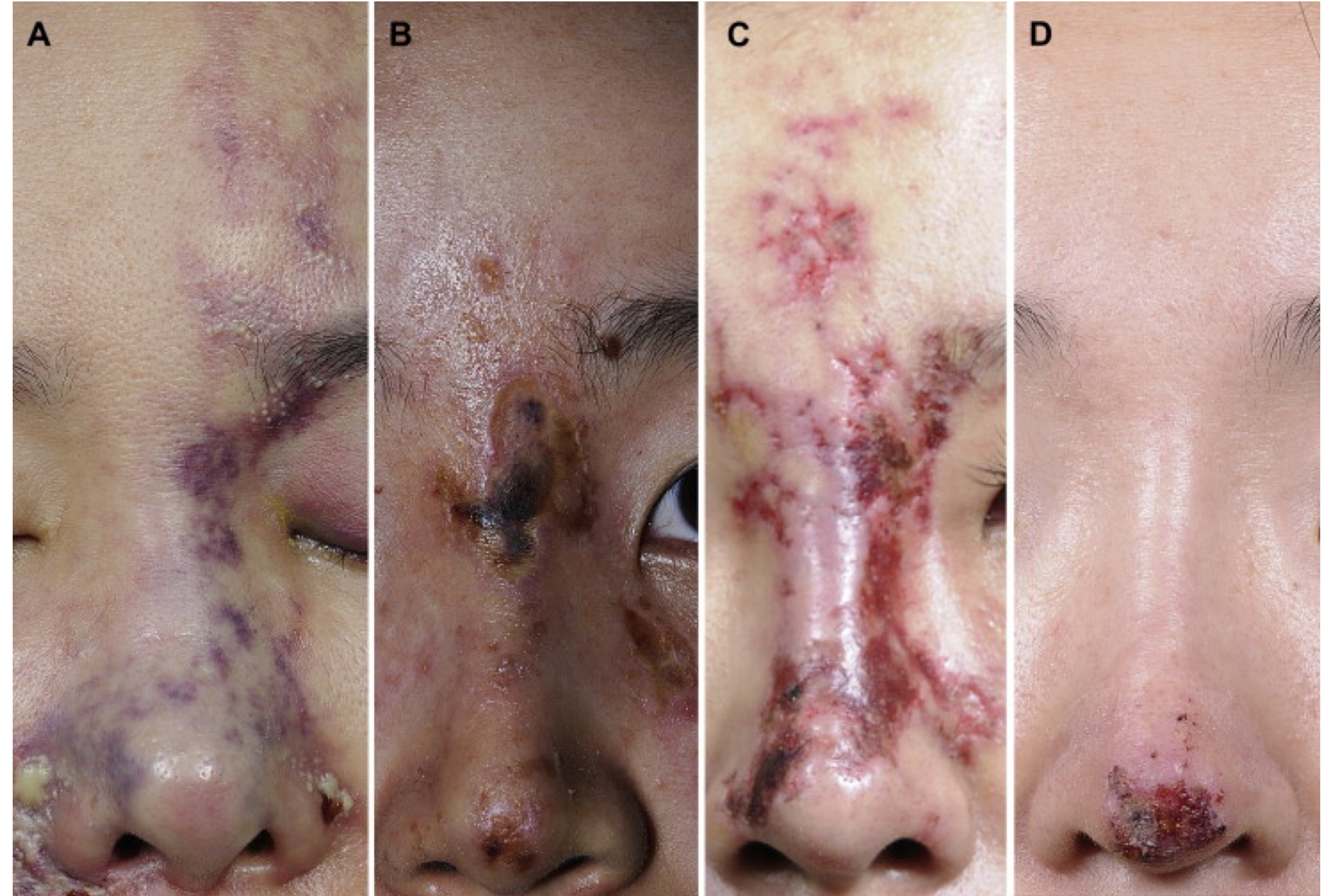
22G
50mm

Cannula



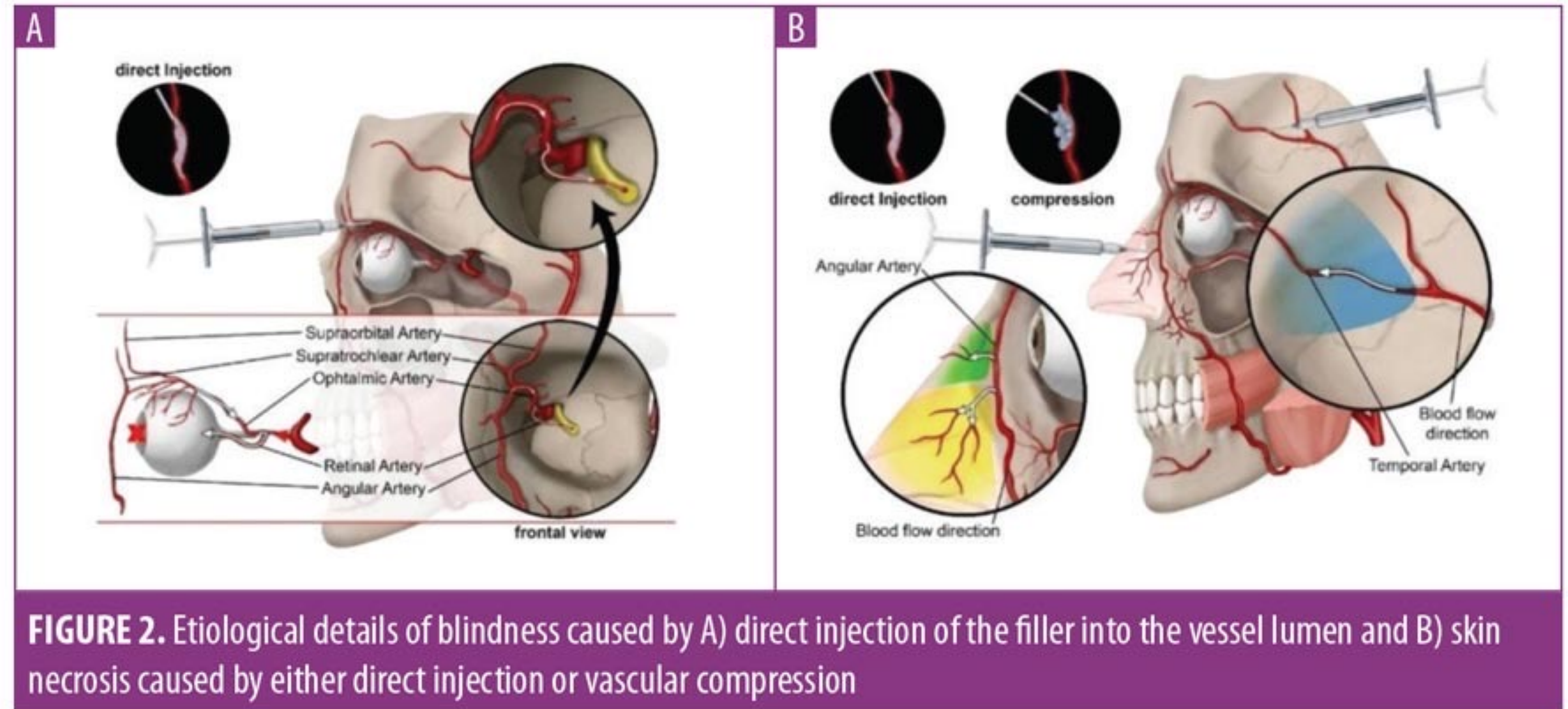
Complications

- Inter-arterial injection
- Lumps and nodules
- Tyndall effect
- Infection
- Delayed hypersensitivity



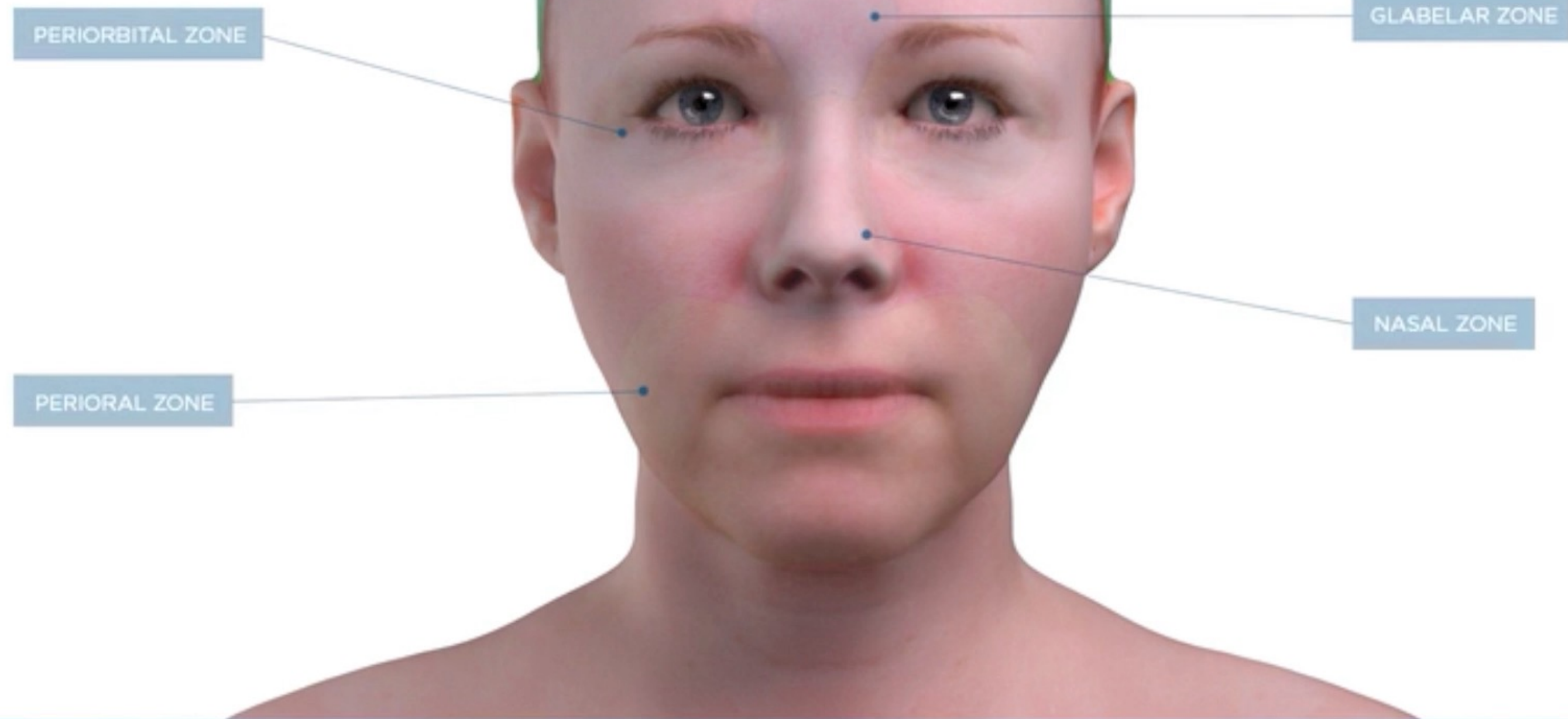
Inter arterial injection

- Pain
- Blanching of skin
- Livideo stage
- Capillary refill



3D FACIAL PROCEDURES

FACIAL ZONES



THE MOST COMMON AESTHETIC INTERVENTIONS ARE PERFORMED ON THE PERIORAL AND NASAL ZONES OF THE FACE. THESE ZONES CAN PRESENT CERTAIN COMPLICATIONS THAT ARE DIRECTLY RELATED TO THE VASCULAR ZONE THAT THEY PERTAIN TO.

Management

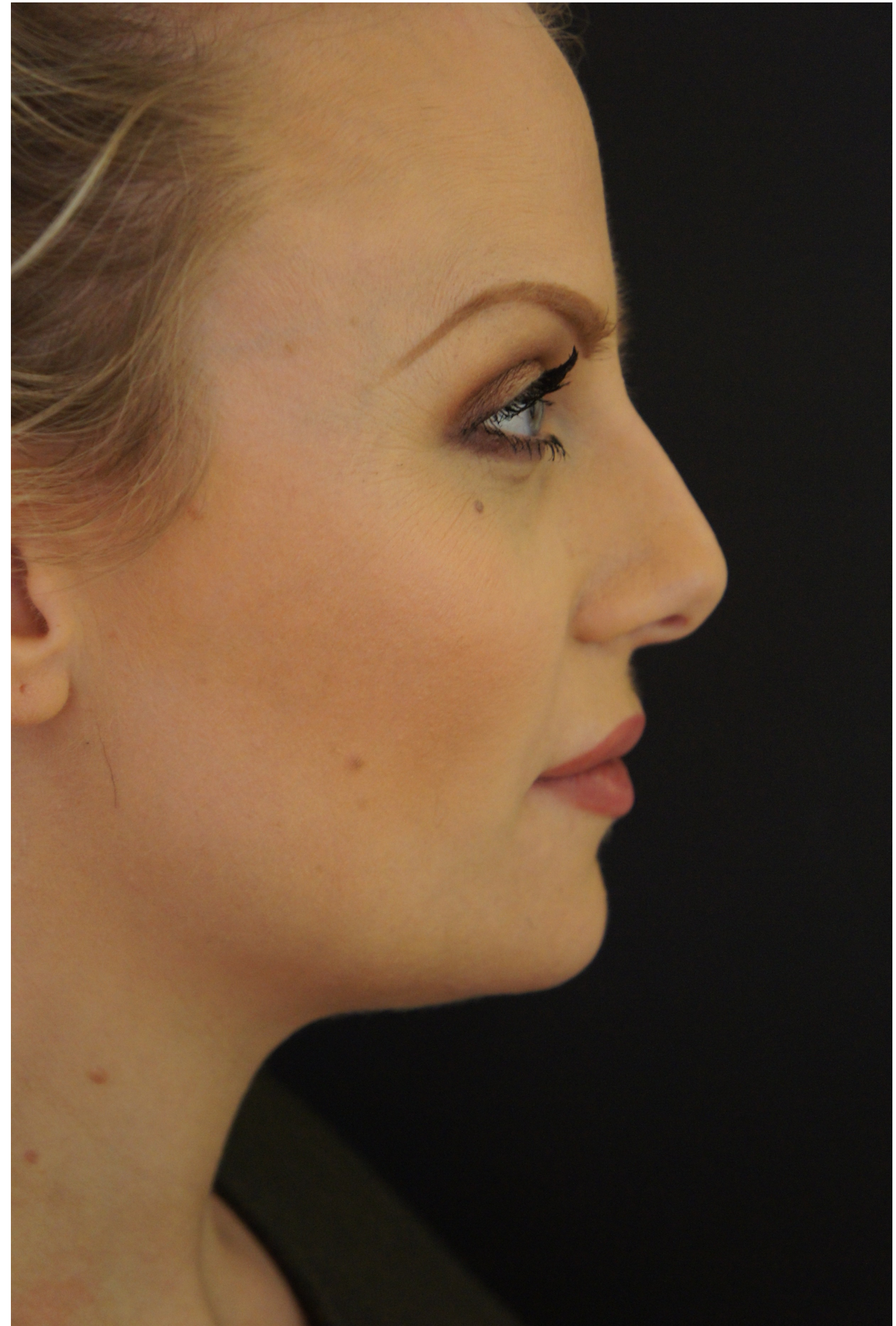
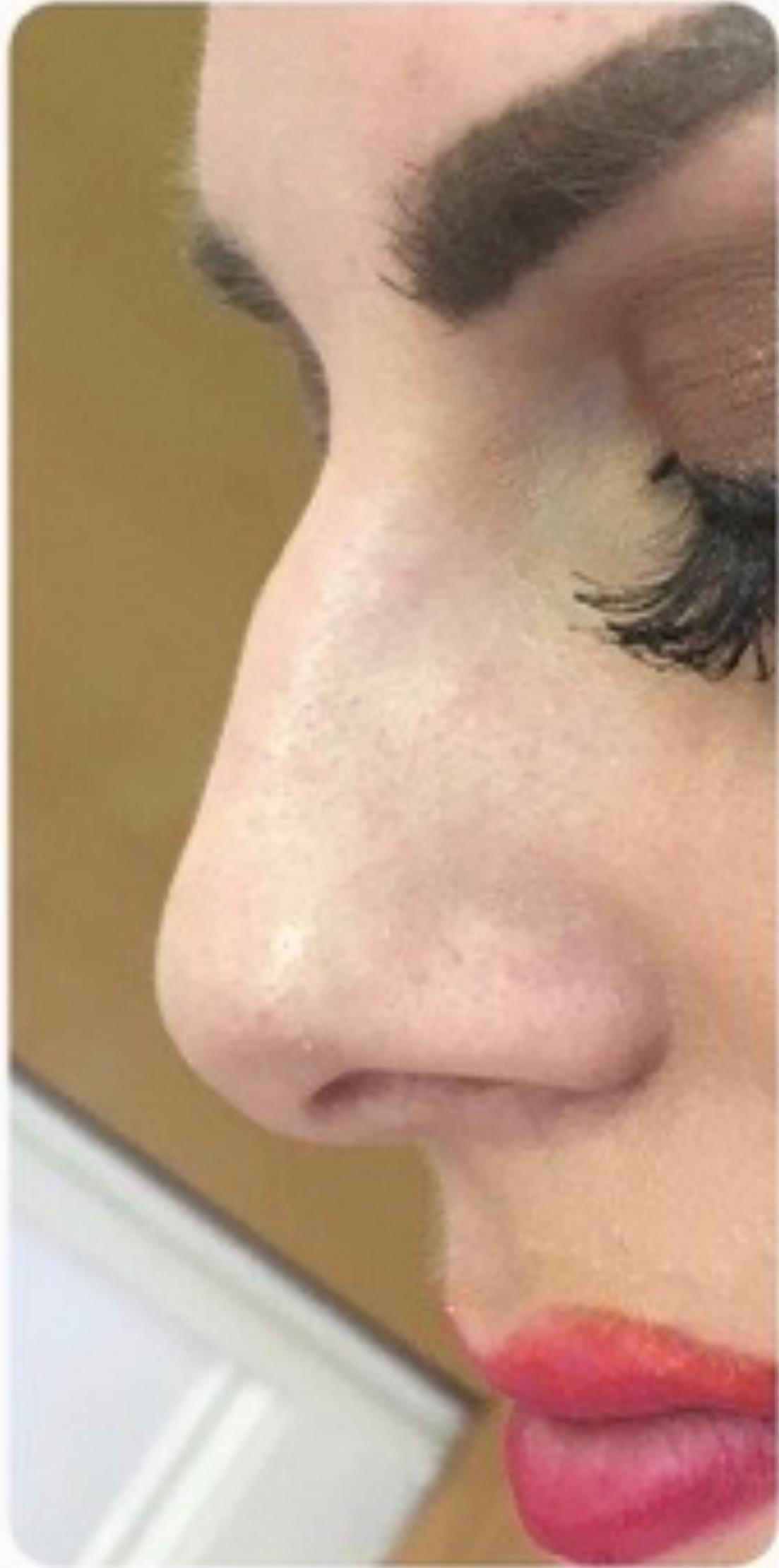
- Usual management
- Hyaluronidase
- Hyperbaric oxygen
- GTN
- Nitropaste
- Hot compress
- Inject surrounding area and ideally the vessel



Examples













Summary

