



MD AESTHETICS

Non-surgical Rhinoplasty

What is a non-surgical Rhinoplasty?

Non-surgical rhinoplasty, or “medical rhinoplasty”, “fifteen minute nose-job” & “liquid nose job”, 3-point rhinoplasty, 5-point rhinoplasty as it is alternatively referred to, is an advanced injectable treatment whereby the shape, contours and size of the nose can be altered through the injection of fillers – most notable Hyaluronic Acid (HA) filler. Botulinum toxin can also be used in conjunction with the HA filler to help deal with a hyperactive nasal tip, tip droop with smiling and nasal flaring.

People that may benefit from non-surgical rhinoplasty are those who:

1. Are very self-conscious of their nose
2. Have a prominent ‘bump’ along the top of their nose
3. Have a drooping tip of their nose that they want reshaping and/or lifting
4. Want more tip shape and projection
5. Feel their nostrils are too wide
6. Have nostrils that flare
7. Have a hypermobile tip of nose that animates when talking and/or smiling
8. want to improve self-image and esteem and gain more self-confidence as a result.

How is the procedure performed?

The procedure is carried out by way of small injections of hyaluronic acid filler, usually following the application of a Local Anaesthetic cream, and takes minutes to complete. You are able to leave clinic straight after treatment.

What happens after surgery?

You will be able to go home straight after treatment, but should not wear glasses or sun glasses for 24 hours, and should avoid rubbing your nose for a similar period of time. Further follow-ups will be arranged as necessary. You should also avoid exercise or any other activity that will raise your blood pressure for 24 hours after treatment.

Potential risks?

- *Bleeding & Haematoma:*
It is not uncommon to have a small amount of bleeding from the injection site where the needle has punctured the skin – this will stop within minutes with just gentle pressure applied. Try to avoid bending over (head down) for the first 24 hours post-treatment.
- *Infection:*
This is very uncommon and will usually manifest itself as a warm, red, swollen and possibly tender area – not to be confused with an inflammatory reaction. If the area is infected, or suspected to be so, then it is treated with a 5-to-7 day course of oral antibiotics.
- *Swelling &/or bruising:*
Swelling can occur naturally and can take a week to fully settle down. Bruising can be treated, unless contraindicated, with the use of Arnica or other such products should you wish, not to mention can be covered up with make-up. Try to keep your head up as much as possible to aid gravity in dealing with swelling.
- *Altered sensation:*
The hyaluronic filler contains lignocaine, a local anaesthetic, so it is not uncommon when injecting around the nose that not only the skin of your nose but also your upper lip can be numb for an hour or two after injection. You should therefore avoid contact with hot drinks etc. until sensation has recovered.
- *Asymmetry:*
No two sides of the lower nose/philtrum area and upper lip are ever completely symmetrical. Despite best efforts to make them as symmetrical as is possible, minor asymmetries will remain after treatment.
- *Skin necrosis:*
Very rarely the blood supply to the skin of the nose, forehead, cheek or skin between the upper lip and base of the nose can be compromised resulting in skin dying. This is managed, should it occur, with dressings until healed.
- *Under or over correction*
Occasionally the nasal anomaly can be either under or over corrected, possibly requiring 'touch up' injection.
- *Hypersensitivity (allergic) reactions*
Rapid swelling of the tissues after injection resulting in either localized or general facial oedema (swelling) is a sign of a hypersensitivity reaction and should be treated with cold compresses and antihistamines. Should it persist then it may require a short course of corticosteroids. On the rare occasion that the swelling occurs days or

months after treatment it may be a sign of a hypersensitivity reaction that is not treatable with antihistamines and requires dissolving the HA filler with hyaluronidase.

- **Nodules & granulomatous reactions**
Although not common, nodules and lumps may occur if the filler is injected too superficially or possibly as a result of an inflammatory reaction or post-infection
- **Skin colour changes**
Rarely the skin can become darker (hyper-pigmented) or lighter (hypopigmentation) as a result of reaction with the filler. If the filler is injected too close to the surface of the skin, then a blue discolouration can occur (Tyndall effect) that requires dissolving the filler with hyaluronidase injection.
- **Blindness**
A very rare and serious complication of filler injection is blindness (full or partial). This requires immediate emergency treatment of hyaluronidase injection in the area of the injection and emergency transfer to see an Ophthalmic surgeon.
- **Product displacement/migration**
If this occurs resulting in an unwanted contour/lump then it will require injection of hyaluronidase to dissolve the filler.