

# Rhinoplasty and Revision Rhinoplasty

*A Different Kind of Excellence*

## **Rhinoplasty and Revision Rhinoplasty**

These are two of Dr. Weinfeld's signature procedures. He is well trained in these techniques having completed a cosmetic surgery fellowship focused on rhinoplasty with master rhinoplasty surgeon, Bahman Guyuron, M.D. (Cleveland, OH). Dr. Weinfeld performs many primary and revision rhinoplasties every year, but treats each individual patient like it was the case of a lifetime reflecting his passion for the nose. His skills and results are drawing patients from near and far. Furthermore, he is contributing to the education of other surgeons through recent scientific publications and lectures at international meetings focused on facial surgery. Dr. Weinfeld does not dabble in rhinoplasty. Rhinoplasty and revision rhinoplasty are integral parts of his practice; he is committed to your results.

## **The Problem**

Naso-facial disharmony - the nasal appearance does not complement the face and/or does not meet the individual's desire. Breathing problems may also be present.

## **The Solution**

A well planned, well executed rhinoplasty designed to create a natural result that meets the patient's expectations. Generally this is achieved using the open approach in order to permit precision in the ultimate result. Extra-anatomic cartilage grafts are used to the reshape, restructure, and strengthen the nose in order to create a durable result in the desired form.

## **Primary Rhinoplasty**

This refers to rhinoplasty on a nose that has not had an operation before. The goals may be to reduce the size of the nose, remove a dorsal hump, make the tip smaller, elevate the tip, narrow the nostrils, or straighten the nose. These objectives can be

combined into an overall surgical plan to cater to the patients taste and to harmonize with the face.

## **Revision Rhinoplasty**

This term and secondary rhinoplasty refer to “redo” surgery. Revision rhinoplasty addresses a very complex subset of cases where the goal is correct both residual problems and new problems. The complexity stems from the fact that the tissue has internal scar and there is generally damage to existing cartilage and less cartilage available for the extra-anatomic grafts required. Thus cartilage grafts are often sought from the ears or ribs. As opposed to other surgeons, Dr. Weinfeld uses cartilage from the patient’s own body, instead of from “off the shelf” as he has had minimal resorption rates using this technique. Dr. Weinfeld, has lectured on this technique at local and international meetings and is currently writing scientific paper on his unique techniques to rib cartilage graft carving.

## **Functional Issues/Breathing Improvement**

Often people seeking cosmetic corrections of the nose have difficulty breathing through the nose. When this is the case, they are sometimes a candidate for one or more of the following procedures that address specific anatomic problems that diminish air flow: septoplasty, inferior turbinate reduction, and correction of nasal vestibular stenosis. These procedures can be combined with a cosmetic rhinoplasty to both improve breathing and appearance. Insurance will often cover the reconstructive portion of the procedure. On a case by case basis this may result in some cost savings for the cosmetic procedure but only when there is legitimate procedural overlap.

## **Recovery**

There will be splints inside and outside the nose for about one week. People often take one week off from school or work. Bruising generally starts to resolve at 7-10 days.

## **Your Surgeon, Adam Bryce Weinfeld, M.D. - The Difference**

- Years of experience
- Advanced training - only Austin plastic surgeon to complete two cosmetic surgery fellowships
- Authored three book chapters
- Authored more than 25 scientific publications on plastic surgery
- Speaks on the news routinely about plastic surgery

### **In The Media**

[www.youtube.com/watch?v=Z8zP-2KGT6g&feature=youtube\\_gdata\\_player](http://www.youtube.com/watch?v=Z8zP-2KGT6g&feature=youtube_gdata_player)

[www.youtube.com/watch?v=-DsuqCfkyR0&feature=youtube\\_gdata\\_player](http://www.youtube.com/watch?v=-DsuqCfkyR0&feature=youtube_gdata_player)

### **Results Photo Gallery**

[www.setonplasticsurgery.com/photogallery/](http://www.setonplasticsurgery.com/photogallery/)

### **Dr. Weinfeld's Scientific Publications on Cosmetic Surgery**

[www.ncbi.nlm.nih.gov/pubmed?term=weinfeld%20ab](http://www.ncbi.nlm.nih.gov/pubmed?term=weinfeld%20ab)

Weinfeld AB. Precise reduction of dorsal septal cartilage in rhinoplasty: no. 12 blade with bayonet forceps. *Aesthet Surg J.* 2012 Feb 1;32(2):250-1. PubMed PMID: 22328697.

Weinfeld AB. Chicken sternal cartilage for simulated septal cartilage graft carving: a rhinoplasty educational model. *Aesthet Surg J.* 2010 Nov-Dec;30(6):810-3. PubMed PMID: 21131454.

Guyuron B, Rowe DJ, Weinfeld AB, Eshraghi Y, Fathi A, lamphongsai S. Factors contributing to the facial aging of identical twins. *Plast Reconstr Surg*. 2009 Apr;123(4):1321-31. PubMed PMID: 19337100.

Weinfeld AB, Somia N, Codner MA. Purse-string nipple areolar reconstruction. *Ann Plast Surg*. 2008 Oct;61(4):364-7. PubMed PMID: 18812703.

Weinfeld AB, Burke R, Codner MA. The comprehensive management of chemosis following cosmetic lower blepharoplasty. *Plast Reconstr Surg*. 2008 Aug;122(2):579-86. PubMed PMID: 18626377.

Roberts TL 3rd, Weinfeld AB, Bruner TW, Nguyen K. "Universal" and ethnic ideals of beautiful buttocks are best obtained by autologous micro fat grafting and liposuction. *Clin Plast Surg*. 2006 Jul;33(3):371-94. PubMed PMID: 16818095.