

RHINOPLASTY: POST-OPERATIVE CARE PLAN

After rhinoplasty surgery it takes several weeks tissues over the nose and midface to settle, and if functional surgery has been performed, it can take weeks for nasal function, particularly flow of mucus, to return to normal. This does not mean that you will feel unwell for several weeks, but your full participation is encouraged to achieve the best outcome after this surgery. Each patient will have a slightly different recovery experience. The following is a guide to help you through this period.

IMMEDIATELY AFTER SURGERY:

- 1. BLEEDING:** It is normal to experience some bleeding during the first night and for a few days after the surgery. You will be given a nasal bolster to help absorb the mild ooze.
If steady bleeding occurs, tilt your head back slightly and breathe gently through your mouth. You may dab your nose gently with a tissue, but please do not blow your nose. Stay calm. You may use a few sprays of nasal decongestant (such as Otrivin or Drixine, available over the counter from your pharmacy) in your nose to help shrink the blood vessels. Sucking on ice will also help ease the bleeding.
If heavy or prolonged bleeding occurs, please contact your surgeon or present to the nearest emergency department.
- 2. PAIN RELIEF:** Rhinoplasty surgery is generally not especially painful. However, you may experience some nasal and facial pain or discomfort. This is often controlled adequately with paracetamol and sometimes opiate medication such as Panadeine Forte (paracetamol and codeine) or oxycodone (eg. Endone).
It is best to avoid non-steroidal anti-inflammatory medication such as aspirin, and ibuprofen (eg. Nurofen, Advil) for 10 days after surgery to minimize the risk of bleeding.
- 3. NASAL CONGESTION:** Nasal congestion can be significant if surgery of the nasal septum has been performed in addition to rhinoplasty, typically lasting up to 10 days. The impact it has on an individual varies from patient to patient. At your initial post-operative appointment, your nose may be suctioned or some medications may be prescribed to help with healing and congestion.
- 4. SALINE:** Saline nasal sprays can be started after the surgery and used as frequently as necessary to moisten the nose, and help to break down mucus and relieve congestion.
- 5. ANTIBIOTICS:** These are not always necessary, but a course may be prescribed, particularly if cartilage grafts have been used. Occasionally they may be prescribed for some patients, due to other health considerations, and your surgeon will advise you in this case.
- 6. COLD PACKS TO EYES:** These will usually be used in the immediate post-operative period to reduce potential swelling and bruising. Usually we would suggest 20 minutes on, 20 minutes off, whilst awake, but more frequent use is fine.

IN THE FIRST ONE TO TWO WEEKS:

You may feel some tenderness inside your nose due to swelling and congestion. Sometimes there may be tenderness in the front part of the nose due to an incision and a dissolvable stitch that is used, where septoplasty has been performed. Some people may find that their front teeth or upper lip may feel unusual, numb or tender, and this usually recovers over a few weeks. This is due to swelling causing irritability in the nerves that pass around the sinuses to the front teeth. The tip of the nose may also feel numb, again due to stretching of nerves that supply the skin, exiting from the nasal bones. You may have symptoms similar to having a cold, such as increased congestion and copious amounts of mucus (secreted from swollen nasal lining / mucosa). To minimize crusting and drying, saline sprays are helpful.

APPEARANCE OF YOUR NOSE AND FACE: Bruising and swelling around the eyes is expected, particularly when osteotomies (controlled fractures) are performed in the nasal bones. Even when only "soft tissue" surgery is performed, some bruising and swelling can occur. Some swelling of the upper lip may also be noticeable, especially when an "external" rhinoplasty is performed (with an incision across the columella, between nasal tip and upper lip). These typically peak at 48 hours after surgery, and then gradually subside. Swelling can be reduced by use of cold packs to the eyes for this period, and sleeping elevated (on 2 or 3 pillows). Bruising may be present for 3 weeks after surgery, but is usually easily covered with make-up after 2 weeks. (continued overleaf...)

GENERAL CARE OF YOUR NOSE: Avoid blowing your nose and straining for 1 week after your surgery. Avoid picking your nose. Ensure good ventilation during showers, keep showers short and luke warm to avoid heating up, which can increase risk of bleeding and nasal congestion. Avoid getting dressings and any nasal splint wet.

DIET: Initially you may wish to cool foods down to room temperature to avoid nasal congestion and bleeding. Chilli may cause more nasal congestion and bleeding. Otherwise there are no dietary restrictions.

SLEEP DISRUPTION: Sleeping a little elevated can be helpful to reduce congestion. You may find sleep interruption is problematic due to having a blocked nose. In this instance, you may use nasal decongestants (eg. Otrivin or Drixine spray) at night. Use should not exceed 5 days.

RETURN TO USUAL ACTIVITY AND WORK: You may feel tired and run-down for 1 to 2 weeks. Initially, resting and elevating your upper body rather than lying flat is helpful to minimise nasal congestion. Avoid heavy lifting and strenuous exercise regimens, which may precipitate bleeding. You can resume most of your usual activities by the end of one week after surgery, though you may wish to limit strenuous exercise. By 2 weeks after surgery you should be able to continue all usual activities.

SMOKING AND POLLUTION: Please refrain from smoking for 6 weeks after surgery. If your work involves significant exposure to dust, chemicals or smoke, change in work duties can be considered.

BAD BREATH AND ALTERED SMELL: These may occur during the recovery process and gradually improve as the nasal lining heals. Bad breath is usually due to mouth breathing, particularly during sleep. Altered smell (sometimes an unpleasant smell) is a combination of swollen nasal lining and static mucus, which can be helped by use of saline sprays.

SUTURES: When an external approach to a rhinoplasty procedure has been used, there will be a number of sutures used to close the incision across the columella (the skin between nasal tip and upper lip). These are normally removed after 7 days. Internal incisions are typically closed using dissolvable sutures that do not require any specific attention.

NASAL SPLINT: A nasal splint is typically used to support the nasal skin and soft tissues, as well as nasal bones. This may be either fashioned using plaster of Paris, or a malleable thermoplastic, and is secured with adhesive tapes. The splint is usually removed 7 days after surgery. You should avoid getting the tapes and splint wet. If the splint does come away after several days (prior to seeing your surgeon) it does not need to be replaced and can be discarded.

FOLLOW UP APPOINTMENT: You will normally have a return visit to our office at 1 week after surgery, 5 weeks after surgery, and then 9 months later to assess long term stability and results.

LONGER TERM HEALING:

OEDEMA: Swelling of the tissues over the nose will be evident once the splint is removed. This gradually subsides over a few weeks, and the skin contracts around the nasal skeleton. The initial puffiness of the midface settles and the initial result is evident about 4 weeks after surgery.

REMODELLING: Tissues that are interrupted by surgery gradually remodel as scar tissue forms and contracts, the majority occurring over a 12 month period. Usually this remodelling softens some of the feature of the nose, and is for the better. Occasionally, this leads to changes that are of concern to the patient or surgeon. Such changes may be addressed by revision surgery (about 10%), but we would always advocate waiting a good 12 months prior to any further intervention.

AVOID NASAL TRAUMA: Particularly if nasal bones are manipulated with osteotomies (controlled fractures) - it takes 6 weeks for bone to reach significant strength and up to 12 weeks to heal completely. It is important to avoid any situations where nasal trauma is possible for at least the first 6 weeks after surgery.

AT ANY TIME:

1. Call our office if you experience any of the following:
 - Brisk bleeding from your nose or mouth
 - Severe pain, unresponsive to prescribed analgesics
 - Persistent fever
 - Foul smell
 - Severe headache or neck stiffness
2. If you need to contact someone after hours, our mobile phone numbers can be found on our answering service, in the White Pages, and on the paperwork provided to you pre-operatively. In an emergency, please dial 000 for an ambulance to your nearest hospital.