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Short Communication

Principles associated with rhinoplasty in plastic surgery

Yahya Alwatari*

Department of Maxillofacial Surgery, Peking University, Beijing, China.

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INTRODUCTION

Rhinoplastic reconstruction is used to repair the shape and functionality of the nose, whereas cosmetic surgery is used to alter the nose's appearance. Nasal reconstruction is most popularly known as nose job (Fischer H, 2008). This is a plastic surgery treatment for modifying and repairing the nose. It aims to treat nasal damage to brought on by a variety of traumas are such as blunt, penetrating, and blast-related trauma. For respiratory issues, congenital deformities, and unsuccessful primary rhinoplasties can all be treated with reconstructive surgery. Rhinoplasty can address injuries, congenital defects, or other issues that impede breathing are such as a deviated nasal septum or a sinus disease. It can also remove a hump; narrow the nostril width, to adjust the angle between the nose and the mouth that remove bumps from the nose. A septoplasty is surgery that is limited to the septum (Gunter JP, 1997).

In closed rhinoplasty and open rhinoplasty surgeries is to create a functional, aesthetically pleasing, and facially proportionate nose, a plastic surgeon, otolaryngologist, or oral and maxillofacial surgeon are first separate the nasal skin and soft tissues from the nasal framework, alter them as needed for form and function, suture the incisions by using tissue glue, and then apply either a package or a stent to paralyse the altered nose to ensure the proper healing of the surgical incision.

The basic operating principles of rhinoplastic reconstruction for the treatment and techniques of used to produce the best possible functional and attractive result, for serve as struct for surgical reconstruction of a nose (Rohrich RJ, 2002). Therefore, a new nasal subunit with essentially normal looking appearance can be created by a few procedural steps by using intranasal tissues to fix mucosa abnormalities and cartilage battens to support against tissue contraction and depression. The construction of axial skin flaps are using three-dimensional templates are taken from the topographic components of the nose, and the fine tuning of the ensuing by correction of subcutaneous for sculpting of bone, cartilage, and flesh. Reconstructed nasal subunit is not a

nose in the traditional sense, but rather a collagen-glued collage of forehead skin, cheek skin, mucosa, vestibular lining, nasal septum, and pieces of ear cartilage that is only perceived as a nose because its shape, skin tone, and texture are similar to the original nose (Sawh-Martinez R, 2019). The plastic surgeon's ultimate goal in a nasal reconstruction is to reproduce the patients of natural noseshadows, that contours, skin colour, and skin texture.

The normal nose is the three-dimensional template for replacing the missing parts of a nose that are aesthetic nasal subunit and aesthetic nasal segment. The surgically reconstructing the patient's physiognomy are such as flaps of skin tissue, bone, and cartilage. The surgeon uses the healthy, opposite (contralateral) side of the nose as a 3D model is to fabricate the anatomic template for recreating the deformed nasal subunit by moulding the mutable template material directly upon the normal, by undamaged nasal anatomy. This technique is used to repair partial nasal defects (wounds) are such as alar lobule by the dome above the nostrils (WASHIO H, 1969). The template for a complete nasal reconstruction may be derived from daily observations of normal nose.

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 $[*] Corresponding \ author. \ Yahya \ Alwatari, E-mail: alwatari@gmail.com.$