

Deviated Nose

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Objectives: 1) know anatomic characteristics of deviated noses. 2) Identify risk factors and pitfalls in correction of deviated noses. 3) Select the best technique for each type of deviated and crooked noses.

Abstract: Deviated nose is defined as a deviation of the external nasal framework, which is almost always accompanied by deviations in the nasal septum. Most patients have problems both in form and function. Establishing stable and long-term results has been a nightmare even for experienced surgeons. Analyzing the underlying anatomy in each case is important to establish the plan of treatment which differs in every case. Deviation could be noted in bony upper third part of the nose, cartilaginous middle third or combination of both and may extend to the lower third or lobule. All types of deviated noses are operated in one stage with correction of pyramid and septum. Correction of form and function includes restoration of straight dorsum, reducing asymmetries and providing functionally patent nasal valve. It involves correction of both intrinsic and extrinsic forces which are responsible for deviation. Wide exposure and extensive release of deviated cartilages would help to minimize extrinsic forces over the deviated pyramid and septum. It is especially important in the case of deviation of cartilaginous septum. Proper cuts and resections of cartilage and insertion of resected materials as different types of grafts are the basis of the most techniques which were described in this problem. Deviated nose is a complex deformity extending from the radix to the tip. Of course a successful surgery is not possible without correction of tip deformities and asymmetries as an important part of the procedure. A systematic approach including various methods in septorhinoplasty for deviated and crooked noses is addressed.