

Non-surgical rhinoplasty: less is more

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Understand possible indications for non-surgical rhinoplasty; learn the proper technique and prevention of possible complications; know indications, advantages, and disadvantages of non-surgical rhinoplasty.

Nonsurgical correction of the nose shape is an exciting procedure that is considered as an alternative to traditional rhinoplasty procedures in some cases ranging from minimal to severe nasal shape and breathing problems. Besides the time and cost effectiveness, these procedures are very flexible, repeatable and have less complications if meticulous techniques applied.

One hundred eighty-five selected patients underwent simple but delicate techniques to change the shape of the nose by means of needles and a wide range of non-permanent dermal fillers. Various conditions which were candidate of primary and revision rhinoplasty underwent non-surgical nasal reconstruction through a wide range of techniques to improve form and function. Non-surgical rhinoplasty could be used to camouflage defects or irregularities, correct deviations and adjust proportions such as upward tip rotation and adjusting nasofacial angle. The procedures were performed without the use of general or infiltration anesthesia.

Many patients were excited by observing the new shape of their noses in just less than fifteen minutes. Some cases had improvement in function other than form. The duration of each procedure was less than fifteen minutes in most of cases. Outcomes were satisfactory and there was no after procedure care and the patient could attend the work just the day after the procedure.

Non-surgical rhinoplasty procedures are an easy, safe and cost-effective method for improving nasal form and function in primary and revision cases. However, it should be done very cautiously by an expert surgeon with ample experiences on non-surgical correction of the nose to make this alternative technique in selected patients, mimicking the results which could be obtained by a complete surgical procedure.