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<p>Renewed interest in dorsal preservation rhinoplasty (DPR) stems from theoretic esthetic and functional advantages over conventional hump resection. DPR fundamentally consists of en bloc dorsal lowering via a combined septal resection and mobilization of the bony pyramid. Several technical modifications exist, allowing for the expansion of DPR indications. Although studies suggest success with these techniques, comparative data to conventional hump resection are limited. Challenges and stigmata of DPR include a radix step-off, hump recurrence, supratip saddling, and widening of the midvault. The fusion of structural techniques with preservation ideology will facilitate the incorporation of DPR into clinical practice.</p>	
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<p>The rapid resurgence of interest in performance of dorsal preservation (DP) rhinoplasty techniques in recent years has come with scarcity of data for long-term outcomes. In this article, the authors aim to contribute to preservation rhinoplasty (PR) literature by providing long-term follow-up with dorsal preservation, specifically presenting data related to superior strip DP functional and esthetic complications, followed by a detailed analysis of the same.</p>	
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destabilizing maneuvers in the architecture of the nasal pyramid. This is one of the reasons why these approaches did not have a popular acceptance in the 1960s and 1970s. More recently, the surgeon interested in preservation rhinoplasty has the possibility to do so with surface techniques with more control and, if needed, is easily converted to the standard structured techniques if the surgeon does not feel safe with the procedure.

Open Preservation Rhinoplasty Using the Piezo Electric Instrument

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Abdulkadir Goksel and Khanh Ngoc Tran

Preservation rhinoplasty represents a growing shift in rhinoplasty philosophy toward preserving structurally sound anatomy and reshaping existing nasal structures into esthetic and functional ideals. The preservation technique is made more accessible by the open approach, which provides an opportunity for the deformity to be clearly visualized from the tip of the nose to the dorsum, as well as enables greater ease of powered instrument access. The addition of the Piezo-electric device, with its range of rhinoplasty inserts, enables more precise and accurate management of the osseocartilaginous vault, reduces the risk of surface irregularities, and hence optimizes the overall surgical outcome.

My First Twenty Rhinoplasties Using Dorsal Preservation Techniques

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Dean M. Toriumi

 Video content accompanies this article at <http://www.facialplastic.theclinics.com>.

Dorsal preservation involves eliminating the dorsal hump by performing reduction while preserving the patient's natural dorsal anatomy. This can involve surface manipulation or foundational techniques or a combination of both. When surgeons begin performing dorsal preservation, there are important factors to consider to avoid complications. In an effort to inform surgeons on how to avoid unfavorable outcomes, I will discuss my first 20 cases where I performed dorsal preservation. I review less than ideal outcomes and how these issues can be prevented.

"Managing the Severe Septal Deviation Using Dorsal Preservation"

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Valerio Finocchi and Valentino Vellone

 Video content accompanies this article at <http://www.facialplastic.theclinics.com>.

Severe septal deviations are a constant challenge for rhinosurgeons. As the septum is the most important pillar of the nasal framework, septal deformities require correction to insure a straight nose. The septum should be on the midline without any tension to ensure a correct healing of the external nasal pyramid. In certain cases, the association of a correct septoplasty and dorsal preservation allows the treatment of the crooked nose and at the same time gives natural results with rapid postoperative recovery. The aim of this article was to underline the versatility of the dorsal preservation technique for the correction of severe septal deviation.

Subdorsal Cantilever Graft: Indications and Technique

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Dean M. Toriumi and Milos Kovacevic

 Video content accompanies this article at <http://www.facialplastic.theclinics.com>.

The subdorsal cantilever graft (SDCG) is a costal cartilage graft that is positioned below the nasal dorsum to control the position of the nasal bones and middle nasal vault. SDCG type A is used to raise the middle nasal vault and caudal nasal bones to

correct the saddle nose deformity. SDCG type B can be used to raise the entire dorsum of the nose (radix, bony vault, and middle vault) in the ethnic augmentation rhinoplasty patient. This article will discuss the indications and technique of the SDCG in dorsal preservation rhinoplasty.

Brazilian Approach to Dorsum Preservation

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Mario Bazanelli Junqueira Ferraz, Wilson J. Dewes, Luiz Carlos Ishida, and Guilherme Constante Preis Sella

Brazil has always been a fertile place for plastic surgery techniques, especially cosmetic, and it was not different in rhinoplasty. In Brazil surgeons started using the dorsal preservation rhinoplasty in the 1970s. Techniques have changed, the problems and contraindications were challenged, and solutions proposed. As a result, indications were expanded to almost every kind of nose. Surface working executed with power tools, such as the piezoelectric device and the power drill, complemented the techniques and allowed for refinement in execution. Today the Brazilian preservation techniques are adopted and improved by many surgeons around the world.

Ultrasonic Rhinoplasty and Septoplasty for Dorsum Preservation and for Dorsum Structural Reconstruction

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Olivier Gerbault

Ultrasonic rhinoplasty and ultrasonic septoplasty reshape the nasal bones using piezoelectric instruments specifically developed for these operations. They allow the realization of precise osteotomies under direct visual control after having performed first an open or closed extended approach, but also osteotomies and rhinosculpture. Piezoelectric instruments preserve bone stability by not damaging bone support structures and avoiding unwanted fractures. They allow precise control of nasal bone movements, their orientation, and their final position. The different inserts of ultrasonic rhinoplasty and ultrasonic septoplasty are detailed, with their scope of action. The applications to dorsum preservation and structural remodeling of dorsum are presented.

Precision Segmental Preservation Rhinoplasty: Avoiding Widening, Defining New Dorsal Esthetic Lines in Dorsal Preservation Rhinoplasty

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Jose Carlos Neves, Ozan Erol, Diego Arancibia-Tagle, and Emre Ilhan

 Video content accompanies this article at <http://www.facialplastic.theclinics.com>.

Experiencing great worldwide scientific excitement, the number of nose preservation surgeries has increased rapidly, promoting a considerable percentage of drawbacks and complications, causing many surgeons to recoil and return to classic resective techniques. In this study, we develop concepts that allow us to operate noses with preservation rhinoplasty that were previously considered to be among the absolute contraindications. Redefining new dorsal aesthetic lines, controlling the nasal lateral wall and the naso-facial groove surfaces, avoiding mid-vault widening and being precise in the design of bony and cartilaginous nasal profile, avoiding any type of irregularity, are strategies that will be presented.