BEFORE YOUR OPERATION

Rhinoplasty — *open and closed*

The nose is the centre of the face, so small changes read as large ones. Rhinoplasty reshapes the bone and cartilage underneath — and, where breathing is obstructed, straightens the septum at the same time.

What it changes

The profile

A hump is lowered, a low bridge built up. The aim is a line that suits your face, not a borrowed one.

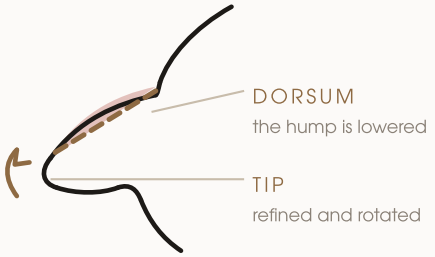
The tip

Refined with fine sutures and cartilage. The slowest part to settle.

The breathing

A deviated septum is corrected in the same operation. Function is never traded for looks.

Two ways in



In profile — what is reshaped

From below — closed stays inside; open adds a columellar step

	TECHNIQUE Closed	TECHNIQUE Open
ACCESS	Worked through the nostrils, without lifting the skin	The skin is folded back — the whole framework is seen directly
BEST FOR	Hump reduction and modest changes in a straightforward nose	Tip work, grafting, crooked noses and revision surgery
SCAR	None outside the nose	A fine line under the columella, usually hard to find at a year
SWELLING	Settles a little sooner	Tip swelling lasts longer — months, not weeks

Neither is better in itself — the nose decides. Either way, the work underneath is the same.

01 **Anaesthetic**
A general anaesthetic. One and a half to three hours, longer for revision.

02 **Reshaping**
The hump is lowered, the bones narrowed, the tip refined with sutures and your own cartilage.

03 **Breathing**
A deviated septum or collapsed valve is straightened in the same operation.

04 **Closing**
Dissolving stitches inside, and a splint on the bridge. Home the same day or the next.

AFTER YOUR OPERATION

Two weeks, then six months

You are presentable within two weeks — but the nose needs about **six months** to show almost its final shape, and a full year to finish. It is not a matter of weeks. The tip is always the last part to settle, and patience is part of the treatment.

DAY 0–2
Splint and rest
A splint on the bridge. Sleep propped up. Blocked breathing is normal.

DAY 3–7
Bruising peaks
Bruising around the eyes darkens, then fades from about day four.

DAY 7–14
Splint off
Splint and stitches off. The nose looks swollen and upturned — that is expected. Back to work.

WEEK 3–8
Normal to others
Others stop noticing; you still will. Light exercise from four weeks. No contact sport.

MONTH 6
Almost the final nose
The honest milestone: the shape is close to final. Tip swelling finishes over the second half of the year.

How the swelling actually goes down

Before the day of surgery

- ○ Stop smoking and all nicotine four weeks before and after.
- ○ Stop aspirin, anti-inflammatories, fish oil and vitamin E one week before.
- ○ Bring photographs and be specific about what bothers you.
- ○ Arrange two clear weeks. Nothing photographed for a month.

In the first six weeks

- Do not blow your nose. Sneeze with your mouth open.
- Keep glasses off the bridge for at least four weeks — tape them to the forehead or use contacts.
- Sleep on your back with the head raised for two weeks. No bending below the heart, no lifting.
- No contact sport for three months. A knock can undo the operation.
- Protect the nose from sun for a year.

Call the clinic straight away if you have

Uncommon, but they need to be seen the same day.

— Bleeding that does not stop with pinching and rest

— A sudden increase in swelling on one side

— Fever, spreading redness or discharge with an odour

— Severe pain that increases rather than settles

— A visible change in shape after a knock

— Any change in vision

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