WATERFRONT PRIVATE HOSPITAL

Preparing for Surgery & Aftercare

Rhinoplasty Patient Information — Part 3 of 6

This leaflet is provided for information purposes.

Please discuss any questions with your consultant.

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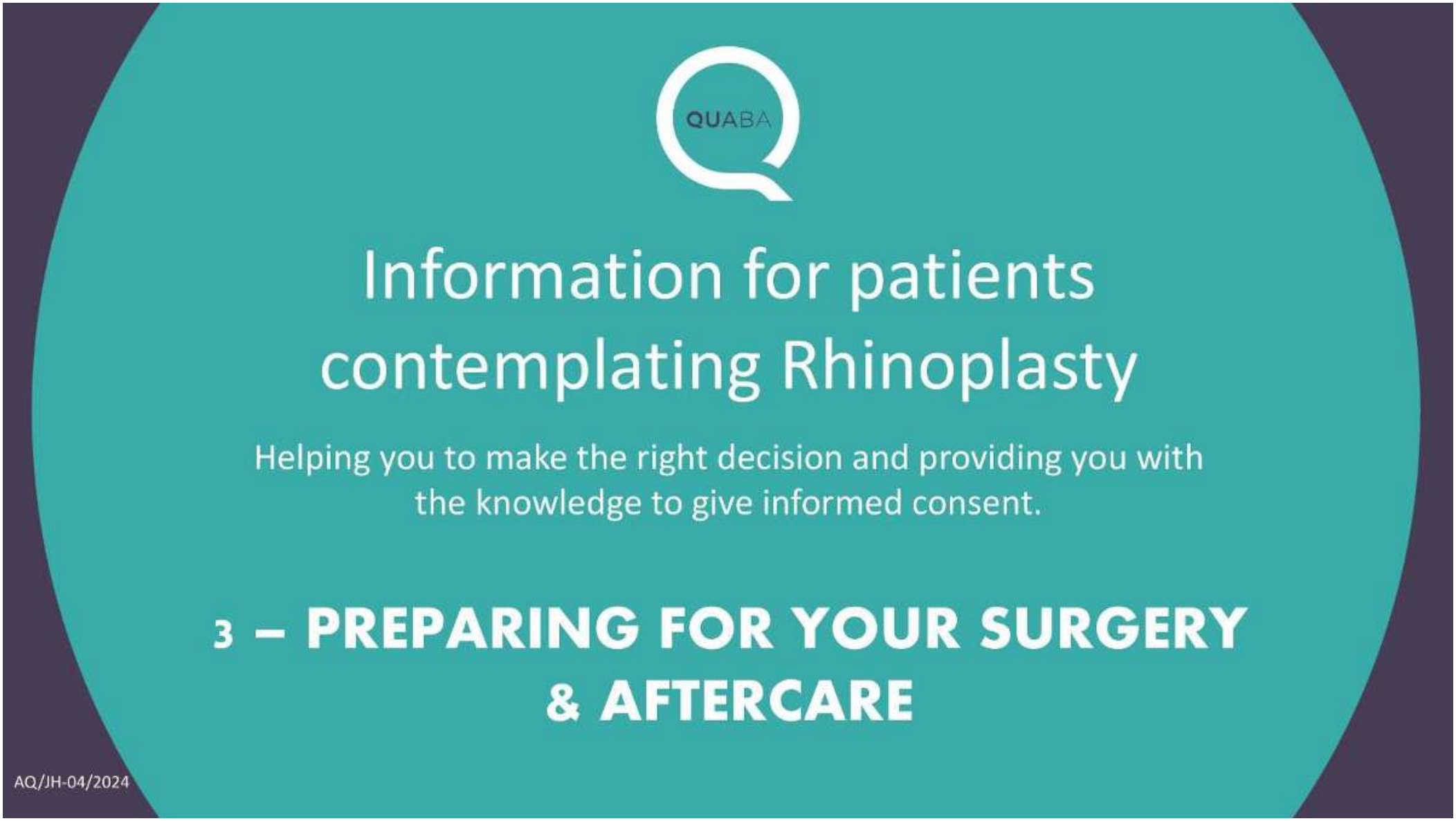

QUABA
Information for patients contemplating Rhinoplasty
Helping you to make the right decision and providing you with the knowledge to give informed consent.
3 – PREPARING FOR YOUR SURGERY & AFTERCARE
AQ/JH-04/2024


RHINOPLASTY
QUABA
Your health
before surgery
Your care
after surgery
Your surgeon plays a central role. Your part is just as important.

We are providing you with specific instructions that begin as early as two weeks before your surgery to avoid unwanted medical events (complications) during and following your surgery. Other instructions help your body prepare for the surgery and the healing process afterwards. There are some tips to help you prepare for common discomforts.

Medications, Supplements, and Recreational drugs

Avoid medications containing aspirin (including baby aspirin), ibuprofen or other NSAIDs for 10-14 days before surgery. It takes time for the medications to get out of your system, and for your system to return to its baseline level of functioning. These medications may increase bleeding.

You should also stop **all supplements** (vitamins, herbal and homeopathic) for 10-14 days before surgery. Medications prescribed by your GP (and mentioned in the clinic letter) may be continued unless advised otherwise.

Street or 'recreational' drugs, such as heroin, LSD and cocaine, can strongly influence the anaesthetic. Cocaine and ecstasy are two drugs that excite the nervous system. They may excite your heart, producing dangerous swings in blood pressure and heart rate, both during and after the operation.

You may need to wait for two to four weeks before resuming herbal supplements and over the counter medications. However, you may take ibuprofen, if prescribed for pain control, as available evidence suggests that it does not increase the risk of bleeding **after** plastic surgery procedures.

HRT (Hormone Replacement Therapy) and the combined contraceptive pill

HRT **tablets** and the combined pill can increase the risk of blood clots, but the risk is low. HRT **patches, sprays and gels do not increase the risk of blood clots.** This is because oestrogen is safer when it's absorbed into your body through your skin. There is no need to stop these before surgery.

Patients who are undergoing surgery under general anaesthesia are advised to stop taking HRT tablets or the combined contraceptive pill and progesterone-only based medication at least four weeks prior to surgery.

It's not going to harm you to stop and start HRT- all that may happen is your menopausal symptoms might kick in for a while. An alternative to stopping the tablets is to replace them with patches or gels.
Remember that the risk of stopping the pill is unwanted pregnancy. Patients will be required to take a routine pregnancy test on the day of their procedure.

HRT (Hormone Replacement Therapy

It's not going to harm you to stop and start HRT- all that may happen is your meno symptoms might kick in for a while.

following knee surgery are very focussed on avoiding clots generally and, obviously, I was extra vigilant because of the unknown additional risks of taking HRT.

Smoking, Alcohol, and Presurgical diet

Nicotine in cigarettes has been known to restrict blood flow and impede proper healing. On the other hand, **alcohol** interferes with medications and thins out blood, which can lead to excessive bleeding. So make sure that you stay away from these substances a week before and two weeks after surgery.

A healthy and balanced diet should be maintained for a few weeks before surgery. Avoid processed foods and refined carbohydrates, which can promote inflammation. The best foods are whole foods, such as fresh fruits and vegetables, fish, eggs, beans, avocados, nuts, seeds and whole grains.

Friends & Family

Most relatives and friends become more supportive once you have made a definite decision to proceed with rhinoplasty.

For the first 24 hours after anaesthesia, you may have memory lapses and slow reaction time. Avoid making important decisions until the following day. If possible, arrange for a family member or friend to stay with you a night or two to help.

Some children get upset or scared if they perceive that their parent is in pain. While the majority of rhinoplasty patients only feel slight discomfort after their surgery, the cast and/or the bruising are enough to make some kids upset. Talk to your children in advance.

Managing anxiety and stress before surgery

"I'm freaking out, can you help me before surgery?"

It is totally normal to feel anxious before surgery.

For some, the idea of surgery and anaesthesia can be scary (around 30% of patients were more afraid of anaesthesia than of the actual operation), while others dread the pain, bruising, and the inconvenience of recovering.

The reasons for surgical anxiety vary from fear of the unknown to having a bad experience with previous surgeries. Surgical anxiety can also be caused by concerns about the outcome of surgery. Patients with an anxiety disorder may be more prone to surgical anxiety and fear than the average patient.

It is important to make sure that fears and anxiety don't become too overwhelming

Severe anxiety can cause unpleasant symptoms and stress. Typical symptoms include a pounding heart, a racing heart (fast pulse), irregular heartbeat, nausea, a nervous stomach, shortness of breath and sleep problems.

Anxiety also becomes a problem if it makes it harder to understand and remember important things you are told about the operation, such as advice about how to prepare for it or about recovering afterwards.

Here are tips to cope with your upcoming surgery

Emotional and practical support from friends and family: secretive patients are more stressed before and after surgery.

Arm yourself with information: an important step in dealing with surgical anxiety is to become as well informed as possible regarding your surgical treatment. Having a complete understanding of the procedure, why you need it, and how it's performed can relieve a great deal of worry. If you have had a bad experience with surgery, or you've had a loved one who has, speaking to us may provide reassurance that this is a different surgery and a different situation.

Distract your self: by reading, listening to music, or use exercise or relaxation techniques. Overall, **general anaesthesia is very safe**, and most patients undergo anaesthesia with no serious issues.

Step away from stress: stress can adversely affect your recovery after surgery. Limit demands placed on your time, especially if they're likely to increase stress. Inform your friends, family, and co workers in advance of your admission that you're taking 10-14 days off to rest and relax. Adjust your phone alerts so you only get the ones that are necessary.

Warnings

Many people who **smoke** tend to smoke even more when they're feeling anxious. Even if that calms their nerves in the short term, smoking increases the risk of complications after surgery.

Herbal supplements, including teas, powders, and other all-natural plant extracts should not be used without consulting your surgeon. Many herbs, despite the label "all natural" are known to interact badly with anaesthesia and other medications. Some can cause blood thinning, heart arrhythmias, and other reactions that are not desirable during surgery.

If you have been prescribed **propranolol** for anxiety, your doctor may advise you to **stop** taking it before surgery. This is because propranolol can lower your blood pressure too much when it's combined with some anaesthetics.

Things to stock up on

Rhinoplasty is not a particularly painful operation.
However, be prepared for common discomforts!

For some, keeping the head elevated at 30-45 degree angle can be uncomfortable especially if you were a side sleeper. **A wedge pillow with memory foam** is worth considering.

Having **a mist humidifier** while sleeping keeps moisture in the air and stops the nasal passages and the throat from getting too dry while you heal. Throat lozenges may help to provide temporary relief.

Mouth breathing makes your lips dry. Keep a **lip palm** handy in your pocket.

You should wear **clothing that fastens either in the front or at the back** rather than the type that must be pulled over the head for one week.

Things to stock up on

Reusable gel ice packs with cloth backing (5) are small enough that they only cover the eyes and cheeks. Patients find them soothing and may reduce the swelling.

To stay hydrated and avoid bumping your cast and sensitive nose on cups, use **big silicone straws**.

Cotton buds will help you apply antibiotic ointment (will be supplied) twice a day to the nostrils and the suture lines.

For those who need to wear their glasses, consider **eyeglass support** such as NoseComfort®
Remember that you could wear contact lenses within 2-3 days after surgery. Long term, you should note that your glasses may have to be refitted because changes in the shape of the nose may alter the resting place for your glasses.

Most research shows arnica by mouth or applying arnica to the skin does not reduce bruising after surgery.

A few things to note in advance

You are advised **not to fly for at least 7 days** after surgery. Though unlikely, there is a risk of bleeding. Also, the pressure changes during the flight can be very painful.

Once you're ready to be discharged, you'll need to arrange a taxi or have a friend or family member to take you home because **you won't be able to drive**. You will be advised to avoid driving while the cast is on.

You may not start workouts at **the gym** for 6 weeks.

On admission, all women of child bearing age will be asked **to provide a urine sample** to exclude pregnancy. If you are **breastfeeding**, be sure to ask ahead of time if prescribed medications are safe. Some moms prefer to pump and store breast milk for their baby prior to rhinoplasty.


Your
care after
surgery

Post-Operative Instructions for Rhinoplasty

Rhinoplasty is a procedure that varies in complexity ranging from a small tweaking to a big operation. Hence, there is a spectrum of after-effects. Detailed instructions are provided, but some of these may not necessarily be applicable in your case.

If in doubt, ask us or get in touch.

Remember that the success of surgery is a team effort. Failure to follow the instructions may have negative effects on the outcome.

Recovering from anaesthesia

The Recovery Area: When the surgery is completed, you will be taken to the recovery area and kept there till you are awake and comfortable. This takes approximately 30 minutes. You will be escorted back to your room by the nurse in charge of your care.

Back to your room: Remember you will not be able to breath through your nose. Your throat may feel dry. You will be lying on your back with the head elevated at 30-45 degrees. Your pulse, blood pressure, temp and O2 saturation will be taken to establish a baseline. Once comfortable, You may be left to rest. You may wish to sleep for a while.

The anaesthetist would have prescribed medication to control pain and nausea to be given as necessary. The nurse may check on you every now and then. They may change a drip pad that is taped under the nose.

Recovering from anaesthesia

Visiting the bathroom: Inform the nurse when you want to go to the bathroom.
Caution: If you suddenly sit up or stand from your lying position you may become dizzy. Make sure you sit for one minute before standing. Stand up slowly to provide time to steady yourself. If you feel dizzy when you sit or stand, you should lie down immediately to minimize the possibility of fainting.

Breaking your fast: Inform the nurse if you feel nauseous. You may drink clear fluids starting with small sips. Go for a soft food diet when you feel hungry. Slight elevation of temperature immediately following surgery is not uncommon.

Going Home: Day Care or Overnight Stay

You will be allowed home the same day or after overnight stay following assessment by your surgeon and/or the nurse in charge. An adult should stay with you for at least the first 24 hours after surgery.

A soft **nasal pack** is sometimes placed into the nostrils, especially if your surgery is also to relieve a nasal breathing obstruction. **This is removed before you go home.**

Take home medications

1. Pain medications
2. Antibiotic ointment
3. Saline spray
4. Drip catchers (drip dips)

Pain

Many patients assume that rhinoplasty will be rather painful. In fact, **most patients end up telling us that the pain was minimal.**

Your needs will be assessed before you are taken to the operating room and again before going home. Appropriate pain medications will be provided, usually Paracetamol and ibuprofen. Opiates (sometimes called narcotics) such as codeine, morphine and oxycodone are rarely needed to control rhinoplasty pain.

The pain tablets that you have received may be regularly used the first day or two. After that take only as required.

Severe persistent pain should be reported

Nausea and Vomiting

What can you do to avoid feeling sick?

Feeling sick after surgery and anaesthesia is unpleasant and not uncommon complication. There are factors that increase the risk, some of which can be modified.

Before surgery:

It is important to discuss with your anaesthetist if you have suffered travel or postoperative sickness before. The anaesthetist may avoid certain anaesthetic agents and pain relief drugs (especially codeine and morphine). There is no need to fast longer than recommended. Dehydration increases the risk of nausea and vomiting.

After surgery:

Avoid sitting up or getting out of bed too quickly. Avoid eating and drinking too soon after your operation, but do not delay too long. Once you are awake you should start drinking and eating within 10 to 20 minutes as this improves your recovery. Start with small sips of water and slowly build up to bigger drinks and light meals.
Taking slow deep breaths can help to reduce any feeling of sickness.

Is there any treatment available if I feel sick after my operation?

You can be given anti-emetic (anti-sickness) drugs and intravenous fluids. It is much easier to relieve the feeling of sickness if it is dealt with before it gets too bad. So, you should ask for help as soon as you feel sick.

Nasal Discharge

A small roll of gauze, **a drip pad**, is placed under the nostrils and held in place by a paper tape. This is to catch fluids and blood as the internal wound drains. The drainage is ordinary and expected. It helps to reduce swelling. It may continue for the first few days.

The drip pad can be changed as often as necessary. You may do it yourself when you go home. Avoid touching your nose and do not place the pad tight against the nose.

Fresh persistent nose bleeding should be reported

Swelling and Bruising

A degree of swelling and bruising of the eyelids and cheeks is to be expected. It becomes more pronounced 48 hours following surgery. Every person and surgery is different, so the extent of bruising and swelling will vary. Bruising may not follow surgery that is confined to the tip of the nose or the septum. It is more commonly encountered following osteotomies (breaking or other manipulations of the nasal bones). Visible swelling lasts for about two weeks. Bruising occurring under the eyes usually fades in 7-10 days.

It may take a year or more for the swelling inside the nose to completely subside, **but in two to three weeks, your casual acquaintances may not be able to tell you had a nose job.**

The first few days are the best time to take steps to reduce the swelling and bruising:

- Apply cold compresses
- Keep your head elevated
- Avoid getting your face too warm
- Avoid bending over and heavy lifting

Careful adherence to the recommended pre-operative medication instructions is imperative. A few patients, despite taking all precautions, will develop marked bruising in the eyelids.

See next slide

Swelling and Bruising

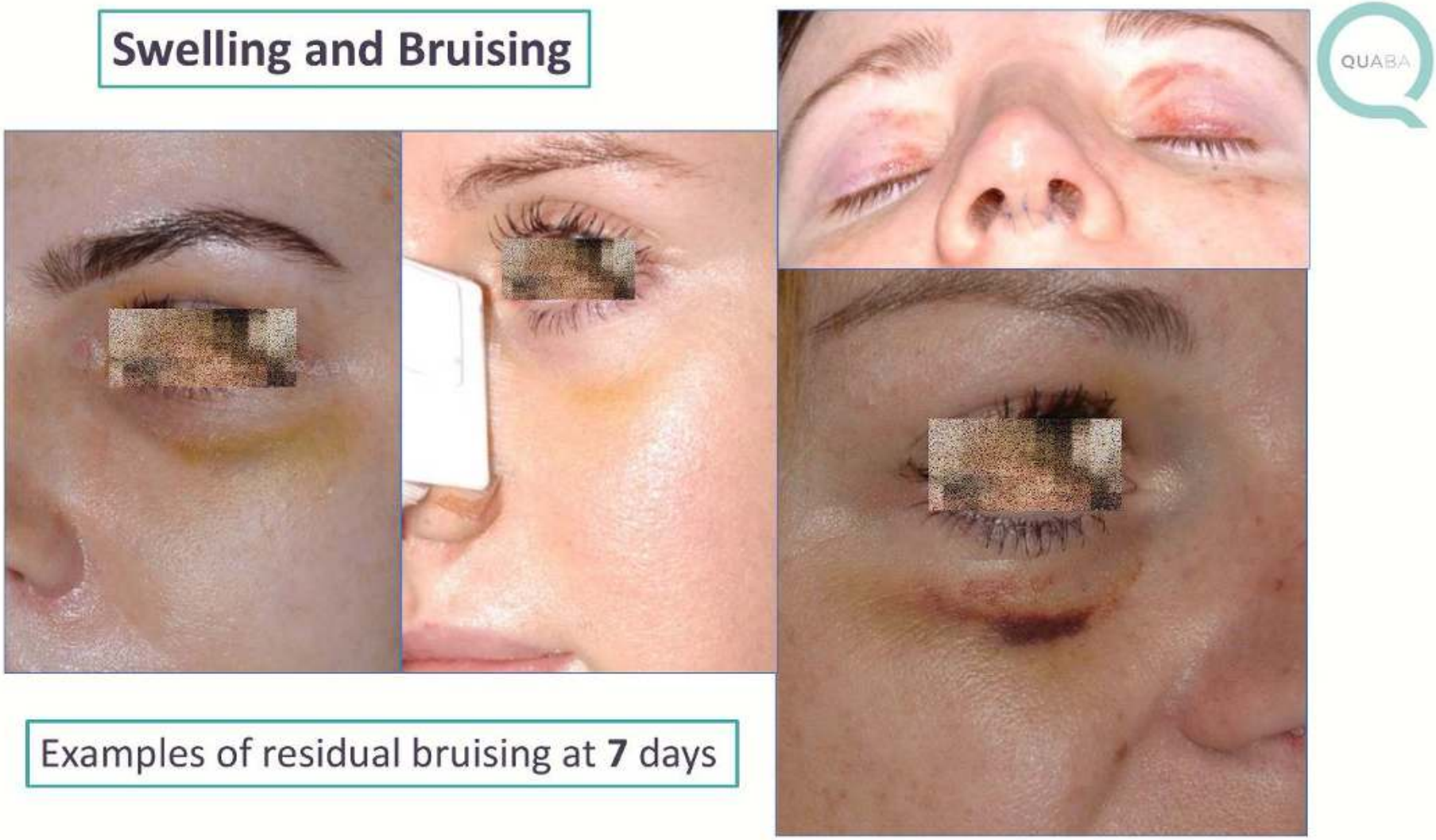
Applying Cold Compresses

When: Begin as soon as you get home on the day of your surgery. The most swelling occurs on the third day after the surgery. The more cold applications you apply during the first two days will significantly reduce the amount of swelling you see on the third.

How often and for how long: Apply the cold compress as often as possible for the first few days after the surgery. Apply for no longer than 20 min intervals.

Where: The compresses can be applied around your eyes, on your eyes, on your forehead and cheeks. Avoid placing them directly on your nose.

What to use: Surgeons have preferences about the type of the cold compress. We recommend reusable gel ice packs with cloth backing (5). These are small enough that they only cover the eyes and cheeks. Patients find them soothing. An alternative is to use crushed ice in a baggie wrapped in a cloth or towel. Do not apply ice or anything frozen directly on the skin. Avoid wet cold compresses which dampen your cast and make it fall off.


Swelling and Bruising
QUABA
Examples of residual bruising at 7 days

Sleeping

Remember that anaesthesia and surgery can disrupt your spontaneous sleep-wake cycle resulting in insomnia. This is temporary. You will sleep better when you return home.

Keep your head elevated when you are resting and sleeping.

It may be difficult to find a comfortable sleeping position. Try using three pillows beneath your head at night. For some, keeping the head elevated at 30-45-degree angle can be uncomfortable especially if they are side sleepers. A wedge pillow with memory foam is worth considering.

Be sure you are sufficiently propped up. **Lying on your side** may cause asymmetrical bruising, swelling and you might inadvertently bump your nose this way as well.

Continue to do this for 10-14 days following the surgery.

Nasal Congestion (Stuffness)

Nasal congestion or "**stuffy nose**" occurs because the swelling after surgery involves all the soft tissues of the nose including the mucosa (lining) of the nasal passages. This is not unsimilar to what you experience following common cold. **Nasal congestion** may or may not be associated with **nasal** discharge, post-nasal drip, or headache. **Nasal** stuffiness is one of the most annoying problems that you may face **after** surgery. It is exacerbated by the internal packing or splinting. **That is why most of our patients have their packs removed before they are allowed home.** It is normal for the nose to alternate being obstructed on one side, then change to being obstructed on the other.

- Resist the urge to blow your nose.
- Avoid sneezing, coughing, and crying.
- Avoid decongestant sprays, if you can.
- Nasal congestion worsens at night. Sleeping propped up on your back is your best option when you have a stuffy nose.
- A humidifier may offer additional relief.

Use a saline nasal spray to gently moisturize your nasal passages until the swelling goes down. It does not have any medicated ingredients. In fact, it only contains saltwater. It helps thin the mucus in your nasal passages, and helps empty fluids from your nose.

For months after surgery, avoid dusty or smoky place.

Nasal Splint Care

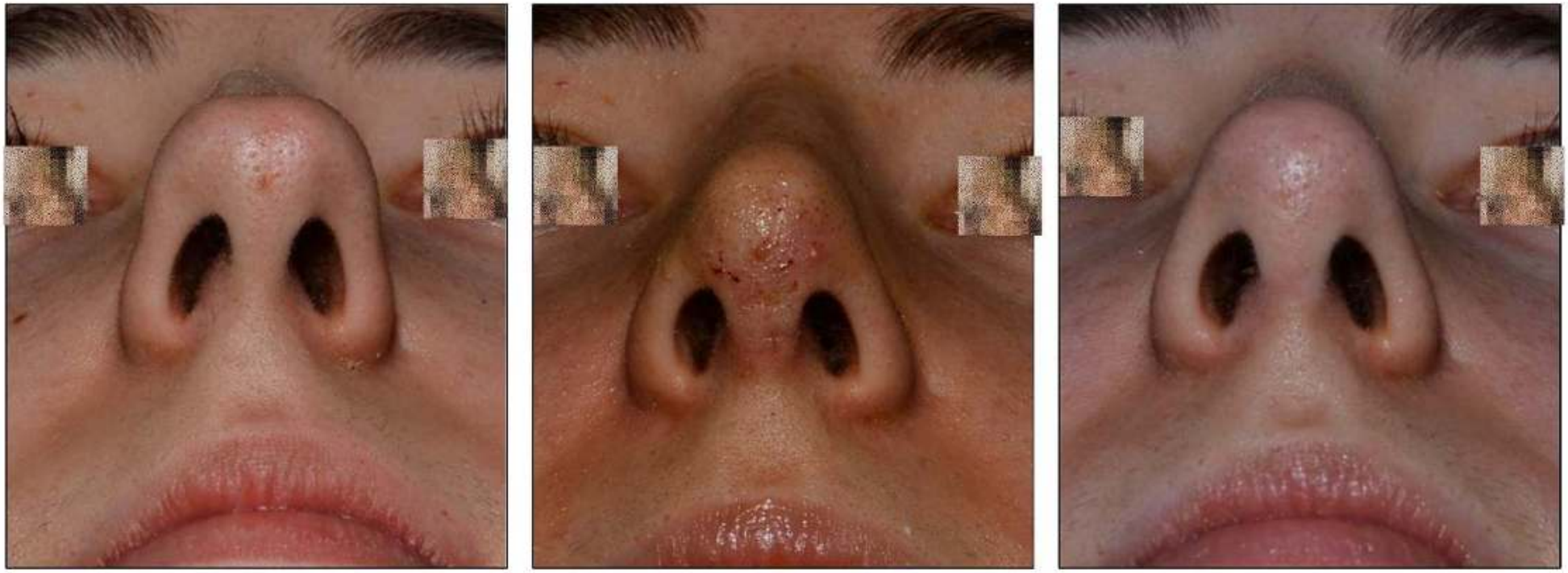
The nasal splint (cast) is applied on the outside of your nose to protect the structure and control swelling. It will be left for one week. Do **not** touch or disturb it and keep dry at all times. The nasal splint and the non dissolvable stitches will be removed at the end of the first week. **Instead of showers, take baths for the time that you have the cast.** Excessive moisture from the shower water may loosen the cast. If you have no alternative, take lukewarm showers, turn the shower tap on low and protect your cast. Have someone else wash your hair during the first week after your surgery.

Nasal appearance with cast on:

During the first week, you may notice that the nasal tip is slightly turned up, your nostrils not quite even, the cast not perfectly central and the tape that shows beyond the cast stained with old blood. You are encouraged to have a good look at the area and report concerns before going home. You may be reassured that what you see has little relationship to the finished result.

Nasal appearance immediately after cast removal:

You will have the chance to see the new nose. It will appear swollen but, in most cases, the improvement can be appreciated. It is not a time for critical evaluation. Reserve judgement for at least six months. But do let us know what you think and if you have concerns.


Before surgery
Appearance immediately after removal of cast and stitches
6 months later

Cleaning the Wounds and Rinsing the Nose

The wounds inside the nose are repaired using dissolvable sutures which will disappear on their own within a few weeks. For the small external cut, the non-dissolvable sutures are removed 7 days after surgery.
The antibiotic ointment is applied twice daily just inside the nostrils and on the external stitches to reduce the risk of infection and lubricate the surgically sutured area thus preventing crusting.

Removing blockages

Sometimes your nose may be clogged by hardened blood and mucous so that it partially or completely seals the airway. The plugs could form around the internal dissolvable sutures. Do not insert a finger or use a forceps to help with the plug's removal. Use a cotton bud to apply Vaseline to soften the plug and focus on using the saline spray to keep the lining moist.

Saline rinse

A saline rinse uses a clean bulb that can be squeezed, which sends a low-pressure stream of water through one nostril while the water exits through the other. It can be started a day or two after surgery, used 2-3 times a day and continued for at least 14 days after your surgery.

Protecting the reshaped structure while the “bits and pieces” glue together

The cast helps, but extra protection is required:

- Animation
- Blowing the nose/sneezing
- Wearing glasses
- Accidental hits
- Brushing the teeth
- Eating
- Avoid heat

See next slide

Protecting the reshaped structure while the “bits and pieces” glue together

Avoid extreme facial expressions to avoid impacting the sutures inside your nose holding everything in place. Too much movement can cause them to weaken and can also cause bleeding.

Occasional **laughing or yawning** will likely not damage your nose as it heals, but try not to laugh too hard! Try to avoid yawning and strenuous crying.

Do not blow your nose. Try not to sneeze. If you must sneeze, keep your mouth open, as this will minimize any undesired movement within your nose.

Avoid sniffing forcibly such as when you feel If you have a runny nose, avoid sniffing vigorously.

Protecting the reshaped structure while the “bits and pieces” glue together

Avoid foods that need a lot of **chewing**. Avoid munching on fruits like apples and raw vegetables like carrots.

Be gentle with **brushing your teeth** and use a soft toothbrush.

Take utmost care of yourself so you do not catch an illness during the early weeks of recovery. Eat high-fibre foods, such as fruits and vegetables, to **avoid constipation**. Constipation can cause you to strain, putting pressure on the surgery site. You would be provided with a laxative if your pain medications contain codeine.

Protecting the reshaped structure while the “bits and pieces” glue together

Be extra protective during the first 6 weeks after surgery. Do not allow anyone to accidently bump your nose. This includes children, pets, and your bed partner. It takes time for the new structure of the nose to consolidate.

Do **not** wear clothing that you have to pull on over your head for two weeks.

Heat will cause the tissues in your nose to swell even more. Use lukewarm water for bathing, avoid letting your face get too warm. This includes sitting in the sun, and using sun lamps and hair dryers. Stick to a diet of cool and room-temperature foods.

Don't rest eyeglasses or sunglasses on your nose for at least 4 weeks after the surgery, to prevent pressure on your nose. You can tape the central bridge of the glasses to the forehead to allow as little pressure as possible on the nasal bones. Consider **gadgets marketed for eyeglass support.** Remember that you could wear contact lenses within 2-3 days after surgery.

Protecting the Skin of the Nose

In the process of carrying out rhinoplasty, the skin is lifted to expose the underlying structure. This results in temporary disruption of the circulation and of the nerve endings. This may be reflected in a number of ways:

Numbness: When you first touch your nose after removal of the cast you may experience altered sensation or numbness. This is more commonly encountered in open rhinoplasty. Sensation returns in 3-6 months time; the tip regains full sensation last.

Increased oiliness: A natural reaction of all types of nasal skin to this surgery is a pronounced increase in nasal oiliness. Use Calamine lotion on a cotton bud once or twice a day to gently wipe the skin for a week after removal of the cast.

Protecting the Skin of the Nose

Discolouration: Most discoloration is resolved in 7-10 days. However, occasionally, olive-skinned patients may retain a degree of pigmentation on the nose and under the eyes (reported by patients as unresolved bruising).

Sun burn and frost-bite: During the healing period, the skin tolerance to both sun and the winter cold is reduced. Use SPF 30 sunscreen when you're outside, especially on your nose. Better still, physically protect your nose from the sun during the first 6 weeks of recovery. Too much sun may cause permanent irregular discoloration of the nasal skin. In cold, windy weather the nose is vulnerable to frostbite.

The scar: After the removal of stitches, the scar may appear pink. It usually settles down quickly. Given its location, the scar becomes barely visible at a conversational distance few weeks after surgery. 6 weeks after the surgery, you may apply gentle massage with Bio oil or E45 once or twice a day.

Walking, Workouts and Other Activities

An important aspect to recovery is your ability to return to your workout routines safely. Patients who are more fit prior to surgery will likely recover faster. Exercise should not jeopardize surgical results.

The first 48-72 hours: You may not feel much like moving around, but getting up and gently moving around can help to stimulate the circulation, reduce swelling and prevent clot formation and venous emboli. Otherwise, spend the first 48-72 hours resting while recovering back your pre surgery energy levels.

The first 2 weeks: **Avoid exercise.** Exercise during the first 2 weeks can cause bleeding and may slow the resolution of swelling and bruising. You may continue walking and pursue comparable light physical activity till the end of the second week. Keep yourself occupied with some relaxing, non-taxing activities.

Walking, Workouts and Other Activities

Exercise with caution. Weeks 3-6:

Beginning the third week, most patients are feeling well enough to start resuming physical activities. However, you should avoid any activities or sports that could result in a blow to the face. You can start light cardio activities which may include outdoor walking, fast walking, walking on a very slow setting on a treadmill, or cycling slowly on a stationary bike. The goal is to not elevate the heart rate or the blood pressure too high. Engage in only low impact exercises and avoid high impact regimens like aerobics. Yoga and stretching are appropriate, but avoid positions that require you to bend over or place your head at a low level. This can cause extra pressure to the area and might interfere with healing. Swimming pool water contains chlorine, which could sting and irritate your nose. It is best to avoid swimming pools for at least 3-4 weeks after rhinoplasty.

Resume a normal exercise routine after 6 weeks:

It takes roughly 6 weeks for the nose structure to to achieve stability so after this time you can resume a normal exercise routine. Remember to ease back into your routine. It may take you 2-3 weeks before you get back your pre-surgery level of fitness.

Smoking, Alcohol, Diet, Makeup, and Sexual Activity

Smoking or drinking alcohol: Most surgeons consider smoking and drinking to be high-risk activities for patients who are recovering from any form of surgery. Nicotine in cigarettes has been known to restrict blood flow and impede proper healing. On the other hand, alcohol interferes with medications and thins out blood, which can lead to excessive bleeding. So make sure that you stay away from these substances for the first 2 weeks after rhinoplasty.

Diet: Eat as well as possible. For the first day or two, you probably won't have much of an appetite. When you do feel ready to eat, fresh and nutritious food to help your body heal. You should prevent dehydration by taking fluids regularly. Decreased activity may promote constipation, so you may want to add more raw fruit to your diet and be sure to increase your fluid intake.

Wearing makeup: There is no harm in wearing makeup to cover bruising under the eyes that persists **after** removal of the cast. Avoid putting any makeup on the nose for 3 weeks, definitely not on the external scar.

Sexual activity: Can be resumed 2-3 weeks following facial plastic surgery including rhinoplasty.

Flying

You should not fly for **at least 7 days** after the surgery. While unlikely, the possibility that you will have a nosebleed during the flight, which could be an emergency situation, is avoided.

Also, the pressure changes during the flight may be very painful and it is likely that you have renewed swelling after the flight, which will last for 48 hours. All of these issues can be avoided if you travel by car or train.

Post Rhinoplasty Blues

It is not uncommon to have some mild post-operative depression.

During the healing process, it's not uncommon for patients to feel uncertainty, doubt, and even regret about their cosmetic procedure.

Feeling low may be due to residual effects of general anaesthesia and pain medications.

The lack of physical activity usually means a short supply of endorphins which trigger a positive feeling in the body. When you look swollen and battered, you're likely to feel emotionally "bruised" as well. Remember that this is temporary and will subside shortly.

Post Rhinoplasty Blues

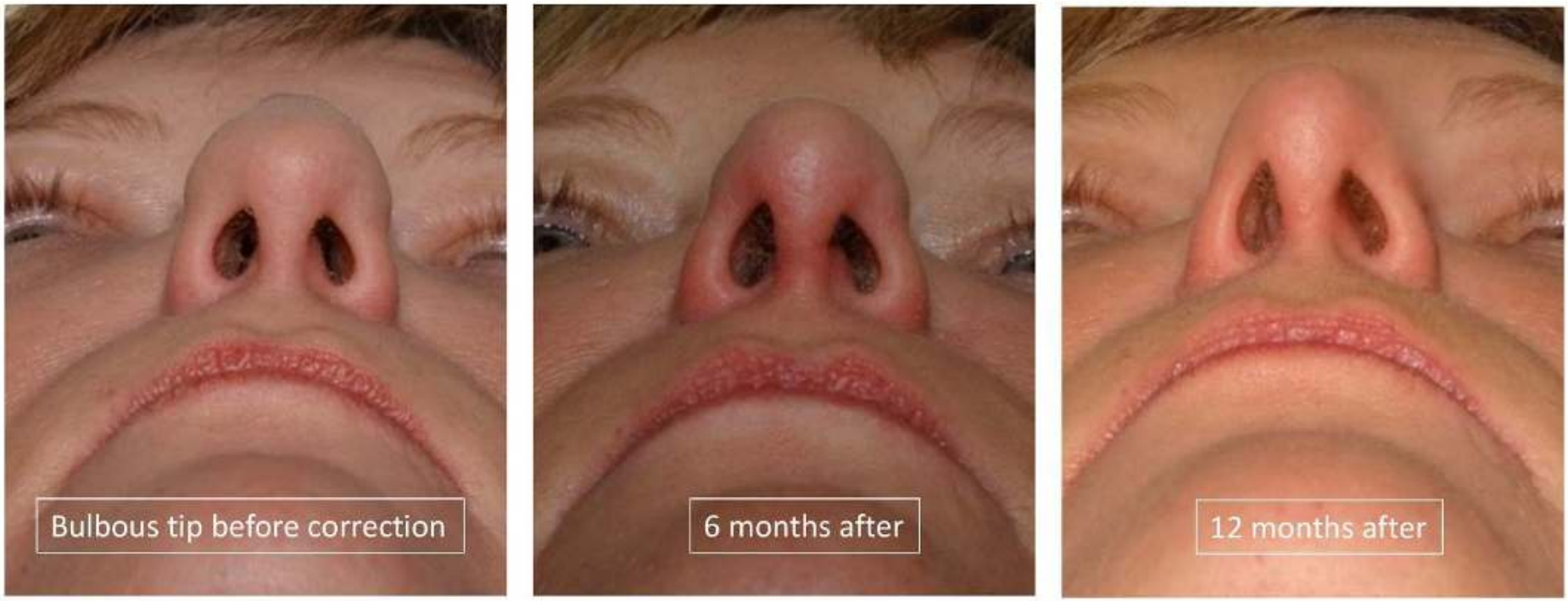
It is not uncommon to have some mild post-operative depression.

Steps to Combat Post-Op Depression:

- It helps to have a strong support system
- Talk out your anxieties and feelings to family and friends
- Plan ahead and set up your “recovery station” before you go in for the surgery
- Don’t go back to work before you’re ready
- Be patient with the healing process
- Don’t make premature judgments on the outcome
- Have faith and be assured that we have taken every measure to address your expectations

Recovery Milestones

First 24 hours:	Packs removed. Discharged home.
1 week:	Removal of the cast and stitches.
10-14 days:	Social circulation. Returning to work.
3-4 weeks:	Start cardiovascular workout. Not strenuous. Keep protecting your nose.
6 weeks:	The nose structure is stable. Resume pre-surgical activities. Reserve judgement on outcome.
6 months:	First follow-up review. Meaningful assessment of outcome.
9-12 months:	Second review. The healing process is complete or nearing completion.



The post surgical swelling, particularly of the tip may take a year or more to resolve.

Recovery Milestones

The speed of recovery is influenced by:

Your body: Your health, age and your susceptibility to swelling and bruising.
Your nose: The thickness of the skin. Previous scarring due to injury or previous surgery.
The operation and the surgical team: The extent and complexity of the procedure. Additional procedures at the same time. The quality of surgery and anaesthesia.
Aftercare: Following post operative instructions closely. Avoiding smoking and alcohol during recovery.

REMEMBER

The aim of rhinoplasty is improvement. **Perfection is exceptional.**

Small irregularities may be felt below the smooth skin, especially over the nasal bones. These irregularities are common. Most noses, even without surgery, have palpable bone irregularity beneath smooth skin.

Most rhinoplasty procedures involve changes that are small: often so small that they are measured in milli meters. They can be easily masked by surgical swelling. It is possible that people won't notice the difference! You may react to this with quiet disappointment.

WHEN TO CALL US

- Throbbing or severe **pain** which is not relieved by pain killers
- **Fever** of 38°C or higher
- **Redness** around the incision lines
- **Yellow or green discharge** from the wound
- **Fresh Nose bleeding – r**ecurrent, does not slow down
- **Accidental bump of your nose -** obvious displacement of the cast


QUABA
Doing our best to
translate your
expectations
into reality