

Revision Rhinoplasty

Rhinoplasty Patient Information — Part 6 of 6

This leaflet is provided for information purposes.

Please discuss any questions with your consultant.

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Revision Rhinoplasty

Revision rhinoplasties (also called secondary or re do rhinoplasties) can be the most difficult in cosmetic surgery. There may be little normal anatomy. The skeletal framework had been changed with some parts distorted or missing. The scar tissue makes the dissection more difficult. The skin is harder to drape properly.

Mallets, chisels, grafts and sutures aside, all surgeons agree that **repeat rhinoplasty patients are often emotionally fraught ratcheting up the pressure of an already demanding procedure.**

A certain percentage of rhinoplasty patients are candidates for revisions. Revisions may include nonsurgical interventions (fillers or steroid injections), small surgical tweaking as well as big operations. Various statistics report revision rates of 5-15%.

There are a variety of indications for revision surgery. Examples include under correction leading to persistence of the preexisting deformity or over correction introducing a new one, functional difficulties due to structural collapse, asymmetries and problems that follows unsatisfactory healing.



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Ideally, revision rhinoplasty should not be performed until at least 9-12 months after the initial operation. While revision rhinoplasty can be readily justified for repairing **obviously** misshapen noses and correcting structural functional problems, extra care must be exercised before considering further surgery for minor or perceived imperfections (or indeed a preexisting feature that was not among the targets for the primary procedure but becomes a focus of concern after correction of the more significant deformity).

A word of warning: If you insist upon having a perfect nose, your obsession may lead to heartbreak. Near perfection is difficult to achieve in rhinoplasty, so provided that adequate reduction of the main deformities had been achieved, think twice before you endanger a good nose with revision surgery.

Despite a surgeon's best efforts, revision rhinoplasty has a higher revision rate than primary rhinoplasty (no prior nasal surgery). It is important that you are aware of this as no ethical plastic surgeon can guarantee the outcome of revision rhinoplasty or any other cosmetic plastic surgical procedure for that matter.



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Second opinions:

It is possible that the surgeon and patient disagree when assessing the cosmetic outcome of rhinoplasty. Patients are entitled to seek a second opinion from another consultant who may provide this free of charge if practicing within the same hospital. If the consultant providing the second opinion is not within the same hospital, then your surgeon may offer to settle the fee on your behalf. The Hospital and/or the surgeon will not guarantee to fund any recommendation for further surgery given by the second opinion.

Complaints:

If you remain unhappy with the result, or you think that the procedure was not carried out properly, you can enquire about the Hospital complaint procedure and write to the relevant hospital officer. Make sure that you're fair, and realistic and allow a reasonable amount of time for the officer to respond to your complaint. If you don't think they have dealt with your concerns properly, it's then up to you if you want take the matter further.



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Who pays?:

The surgeon and his anaesthetist may waive their fees for revision rhinoplasty. When they do so, this should not be perceived as an indication that the standard of care offered by the surgical team was below acceptable standards (see “Happiness after rhinoplasty-Factors at play”). The hospital, under an inclusive care package, may reciprocate and not charge you if the indication for revision is a result of clinical complication, such as local infection or septal haematoma (leading to loss of structure and/or functional concerns) or if the cosmetic result is not in line with the expected outcome. This remains at the discretion of the hospital management team. The hospital may not cover the cost of refinements for minor imperfections which are not uncommon following rhinoplasty surgery. You may incur the full treatment costs when your initial surgery was carried out at a different hospital by another surgeon. These costs vary greatly, perhaps more than any other plastic surgery procedure depending on the steps required to achieve the desired result. Sometimes a revision rhinoplasty can be a minor tweaking while at other times it can be a major time-consuming reconstruction requiring the use of ear or rib cartilage grafts.

Refunds:

Although you and your plastic surgeon wanted the same thing: the best possible result, there are never actual or implied guarantees of a perfect or indeed a satisfactory outcome. Sometimes, what is considered a decent result may not be perceived as such by you. We try to resolve this issue through frank discussions and, when appropriate, through second opinions, revision surgery and/or the complaint procedure. Rarely, despite the aforementioned, patients remain dissatisfied and demand a refund. It is important to note that the cost you paid covered unlimited number of consultations before and after surgery, best surgical effort at the time of surgery, the consultant anaesthetist fee, the operating room charges, consumables and medications, hospital accommodation, specialist postoperative nursing, the compulsory surgeons indemnity insurance and general secretarial and overhead office costs. These services were already rendered. Plastic surgeons offering cosmetic surgery pay very large premiums for special insurance called **medical indemnity insurance**. This is to protect themselves and others financially and legally if they were sued for negligence, malpractice or mistakes. Usually, a surgeon does not entertain direct refunds, but a patient could be offered compensation if it could be shown that the care received fell below acceptable standards. You could seek independent legal advice.