ABSTRACT



Rhinoplasty remains one of the most sought after cosmetic procedures. It can be life changing surgery for many of our patients. Sadly, it is not always a change for the better. Complications can not always be prevented which can lead to many unhappy patients. Le Med Nasal Splint is a simple device which can help minimise and prevent many complications such as swelling, oedema, haemorrhage, implant displacement, filler migration, malposition, step and open roof deformity. Le Med Nasal Splint can enhance the cosmetic result of injectable as well as surgical rhinoplasty



RESULT OF NOSE FILLER



RESULT OF NOSE FILLER





RESULT OF NOSE FILLER

Complications of Rhinoplasty and Solutions



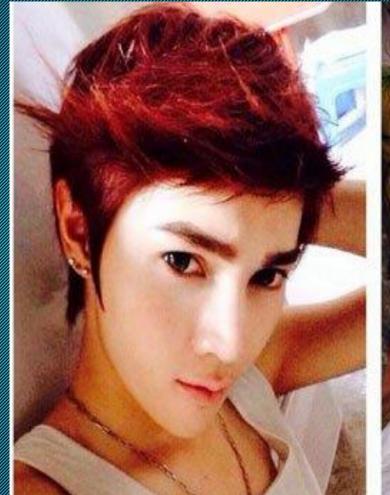


1.HAEMORRHAGE 2-4%

Rx compression - pressure bandage, Le Med Nasal

Splint-to prevent post-op bleeding. Cauterisation.

Vasoconstrictor i.e. LA with adrenaline





Complications of Rhinoplasty and Solutions





2. INFECTION variously quoted around 2%. Localised cellulitis, abscesses, or granuloma may respond to antibiotics and drainage. No consistent data to prove routine antibiotic prophylaxis reduces wound infection

Rx prompt and adequate skin inspection is the key to manage infection



3. SKIN NECROSIS: excessive undermining and cautery use, and overzealous skin thinning can increase the risk of skin necrosis

Complications of Rhinoplasty and Solutions





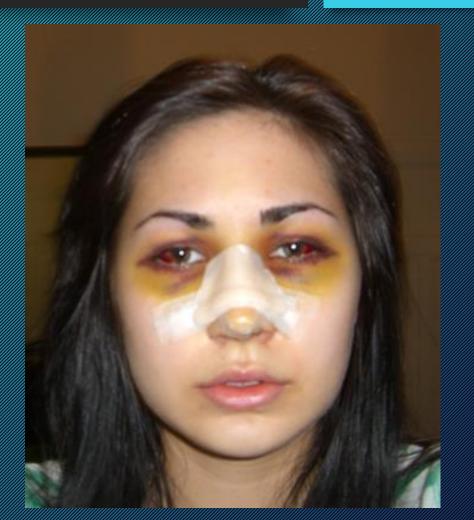
4. OEDEMA AND ECCHYMOSIS: last between 10 days to 14 days. Risk factors: Osteotomies, prolonged operating time, excessive nasal packing, postoperative vomiting, raised blood pressure and inadequate haemostasis

SUBCONJUNCTIVAL ECCHYMOSIS reported to be around 20%

PERSITING OEDEMA can last several months

INFRAORBITAL HAEMATOMA - "shadows below the eyes" is reabsorbed slowly in months

Rx intraoperative intravenous steroid postoperative head elevation, cold compression to the nose, blood pressure monitoring and Le Med Nasal Splint can minimise dedema



CASE STUDY NUMBER 1



- 55 year old female. No significant medical history
- Aquamid injectable rhinoplasty 10 years ago. She was happy with the result back then
- Few years later she wanted a higher bridge and underwent surgical rhinoplasty using costal cartilage. Aquamid was removed at the time.
 She wasn't happy with the result due to "my nose looked fat all the time"
- She underwent a second surgery with a different doctor but still wasn't happy
- A year later she came to me for help and requesting a 3rd operation to correct her puffy nose!

CASE STUDY

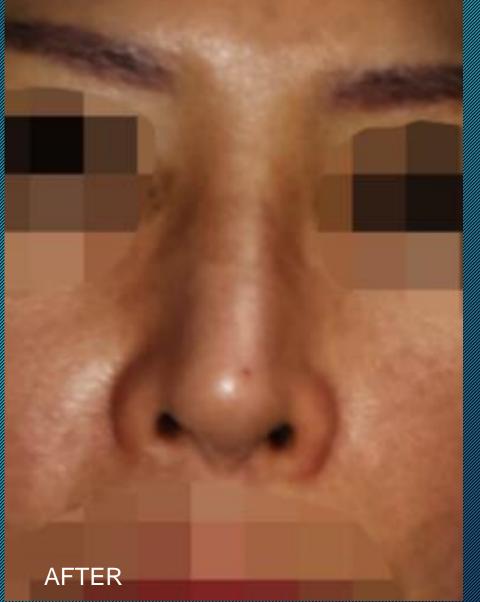


We realised that her concerns were about her skin-soft tissue envelope—not hasal structure.

We didn't offer her an operation but ins









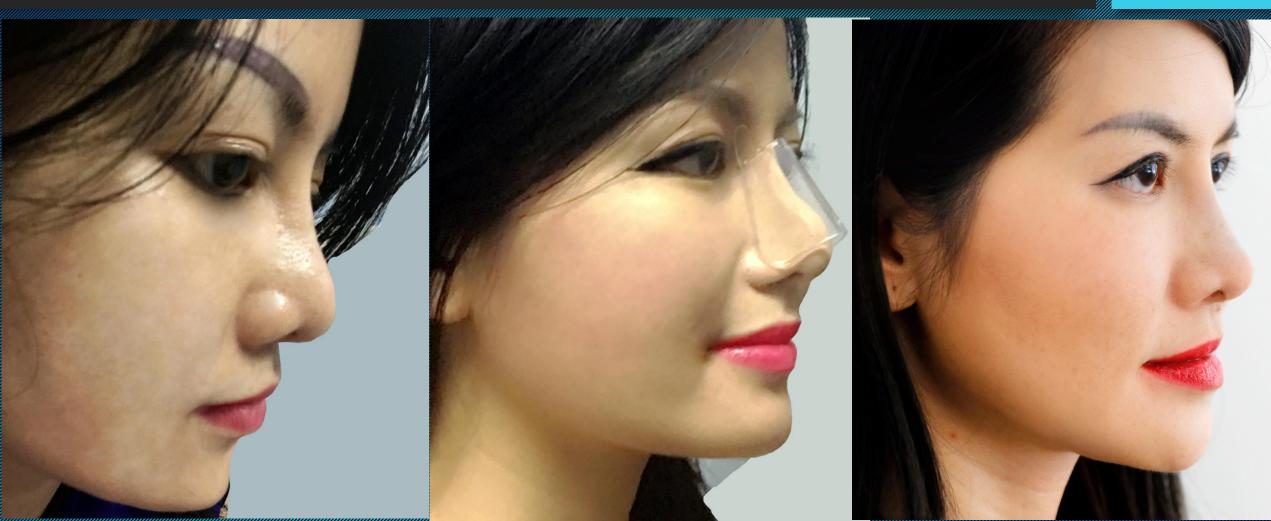
RESULT



RESULT

CASE STUDY NUMBER 2

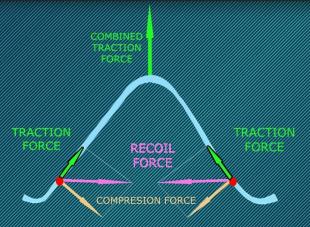




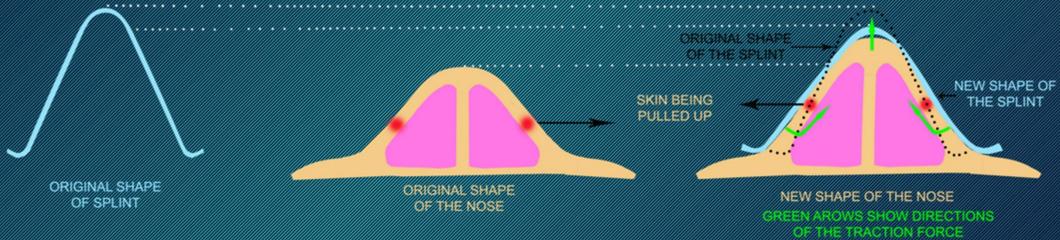
UNIQUE TRACTION FORCE



THE RECOIL FORCE - TENDENCY OF THE SLPINT TO RETURN TO ITS RESTING SHAPE - IS THE COMBINATION OF THE TRACTION FORCE - PARALLEL TO THE SKIN AND COMPRESSION FORCE - PERPENDICULAR TO THE SKIN

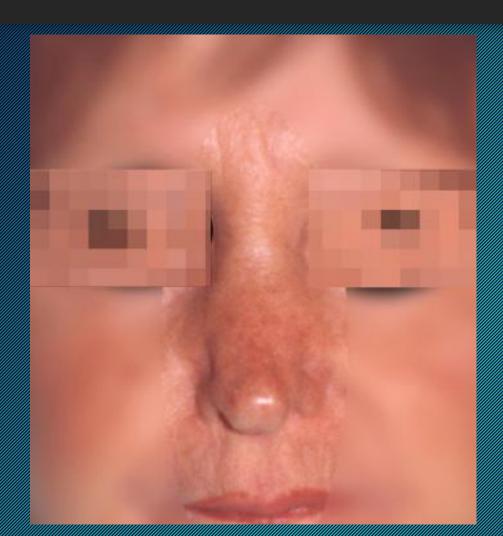


TRACTION FORCE IS CREATED
BECAUSE THE SLPINT IS TRYING
TO RETURN TO ITS ORIGINAL
SHAPE WHILE BEING WORN



Alar collapse, pinched tip and saddling...





Due to:

- Excessive resection of the lower lateral cartilage
- Transection of the domes
- Over-excised of cartilaginous dorsum
- Contraction of skin-soft tissue envelope

Le Med Nasal Splint due to its unique traction force will gather extra skin medially which in turn will minimise skin contraction

OPEN ROOF DEFORMITY





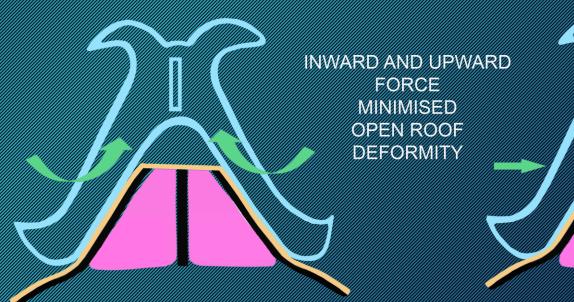
Common causes:

Greenstick cephalic fracture during osteotomies.

Inadequate mobilisation of the fractured segments medially

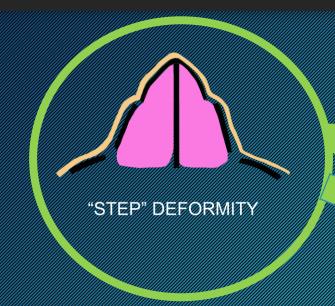
Overzealous nasal packing

The use of Le Med Nasal Splint will aid with the correction



"STEP" DEFORMITY



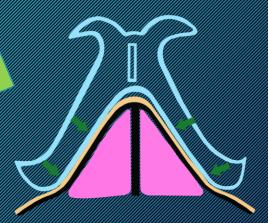




POSSIBLE OUTCOME WITH CONVENTIONAL SPLINT

This deformity is due to a single lateral osteotomy too far medial to the nasofacial groove. Repeating the osteotomy at the right level will help to correct the problem

The use of Le Med Nasal Splint will aid with the correction



POSSIBLE OUTCOME WITH LE MED NASAL SPLINT

Complications of Injectable Rhinoplasty



AVASCULAR NECROSIS with injectable rhinoplasty can be avoided with direct infiltration of LA with adrenaline, 10 minutes before the procedure, stay in the mid line while injecting. Others suggest compression of facial or angular arteries. Early recognition and intervention is the key: Aspirin, nitroglycerin paste, hyaluronidase, antibiotic



Complications of Injectable Rhinoplasty



- Infection, bruising and initial swelling are minor
- Granuloma, chronic swelling due to ongoing infection and/or inflammation are more serious. Injectable silicone is the worse offender

Rx Le Med Nasal Splint is an excellent tool to correct chronic swelling or orderna

Complications of Injectable Rhinoplasty



- Filler migration and displacement are not uncommon
- Malposition of filler can happen even in experts' hand

Rx Le Med splint can effectively correct filler migration/displacement and malposition.

MARKET AVAILABLE NASAL SPLINTS: PLASTER, THERMAL PLASTIC AND ALUMINIUM



It has to be custom made.

Rigid and become loose when the post-op oedema subsides. A new one needs to be made to replace the previous one. Each time it can cost between 5-10 minutes of the surgeon's time.

Obscure the surgeon's

vision to inspect for

post-op swelling,

bruising, infection,

inflammation, skin

demarcation,

ulceration and

necrosis.

MARKET AVAILABLE SPLINTS



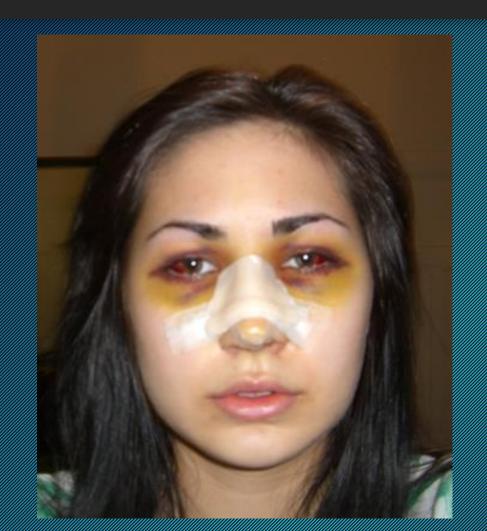




Thermoplastic Nasal Splint

MARKET AVAILABLE







LE MED NASAL SPLINT





TECHNICAL FEATURES Summary





Ergonomic
- following
facial
contour

Rolled edges
- additional
comfort and
avoid
demarcation

Gentle changeable Compression force between 3-5mm Hg- no compromising of skin circulation Unique traction force Unique split design and **special** elastic material of the spine to provide ventilation and gentle compression force

Unique design and rigid
material of the side panels provides maximum protection for the nasal walls

High tech
transparent
bio-compatible
materials

TECHNICAL FEATURES continued





Four sizes:

- Petite 35x35x52x1mm
- Small 40x40x60x1mm
- Medium 45x45x68x1mm
- Large 50x50x76x1mm



YES, AUTOMATIC

YES

YES

YES

YES

YES

YES

YES



ALUMINIUM

NO

YES

NO

NO

NO

NO

NO

NO

NO

PLASTER

THERMO-

PLASTIC

NO

YES

NO

NO

NO

NO

NO

NO

NO

COMPARISONS	

CAN BE APPLIED BY PATIENT

REDUCE SWELLING AND BLEEDING

MOULDABLE

RESHAPE THE NOSE

REDUCE POST OP PAIN

DIRECT INSPECTION OF SKIN

FEATURES	LE MED

PREVENT AND CORRECT MALUNION OF FRACTURED NASAL BONE YES

GENTLE COMPRESSION FORCE & UNIQUE TRACTION FORCE

PREVENT AND CORRECT MALPOSITION OF FILLER



LE MED

YES

YES

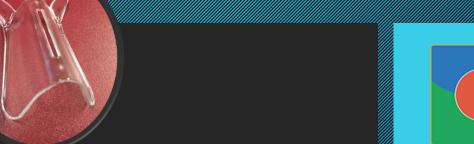
YES

YES

YES

YES

YES



THERMO-

PLASTIC

YES

NO

NO

NO

NO

NO

NO

NO

NO

PLASTER

YES

NO

NO

NO

NO

NO

NO

NO

NO

COM	PARIS	ONS

	VI / VI	1150	

FEATURES

ERGONOMIC

VENTILATION

WATERPROOF

TIME EFFICIENT

ENHANCE COMPLIANCE

INCLUDES DORSAL PAD

AVOID EXTERNAL TAPPING

INVISIBLE

ROLLED AND ROUNDED EDGES

YES YES

NO

NO

ALUMINIUM

NO

NO

NO

NO

NO

YES

YES



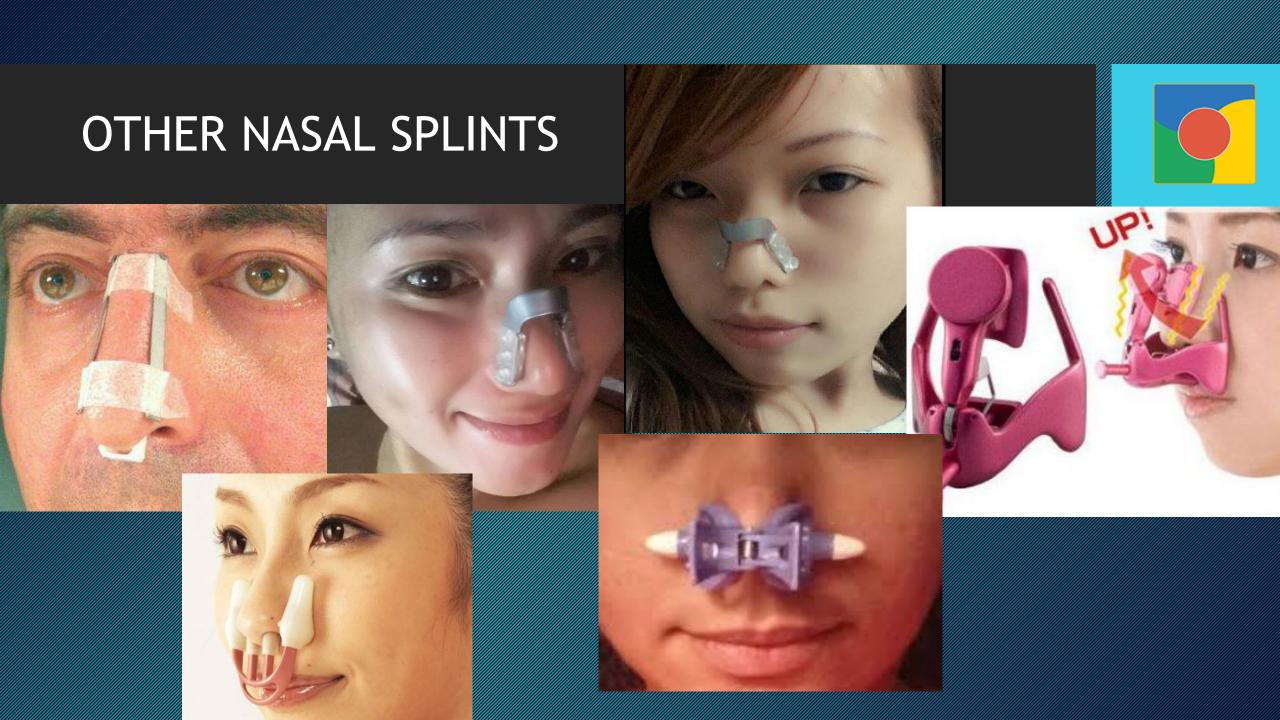
BECOMES LOOSE WHEN ODEMA SUSIDES	NO, IT MAINTAINS CONSTANT GRIP THE WHOLE TIME	YES, NEEDS NEW ONE TO REPLACE THE LOOSE ONE	YES, NEEDS NEW ONE TO REPLACE THE LOOSE ONE	YES, NEEDS NEW ONE TO REPLACE THE LOOSE ONE
RELATIVELY LOW COST	YES	NO	NO	NO

TOP 5 COSMETIC PROCEDURES



	2000	2005	2010	2011	2012	2013	2014	2015	2016
Breast Augmentation	212,500	291,000	296,203	307,180	286,274	290,224	286,254	279,143	290,467
Nose Reshaping	389,155	298,000	252,216	243,772	242,684	JRES	,	,	,
Liposuction	354,015	324,000	203,106	204,702	202,128	,	,	,	
Eyelid Surgery	327,514	231,000	208,764	196,286	204,015	119,817	206,509	203,934	209,020
Facelift	133,856		112,955	119,026	126,320	133,320	128,226	125,711	131,106
Total	1,419,040	1,146,005	1,073,244	1,070,966	1,061,421	980,055	1,048,665	1,048,818	1,088,848

Source: AMERICAN SOCIETY OF PLASTIC SURGEONS



LE MED NASAL SPLINT



Thank You!