

# Dr. Ebrahim Razmpa - FAQ

## Facial Plastic Surgery

### **Frequently Question: Is there any way to alleviate the heavy feeling of the eyes that make it difficult to hold the eyes open?**

Answer Body: Yes, upper eyelid surgery can alleviate the "heaviness" that people feel around their eyes when the excess skin of the eyelid weighs down on them.

### **Frequently Question: Where is the incision for eyelid surgery?**

Answer Body: The incision for upper eyelid surgery is hidden within the natural fold of the upper eyelid and extends slightly beyond the outside corner.

For the lower eyelid, the incision is also hidden but below the lower eyelashes.

### **Frequently Question: I had Rhinoplasty several days ago. When I saw my nose at the mirror recently, I noticed, that the tip of my nose is lifted high, which does not look natural. The doctor told me that it's going to return into a more natural form after a while. Will it really change and go down? If so, when can I expect it to happen?**

Answer Body: By Randolph Capone, MD - Baltimore Facial Plastic Surgeon

This facial plastic surgeon is a member of the American Academy of Facial Plastic and Reconstructive Surgery (AAFPRS), the world's largest association of facial plastic and reconstructive surgeons.

Learn more Although very difficult, waiting for your new nose to emerge after rhinoplasty is necessary. The swelling, bruising, asymmetries, nostril irregularities, tip position, skin changes, size, etc.... all will change over the first 12 months. Wait for the nose to "relax" a few weeks before becoming concerned. Stop looking in the mirror. Probably 80% of rhinoplasty healing is complete by 3 months. This will be a better time to start judging your result. But even then don't panic! Complete healing definitely takes 12 months (and up to 18 months in revision rhinoplasty!).

Ref : <http://www.realself.com/question/time-time-time>

### **Frequently Question: How long will my facelift last?**

Answer Body: The good news is that your facelift will not fall down at the stroke of midnight on the tenth year! Actually, a facelift (and other procedures) will turn back the clock. You will start aging again from that point forward. You will always look better than if you did not have the procedure in the first place.

### **Frequently Question: Are the incisions visible after facelift surgery?**

Answer Body: No, if done correctly, all of the incisions associated with facelift surgery can be hidden in normal creases / folds of the face or in the hairline.

### **Frequently Question: What is a good age to have a facelift?**

Answer Body: There is no specific age for having a facelift.

The results of a facelift can be subtle or very dramatic depending on the patient's appearance before surgery.

### **Frequently Question: What should I know about anesthesia?**

Answer Body: When necessary, twilight sleep or light general anesthesia is administered by a competent anesthetist or anesthesiologist. The level of anesthesia will vary with the needs of each patient.

The type of anesthetic is clearly described at the time of consultation and is tailored to the patient's needs for surgery. The patient will remain in the recovery area until able to be discharged.

Your surgeon will ask you to have a friend or family member to drive you home after the operation.

### **Frequently Question: How does a person get rid of the constant "puffiness" under the eyes?**

Answer Body: A lower blepharoplasty (lower eyelid surgery) can get rid of the pockets of fat that can cause the puffiness.

### **Frequently Question: How long do I need to take off from work after eyelid surgery?**

Answer Body: It is suggested that you take off 3-5 days from work after eyelid surgery but refrain from strenuous activity for up to one month after the surgery.

## Snoring

### Frequently Question: What is the difference between snoring and sleep apnea?

Answer Body: Both fall into the category of sleep-disordered breathing. Simple snoring represents a mild disorder where breathing becomes very loud but the upper airway is only partially obstructed during sleep.

Snoring is a common symptom of obstructive sleep apnea. However, unlike mild snoring, sleep apnea is a serious medical disorder that occurs because the airway is totally obstructed during sleep and the patient stops breathing completely for 10 seconds or more. In one night, a sleep apnea patient may experience 20 to 30 or more "apneic events" (or involuntary breathing pauses). If your partner hears loud snoring punctuated by silences and then a snort or choking sound as you resume breathing, this pattern could signal sleep apnea

### Frequently Question: How can my dentist help?

Answer Body: If you experience any symptoms associated with snoring or sleep apnea, consult with your dentist so he or she can properly diagnose your condition or, if necessary, refer you a specialist. If your dentist suspects you suffer from sleep apnea, he or she may refer you to a physician or a sleep specialist. For a proper diagnosis, you may have to undergo an overnight sleep study, which measures heart rate and how many times breathing is interrupted.

If you have been diagnosed with snoring or obstructive sleep apnea, your dentist can work closely with the diagnosing physician to implement and manage the prescribed therapy.

### Frequently Question: Is snoring harmful to my health?

Answer Body: The severity of this disorder varies: It can be a mild nuisance that disturbs a restful night's sleep or a symptom of the more serious, progressive sleep apnea syndrome. A history of snoring may precede development of more serious sleep disorder symptoms, including excessive daytime sleepiness, memory impairment, morning headache, poor work performance and loss of sexual drive.

While snoring by itself is not life threatening, it can interfere with a good night's sleep for you, the snorer, and also affect your partner's ability to get quality sleep. Scientific research has found that partners of snorers lose up to an hour of sleep a night because of the nuisance.

### Frequently Question: How can I minimize my snoring?

Answer Body: You can make positive lifestyle changes to minimize your snoring such as: · Lose weight · Quit smoking · Get treatment for allergies if you have them · Limit or avoid alcohol use and sedatives · Sleep on your side instead of your back (when you sleep on your back, your tongue falls backwards into your throat, which can narrow your airway and partially block airflow).

### Frequently Question: What treatment options are available?

Answer Body: Oral appliance therapy is one way to effectively manage snoring and sleep apnea, and may be used in conjunction with other therapies. Some appliances such as a tongue-retaining device hold the tongue forward via a suction bulb to open up the air passage. Mandibular repositioning appliances reposition and maintain the lower jaw (mandible) in a protruded position during sleep. Nasal sprays also can provide relief for snorers whose nasal passages are blocked due to swelling or increased mucous.

Therapy may last for several weeks or months and require follow-up visits. The cost of oral appliances ranges from \$50 to \$2,000, depending on whether you opt for an over-the-counter or custom-made appliance.

In some cases, surgery may be required to eliminate snoring. Procedures can include any of the following: traditional surgery, outpatient laser-assisted uvulopalatoplasty (LAUP) to cut away the uvula (this is not recommended for sleep apnea patients), and nasal surgery to remove obstructions in the nose or to correct a deviated septum.

### Frequently Question: Why are sleep apnea sufferers at risk?

Answer Body: An estimated 18 million Americans suffer from undiagnosed and untreated sleep apnea. This disorder may raise your blood pressure and decrease the flow of oxygen to your brain. Studies have shown that patients with this potentially life-threatening disorder are so fatigued during the day that when driving, their performance is similar to a drunk driver. If left untreated, sleep apnea can lead to impaired daytime functioning, high blood pressure, heart failure and possibly stroke. While snoring and sleep apnea are related disorders, not all snorers will develop sleep apnea and not all sleep apnea patients snore.

### Frequently Question: Why do I snore?

Answer Body: Medical experts estimate that more than 30 million American adults snore. Snoring or gasping sounds during sleep is caused by the vibration of relaxed, floppy tissues that line the upper airway (or throat). When you sleep, muscle tone decreases throughout your body and your throat muscles relax, causing the soft palate and the uvula (fleshy structure that dangles from the roof of your mouth) to vibrate as you breathe in and out.

## Rhinoplasty

**Frequently Question: I used to be addicted to cocaine. As a result, my past (I'm recovered) addiction left a hole inside my nose, between my nostrils. Can I have the hole filled?**

Answer Body: Most of the holes that come from cocaine are large and not treatable. A silicone button can in some cases be placed to close the hole. Dr. Sheen in Santa Barbara once specialized in cocaine-user nose treatment.

### **Frequently Question: What does a typical Rhinoplasty consultation entail?**

Answer Body: First, your doctor will discuss your goals with you and he will explain what can be achieved realistically. A good doctor will not just slim your nose or shorten it, rather he will take into account what your facial features and bone structure would benefit from. Be it a slimmer more defined or perhaps more turned up. Perhaps it is only a hump that is desired to be removed, making it unnecessary to even have a Full Rhinoplasty. There is no "one size fits all" when it comes to this procedure. It is all individual. Just like you!

### **Frequently Question: Are there any new techniques to repair a deviated septum. Is cauterization used? Does the nose always have to be packed after surgery?**

Answer Body: There are many ways to fix a septum. Generally cautery is used only on the turbinates or the initial incision on the columella in open techniques. The septum is like a wall frame in a house. The skin (mucosa) over it is like wall paper, and the cartilage on the inside is like drywall. You place an incision in the front part of the nose where it is hidden and raise the wallpaper off the wall. Then you can perform the necessary correction to the drywall (cartilage) and when you put the wall paper (mucosa/skin) back it looks like nothing was done.

Usually packing will be required however, some patients are eligible for tubes or straws placed in the center of the packing on each side so that direct airflow through the nose is possible. Most patients find this a psychological discomfort rather than a physical.

### **Frequently Question: Why are pictures taken before and after surgery?**

Answer Body: Pictures are taken prior to surgery to help plan the procedure. They are useful guides which surgeon will use in planning and preparing for your procedure. In addition, postoperative photos are taken to enable you and the surgeon to evaluate the results of the procedure.

### **Frequently Question: I have to get my cast off soon and wanted to know if it is going to hurt? Is there anything I can do beforehand?**

Answer Body: Most patients report a little tenderness when the cast is removed but if your surgeon uses a cotton swab saturated with alcohol to help remove the adhesive from the tape and glue you should be okay. Although it really shouldn't cause you great discomfort.

The sutures that may be removed may hurt when someone else removes it due to them not actually being able to tell when they are hurting you. They also may snip your flesh slightly when the scissors are used to cut the actual suture. This isn't as rare as it as it should be and solely depends upon the surgeon's meticulous nature.

### **Frequently Question: How is Rhinoplasty performed?**

Answer Body: Usually, Light Sleep Anesthesia is utilized. A Rhinoplasty can also be performed under General Anesthesia. The patient usually arrives early and medications are administered and supplemented with intravenous medication. After you are asleep and your vital signs are determined as safe and stable, local anesthesia is then applied to the nose. Surgery generally lasts about one and a half hours. The patient experiences no pain during the surgery.

A splint or cast is applied and will be worn for approximately 7 days. Many patients remember very little about the surgery. After the procedure is completed, the patient then recovers in a relaxed environment and monitored for a couple of hours before being driven home by a companion. You absolutely can not drive yourself home after a ANY procedure.

### **Frequently Question: When will the cast be taken off and does this hurt?**

Answer Body: The cast is removed approximately 7 days post-operatively. You may feel a slight stiffness in the upper lip as the swelling moves downward. This will subside in a matter of hours. you must be very careful not to bump it as it is vulnerable to breakage. It isn't a bone china figurine but it isn't as strong as your nose was before the rhinoplasty either. Don't worry, the bones will completely mend within 2 months.

If you had a rhinoplasty where the nostrils were narrowed (in the case of flared nostrils) you will have your sutures removed. This may sting a bit, especially since it is in a sensitive area. Although most patients still feel numb in the tip area and report only minor discomfort.

### **Frequently Question: Is it improper to ask to speak with previous patients who have had revision rhinoplasty done by the surgeon I am considering for the same procedure?**

Answer Body: Not at all! And you absolutely should. All surgeons should have a referral list of prior patients to discuss particulars and trade stories. I personally spoke with patients beforehand and as a matter of fact I am on my own doctor's referral list.

If you are wondering if all of the patients are going to be happy or receive compensation... I have found in my experience that there are about 1-2 patients who wish they had done more research beforehand or had gone to another doctor entirely so be advised that although this is unfortunate I think it is helpful to the patient considering the procedure to gain a well-rounded opinion.

### **Frequently Question: I'm going to get my nose done soon and my doctor also recommended me getting a chin implant because he says my nose will still appear 'big' since my chin goes a little further in then it should...Do people get both these procedures at the same time? And do you recommend I should do this?**

Answer Body: This is very common. A weak chin can and does make even an ideal sized nose look larger than it actually is. The chin augmentation is a relatively minor procedure when implants are used although it entails some risks all on its own. Such as lower lip numbness which can be remedied (usually) by removing the implant and trimming the implant so that it is not pressing up against the nerve as much.

### **Frequently Question: I have thick nasal skin and a surgeon I spoke with said that I may not be able to see much detail with my rhinoplasty? Is this true? Should I see another surgeon?**

Answer Body: For many patients with thick skin, the skin is thinned out in the surgery as the tip is worked on. This really adds a lot to help with definition. Excess skin length just shrinks away as the swelling decreases. Also, many patients with thick skin actually do better with rhinoplasties because the flaps that are elevated are so firm that you can do a lot more with the cartilages and it is better hidden. Very thin skin, shows every little imperfection.

Going on several consults and getting a second, third and even more opinions is a good idea in any case. "Shopping" for surgeons is a serious matter and you should be as comfortable as you can be with a surgeon, his skill, and his bedside manner.

### **Frequently Question: When will I be able to see the results?**

Answer Body: The nose will be very sensitive for approximately a month and a half. The patient will start to see a difference immediately but it will still be swollen. The swelling starts to generally disappear about a week after the cast is removed. Approximately 80% of the swelling and 100% of the discoloration are usually gone by 2 weeks after surgery. 90% of the swelling is gone by two months after surgery and the rest slowly disappears over the next year. Although the nose is still swollen after the first month, most people would not recognize this fact. The patient will not notice this swelling. Instead the patient will notice that the nose becomes more refined with better definition over the first year. The inside of the nose may be swollen for approximately three weeks after the surgery. Nasal breathing may be difficult during this time. If surgery is performed to straighten the nasal septum, an improvement in breathing will be appreciated at about 3 weeks.

### **Frequently Question: What is rhioplasty , Nose job ?**

Answer Body: Rhinoplasty is a surgical procedure that is usually carried out to reshape an individual's nose for cosmetic purposes. It can also be done to make structural changes and improve health conditions, such as breathing difficulty.

This very popular procedure can considerably enhance the appearance of an individual. The 'Nose Job' is usually carried out by a Plastic surgeon, a maxillofacial surgeon or an Otolaryngologist. It is important for the candidate desiring rhinoplasty to be at least 15 years old. Some of the cosmetic improvements achieved by this surgery include decreasing or increasing nose size, altering the tip of the nose, altering the nose bridge and changing the shape /size of the nostrils. It can help provide proportion to a person's face by improving the shape of the nose.

Risks that are integral to rhinoplasty include, burst blood vessels that can cause red spots and tiny scars on the underside of the nose and, infection. It may also be necessary to repeat the surgeries to get the desired effects. It must be borne in mind that 5-20% of rhinoplasties do not have a satisfactory outcome. There may be swelling and pain for a few days after the surgery.

Revision rhinoplasty, also called 'secondary rhinoplasty', is carried out to enhance or correct the outcome of a previous rhinoplasty. Sometimes there may be a need for three or more surgeries, to bring about the desired effect.

It is important to be realistic about the goal of the surgery and to synchronize it with what is surgically possible. By and large, rhinoplasty is carried out successfully in most cases.

### **Frequently Question: It's been five months since my surgery and now since I started to get back in shape and returned to my gym. I have notice that when I run and workout my nose drips. It is very runny, here I am walking away and every few min. I have to use a tissue. Is this just part of the healing stage or need I bring this up to my doctor? Its really annoying! Has anyone experienced this at all?**

Answer Body: Many patients complain of runny noses after rhinoplasty/septoplasty surgery. Some over 2 years. Most of the excess mucous production ceases at 9 months but can continue well after that. For now I can only advise to carry more Kleenex around as it may persist for several more months.

### **Frequently Question: What are the risks of Rhinoplasty?**

Answer Body: It is possible to develop tiny red marks and spots, this can be the result of blood vessels that may have burst under the skin's surface during the surgery. Although this is extremely infrequent it can happen and the spots may not ever go away. Scarring is minimal if the incisions are made inside of the nose, however when an open technique is used, or if narrowing of the nostrils is desired the scars made on the outside of the nose may be visible for an undetermined amount of time (usually until maturation). Even when a highly skilled surgeon performs your surgery, sometimes your body may not heal correctly or have adverse reactions causing undesired results. If so it is quite possible that additional surgeries may be needed. Some patients will lose their sense of smell, temporarily. Your nose may be slightly swollen and for over a year. Scar tissue may heal in a way that may cause a whistling sound to be heard when you breathe in and out.

This surgery has the highest rate of revisions. It seems that some people, especially mature people, may not readily accept the new look. Being accustomed to their old nose, they just can't seem to comfortably make the transition. Although there are a few rhinoplasties that just don't heal correctly, due to something as serious as human error (the surgeon's) or as simple as not having your head elevated enough or sleeping on one side a lot without a proper cast. The nose can pull to one side if the cast does not support it properly in the first week. Or quite simply, your body may just heal that way.

### **Frequently Question: Is it possible for someone to be allergic to dissolvable stitches? And if so, what would the reaction be?**

Answer Body: This isn't as uncommon as you may think. There are usually two types that promote a response in those who are sensitive to these sutures. These two are usually Absorbable Poly(glycolide/L-lactide) Surgical Suture material and Absorbable Gut Suture material.

If you experience redness and itchiness and sometimes pus formation - you very well may be allergic to the dissolvable type sutures. Sometimes the symptoms may not show up until about 3 to 4 weeks after surgery, if this happens, antibiotics can be given but it usually reoccurs. The best thing to do in some cases is to remove any of the left over material and replace it with nylon sutures. These sutures are usually removed in 10 days. Another option can be tissue glue although this isn't very mainstream for rhinoplasty.

Also be advised that when the skin gets red and itchy around a suture, be it absorbable or non-dissolving -- usually it is time for them to be removed. Your body knows and will tell you when your healing. Besides healing skin always turns itchy. Know the difference between typical irritation and an allergic reaction.

### **Frequently Question: I recently had a rhinoplasty & septoplasty, its almost 6 months & on one of my nostrils I still can hardly breath. Is this normal?**

Answer Body: Usually by the 6th month the breathing is most definitely restored. In fact, most patients notice improved breathing within a month to two months of surgery if they had difficulty breathing beforehand. I would suggest that you have a follow up with your surgeon and ask his advice or determine if the lack of airway is indeed from a deviated septum, redundant mucosa or enlarged or redundant turbinates. I do not know from your question if this is a constant occurrence or if this is at certain times of the day, while the body is horizontal or after exercise. These factors can also hinder breathing due to engorged tissue due to increased blood flow.

### **Frequently Question: What should I expect post-operatively?**

Answer Body: After your surgery your surgeon will have placed a pressure dressing over your eyes and a gauze pad underneath your nose to catch blood and mucous. You will remove the pressure dressing after a few hours or as specified by your surgeon. You may become sick from ingested blood during the procedure and vomit, expelling a black mixture of stomach acid and blood. This will pass as soon as the blood is expelled. It really isn't that much so you shouldn't be sick for long unless you were under general anesthesia -- you may become sick from this alone. Your doctor can give you special medications to remedy or prevent this. If you continue to vomit and/or run a high fever, contact your doctor immediately.

Your nose will be sensitive for approximately a month and a half although patients report no serious pain or discomfort. However, patients do report the discomfort of breathing with the packing and cast on the nose. Some patients feel claustrophobic feeling as if they cannot breathe. This feeling widely resembles a head cold or sinus infection. Only when the cast is removed do you feel slight discomfort, unless you bump it accidentally.

### **Frequently Question: When can rhinoplasty be performed?**

Answer Body: Extensive nasal surgery is generally avoided in children. There are major growth centers in the nose that affect the growth of the face. In cases of severe disfigurement due to accidents, surgery is performed in an attempt to restore the alignment of those centers. For lesser deformities surgery is deferred until after the child stops growing. Rhinoplasties performed on teenagers and young adults, it seems, are often beneficial to the social development and self confidence of the individual. The aging process is reflected in many ways in the nose and its correction can add youthfulness and freshness to the appearance.

### **Frequently Question: My PS mentioned a shot of cortisone to help some of the scar tissue. Why is this and what will this do?**

Answer Body: A Injections of Cortisone or Kenalog can help break up excess tissue. It is a common remedy to inject steroids such as these and also is used primarily to reduce swelling and inflamed tissue. Although care must be taken regarding excess use of these injections as it can break down the tissue too much.

### **Frequently Question: I am 16 and have been thinking of rhinoplasty for a long time. At what age is it safe to have a rhinoplasty?**

Answer Body: Usually rhinoplasty is performed at the earliest, 13 or 14 years of age in girls and 15 to 16 years of age in boys. Reason being, and it is a known fact, girls physically mature faster than boys and the collective goal is to perform surgery when at least 90% of the growth is complete. There are major growth centers in the nose that affect the growth of the face.

In cases of severe disfigurement due to accidents, surgery is performed in an attempt to restore the alignment of those centers. For lesser deformities surgery is deferred until after the teen stops growing. Rhinoplasties performed on teenagers and young adults, it seems, are often beneficial to the social development and self confidence of the individual.

In other words, this depends upon the stage of growth in the face as well as the gender of the patient. A qualified surgeon can better help you upon personal examination.

### **Frequently Question: How much does rhinoplasty cost?**

Answer Body: The cost depends on the complexity of the operation, operating room costs, anesthesia costs, and the surgeon performing the operation. If the operation is less difficult and requires less work, it could potentially cost less. It also depends on the airway portion of the case as this can also make a difference in cost as the insurance may pay for this portion of the operation.

There is no such thing as an average rhinoplasty cost. Many things influence the price. For example:

Is the surgery a primary rhinoplasty or a revision of previous work? Is the surgery a minor modification of an unwanted characteristic or a full rhinoplasty? Are grafts needed to give better shape or definition? Do not shop price! Look for an experienced surgeon with whom you feel comfortable-a surgeon that shares your aesthetic tastes.

### **Frequently Question: How Rhinoplasty "nose job" is done?**

Answer Body: The nose is the central feature of the face, many people are self-conscious of shape which they may regard as too big, too small or have some other feature which they dislike. The characteristics of the nose are inherited from parents and develop during adolescent years. It continues until the age of 16, when the nose stops growing. It is, therefore, unwise to operate before this age.

Surgery to reshape the nose is a very common plastic surgery procedure and it can both increase and decrease the size of nose. The shape of the tip, the bridge and also the nostrils can be changed as can the angle between the nose and the upper lip. Sometimes breathing difficulties can be corrected at the same time.

There is always some bruising and swelling, particularly around the eyes, which can take up to three weeks to completely disappear and you would need to wear a firm splint over your nose during part of this time. By the end of three weeks, swelling will have settled sufficiently for you to look normal to others and as if you had not had recent surgery. It is quite common for there to be some difficulty with breathing through the nose during the first week after the operation which disappears as the swelling settles

### **Frequently Question: What is rhinoplasty?**

Answer Body: Rhinoplasty is cosmetic surgery of the nose. It is also known as nasal refinement and the layman's term, nose job. With rhinoplasty, 'defects' from either birth or trauma can be corrected by infracturing or breaking the bones of the nose and re-setting them narrower and straighter. Outfracture is when the bones are broken and moved out to widen the nose.

A hump may be removed to give a more pleasing, symmetrical look. The cartilages of the nose can be molded and trimmed to create a more compact or pleasing shape. Rhinoplasty can soften an otherwise beautiful face by refining one's features.

### **Frequently Question: What is a "hanging columella"?**

Answer Body: A nasal columella is the external, and sometimes partial internal, fleshy section of the nose which separates the nostrils. When it is referred to being a hanging columella this section is often prominent or hangs down.

### **Frequently Question: I'm getting a deviated septum and a hump fixed all in one and I wanted to know what kind of scarring I should expect. Also, how long is it after the operation that I'll see good results?**

Answer Body: Usually, there is no visible scarring unless it is an open rhinoplasty. Some surgeons perform all of their rhinoplasties, open -- some, all closed. It solely depends upon the surgeon. You will find that most surgeons tend to disagree when it comes to technique. They either prefer open or they prefer closed, OR if they are highly skilled, know that it is case-dependent and different patients have different needs. If it is an open rhinoplasty the scar would be on the columella (the skin that separates the nostrils) sometimes resembling a straight line or a flattened z.

You can expect swelling, especially in the tip if you are having tip work performed. The swelling usually begins to subside within the first month but the end result may not be seen until at least 9 months [post-operatively]. Although this time period tends to lean towards a year and over.