CONCHAL CARTILAGE: BEYOND TIP CONTOURING IN REVISION RHINOPLASTY

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Alloplastic materials remain the primary choice in nasal dorsal augmentation but they are also the most common cause of revision rhinoplasty. Autologous cartilage grafts are therefore essential in safe and timely revision surgery. The complications and insufficiencies related with septal and rib cartilage grafts often restricts their utility. Conchal cartilage grafts, however, are safely obtained, readily available and easily contoured.

We present the efficient use of bilateral conchal cartilage grafts in Asian revision rhinoplasty.

INTRODUCTION

METHODS

The 4 patients in the study conducted in a tertiary hospital in the Philippines (Ospital ng Maynila Medical Center) underwent revision rhinoplasty using bilateral conchal cartilage grafts. Cases were as follows: (1) iatrogenic saddle nose deformity after septorhinoplasty, (2) silicon implant infection, (3) infected silicon oil injection (4) unsatisfactory primary rhinoplasty.

Bilateral conchal cartilage harvest was done and various graft configurations designed according to each patient’s needs.

RESULTS

All patients were satisfied with the aesthetic and functional outcome. On follow up, there was no incidence of hematoma formation, infection, graft resorption and displacement.

CONCLUSION

The flexibility and tensile strength of conchal cartilage allows for correction of both nasal dorsal structure and tip contour. With efficient harvesting and intraoperative application, these grafts are sufficient for correction of mild to moderate saddle nose deformities, infected silicon oil injections and alloplastic implant rejection. Bilateral conchal cartilage grafts provide long term structural stability and favorable aesthetic outcomes in Asian revision rhinoplasty.