It Came From La Crosse: Pt 2

Rhinophyma Management/Nasal Obstruction

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GUNDERSEN HEALTH SYSTEM®

No financial disclosures

Norwood Scale

Туре	Example	Туре	Example
1		4	
2		4A	
2A		5	
3		5A	O
3 vertex		6	0
3A		7	

Gundersen Head and Neck

The Norwood Scale



Type I. Minimal hair loss



Type V. Patterns at both sites are bigger but a thin division line is still present.



Type II. Insignificant hair loss at the temples.



Type VI. The bridge is gone but several strands of short fine hair may remain



Type III. The first stage that requires treatment.



Type VII. Most severe form of hair loss. Little hair on the front or top of the head.



Type IV. Bigger pattern on the vertex and hairline.

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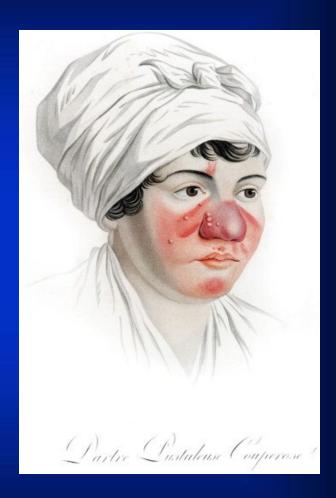
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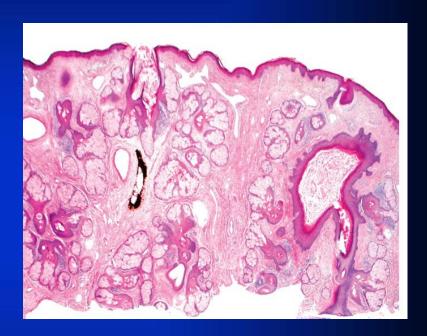
Rhinophyma

- Phymatous Rosacea
- Can develop from any form of rosacea
- Presents in 5th decade or later
- Male:Female > 5:1



Histopath

- Fissures, nodules
- Sebaceous hyperplasia
- Inflammation
- Cystic dilated infundibula
- Telangiectasias
- Demodex Folliculorum
- Basal cell carcinoma risk



History

- Can be very disfiguring
- Develops slowly
- Patients often present due to worsening pustules
- Often have nasal obstruction
- "I've always been told nothing can be done"





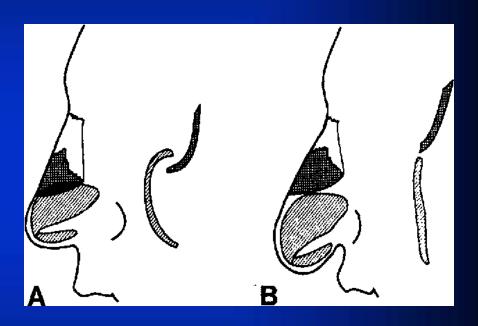
Treatment

- National Rosacea Society Classification
 - 0: Absent
 - 1: Follicles are patulous, but no contour changes, color change
 - 2: contour change without nodularity
 - 3: change in contour with nodular component
- Treatment
 - 1: Doxycycline, topical metronidazole, oral isotretinoin
 - 2: CO2 laser
 - 3: Dermaplaning and Laser

Nasal valve Stenosis

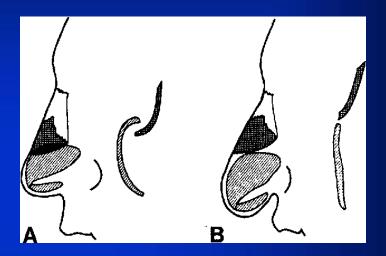


Tip Descent



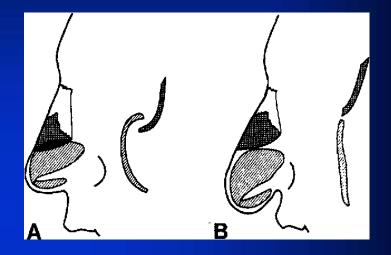
Davvit. Otolaryngol Head Neck Surg 1990 Sep;103(3):462-7

Rhinolift after Dermaplaning



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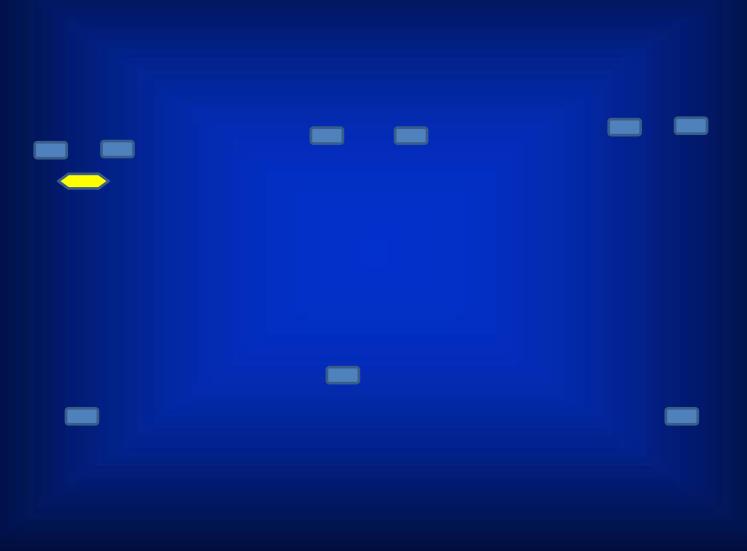
Rhinolift after Dermaplaning



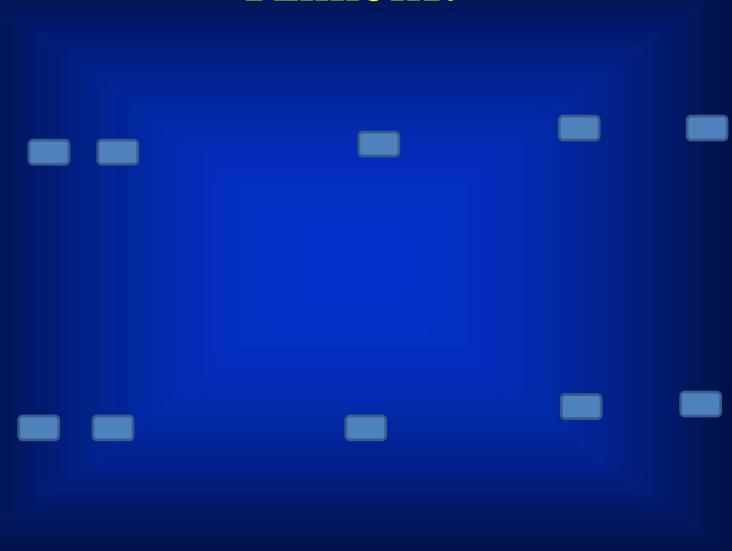
- -Remove an ellipse of skin from nasal dorsum/supratip
- -Dissect subperiosteal/subperichondrial plane
- -Suture suspension of LLC +/- other maneuvers
- -Layered Closure

Davvit. Otolaryngol Head Neck Surg 1990 Sep;103(3):462-7

Rhinolift after Dermaplaning







Complex Preop Test

Case Series

- 19 Patients over 9yrs
- 12 Rhinolifts
- Follow up from 6 mo to 5 yr median of 1.5 yr
- No wound breakdown from ellipse removed and dissection
- 11 with substantial improved nasal breathing
- Subsequent Septum and nasal valve surgery in one at 2 years
- No pre and post op questionnaire
- No basal cell
- 2 Recurrence of rhinophyma, tx'd with in office procedure

Discussion

- Safe approach in the setting of large rhinophyma with tip ptosis and nasal obstruction
- Not technically challenging
- Seems to add about 30 minutes to case
- Sample size too low for proper statistical comparison to rhinophyma resection alone

References

Shuurman M. J Cutan Pathol. 2015 Aug;42(8):527-35

Davvit. Otolaryngol Head Neck Surg 1990 Sep;103(3):462-7

Criber B. J Am Acad Dermatol. 2013 Dec;69(6 Suppl 1):S2-14

Questions?

Interpolated flaps are great