

# **Cleft septorhinoplasty**

This leaflet gives information about cleft septorhinoplasty, including the benefits, risks and alternatives, and what to expect when you come into hospital. If you have any questions, please speak to a doctor or nurse caring for you.

#### What is a cleft septorhinoplasty?

A cleft septorhinoplasty is the surgery to reshape the nose for patients who were born with a cleft lip and palate. This surgery helps to improve the function and/or appearance of the nose.

Babies born with a cleft lip and palate might also have a difference in the shape of their nose, compared to babies born without a cleft. The shape may have been addressed surgically during the lip repair as an infant. Some patients may have also had revision surgery to re-shape the tip of the nose between 5 and 10 years old.

However many nasal surgeries have been done in early childhood, the significant nasal growth that happens during puberty can create an uneven nasal shape. This surgery is usually discussed towards the end of puberty. The exact timing is decided with the surgeon and they will also consider the child's psychological and physical maturity, and the bone structure of their face. This is usually from ages 17 to 18 years for women, and 19 years for men.

## Benefits of a cleft septorhinoplasty

Common reasons to have a cleft septorhinoplasty are to:

- improve breathing through the nose
- reshape the nasal tip
- increase projection of the nasal tip
- · change the size or shape of the nostrils
- straighten an uneven nose
- change the profile by lengthening a short nose
- change the profile by removing bumps or dips in the bridge of the nose
- change the size and shape of the nose to adjust facial balance

## **Risks of a cleft septorhinoplasty**

There are risks and potential complications associated with every surgery. The risks specific to this operation will be discussed with you in more detail in clinic. Some of the risks are:

- infection
- bleeding
- bruising
- persistent swelling
- septal perforation (a hole in the septum, which is the structure between your nostrils)
- visible or tender scar
- reduced airflow
- reduced sense of smell
- change in skin sensation (numbness or pain)
- your nose may still be uneven
- need for more surgery



# **Giving your permission (consent)**

We want to involve you in decisions about your care and treatment. Once the procedure, including all the risks and potential complications, have been explained, you will have the chance to ask questions to make sure you fully understand what will happen. If you decide to go ahead, you will be asked to sign a consent form. This states that you understand what the procedure involves and agree to have the treatment.

If you would like more information about our consent process, please speak to a member of the cleft team.

## Speaking to a clinical psychologist

We have a team of clinical psychologists who work in the cleft service, and one of them should be present at your multidisciplinary team (MDT) clinic appointments.

It might be helpful to speak with one of the psychologists separately (this can be arranged to coincide with your other MDT appointments, or be done remotely if more convenient). The psychologists are used to having discussions with patients to help with their decision making. They can help you think about the benefits and risks of having the treatment, and to talk about your expectations of the surgery. They can also make sure there are the right levels of support and resources in place so your recovery can go as well as possible.

If you would like more information about the clinical psychology team in the cleft service, please contact them (details at the end of leaflet).

## **During a cleft septorhinoplasty**

The surgery is done under a general anaesthetic. Local anaesthetic is also used to reduce discomfort after surgery. The surgery usually takes 2 to 4 hours.

An open approach is used in this surgery because this allows us to clearly see the nasal cartilages. An open septorhinoplasty usually needs a small cut (incision) between the nostrils to gain access to the nose.

The skin is separated from the cartilage and bone. Sometimes extra tissue (called a graft) is needed. We try and use cartilage from the nasal septum as it usually needs straightening. If a lot of graft material is needed to reshape the nose, (for example, if the skin and soft tissues are very scarred and stiff) extra cartilage might be taken from your ears or ribs. This would be discussed with you during the consent process.

The nose is closed with fine stitches, and soft splints may be placed (temporarily) inside the nose to support the septum. Splints are also frequently used on the outside of the nose to help maintain the shape of the skin and reduce swelling. Tapes and a splint are placed over the nose to support and protect it for 7 days. You will usually need to stay in hospital overnight. The morning after surgery you will be reviewed by our cleft team, and any internal splints will be removed, and you will be allowed to leave, unless there is a problem.

#### Will you feel any pain?

After surgery, most patients have mild to moderate discomfort and swelling. This can be controlled with regular pain killers. We will prescribe oral (by mouth) paracetamol and ibuprofen for this.

## After a cleft septorhinoplasty

After recovering from anaesthetic, you will be able to eat and drink as soon as you feel comfortable. You will also be encouraged to move around to help prevent deep vein thrombosis.

Your face might be swollen and bruised (especially around the eyes) for 2 to 3 days. Sleeping with your head propped up (using a couple of pillows) might help to reduce this.

Most patients take a week off work or school. If you have a physically demanding job, you might want to take 2 weeks off so that the wound can heal fully. Usually, you will have a follow-up appointment 5 to 7 days after surgery in an outpatient clinic. This will include a wound review, and we will remove any splints or stitches.

After 1 week you can return to work or school, and you can walk for exercise, but you must not do any sports, including swimming.

Normal hobbies and all sports (including skiing and contact sports) can be resumed after 6 weeks.

Most of the swelling goes down within a few weeks, but it takes up to 1 year for your new nasal shape to fully settle. During this time, your nose will look normal but you might notice gradual changes in the appearance of your nose as it refines to a more permanent outcome.

#### **Follow-up appointments**

You will have another appointment with the cleft consultant surgeon about 6 weeks after the surgery, to check that you are recovering well from the operation.

#### **Useful sources of information**

Cleft Lip and Palate Association (CLAPA), phone 020 7833 4883, email info@clapa.com web www.clapa.com

#### **Contact us**

If you have any questions about any information in this leaflet, please contact us, phone 020 7188 1321, email cleftservices@gstt.nhs.uk

#### Cleft service clinical psychology team

Call the therapies booking officer and ask to be put through to a psychologist, **phone** 020 7188 7188, extension 58610, **email** cleftpsychology@gstt.nhs.uk

For more information on conditions, procedures, treatments and services offered at our hospitals, please visit **web** www.evelinalondon.nhs.uk/leaflets

#### **Pharmacy Medicines Helpline**

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline. **t:** 020 7188 8748, Monday to Friday, 9am-5pm

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