

# Experts develop evidence-based clinical practice guideline on rhinoplasty

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The American Academy of Otolaryngology—Head and Neck Surgery Foundation addresses the limited literature and availability of multi-disciplinary clinical practice guidelines accessible to clinicians and patients regarding rhinoplasty, with the development of the Clinical Practice Guideline: Improving Nasal Form and Function after Rhinoplasty, published today in *Otolaryngology-Head and Neck Surgery*.

This is the first evidence-based guideline developed to address rhinoplasty with the goal of providing clinicians, and those involved in the management of these patients, with a logical framework to improve patient care by using a specific set of focused recommendations based upon an established and transparent process that considers levels of evidence, harm-benefit balance, and expert consensus.

"Rhinoplasty ranks among the most commonly performed cosmetic procedures in the United States, with over 200,000 procedures reported in 2014," said Lisa E. Ishii, MD, MHS, chair of the guideline group. "And prior to these guidelines, limited literature existed on standard pre- and post-management care for patients undergoing this procedure. These guidelines are crucial in building unanimity regarding the peri- and post-operative strategies to maximize patient safety and optimize surgical results for patients."

According to the American Society of Plastic Surgeons Annual Plastic Surgery Report (2014), of the approximately 217,000 rhinoplasty procedures performed, 75 percent were performed on women, with the

most common, 32 percent, age range being between 20-29 years. Total expenditures on rhinoplasty in 2014 exceeded just over one billion (U.S.) dollars and was third only to breast augmentation and fillers. People have rhinoplasty to address some of the following: bumps, humps, or dents on the bridge of the nose; wide or flared nostrils; twisted or crooked nose; upturned, overly round, drooping, or hooked nose tips; improvement of nasal function; or correction to nasal airway obstruction, to name a few.

The guideline, which includes research to support effective identification and treatment of rhinoplasty candidates, was developed as a quality improvement opportunity by creating clear recommendations to use in medical practice. In the guideline are several resources, including the Summary of Evidence-Based Statements, Frequently Asked Questions for Rhinoplasty Patients, Counseling Points for Patients with Obstructive Sleep Apnea (OSA) to Discuss with their Providers, and Frequently Asked Questions for Patient Counseling/Education Regarding Pain Management and Discomfort.

The guideline is endorsed by American Academy of Facial Plastic and Reconstructive Surgery (AAFPRS), American Society of Plastic Surgeons (ASPS), American Academy of Sleep Medicine (AASM), American Rhinologic Society (ARS), Society of Otorhinolaryngology Head-Neck Nurses (SOHN), American Society for Aesthetic Plastic Surgery (ASAPS), American Academy of Pediatrics (AAP), and The Rhinoplasty Society.

"We are particularly delighted to have had input and collaboration from all stakeholders to develop guidelines that emphasize both form and function when performing rhinoplasty," said Dr. Ishii.

**More information:** Lisa E. Ishii et al, Clinical Practice Guideline: Improving Nasal Form and Function after Rhinoplasty, *Otolaryngology-*

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