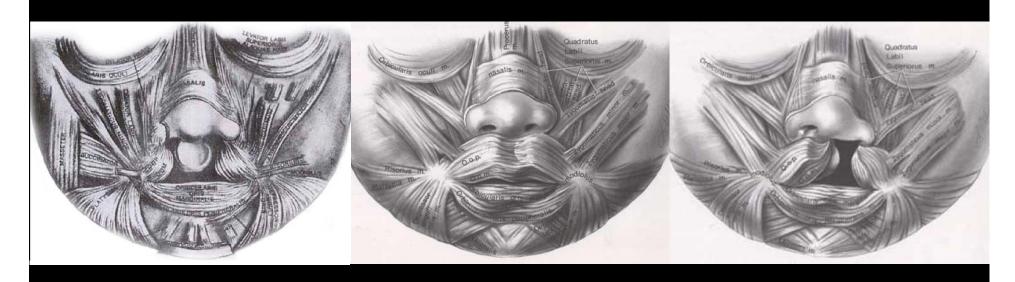
# Cleft Rhinoplasty Complexity of the Cleft Nose and the Philosophy of its Management

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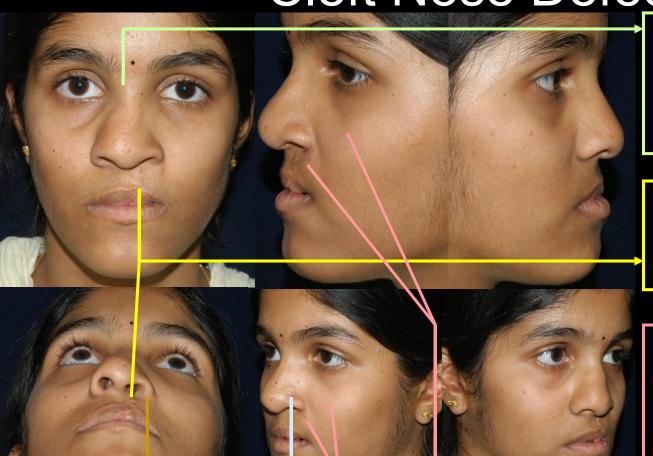
#### Cleft Rhinoplasty



The cleft nose, unlike other nasal defects, is a defect of the lip, muscles of the nose, skin over the nose, underlying bone and scar tissue in addition to the defect of the nose



#### Cleft Nose Defect



SEPTAL DEVIATION towards non cleft side due to lateral position of anterior nasal spine

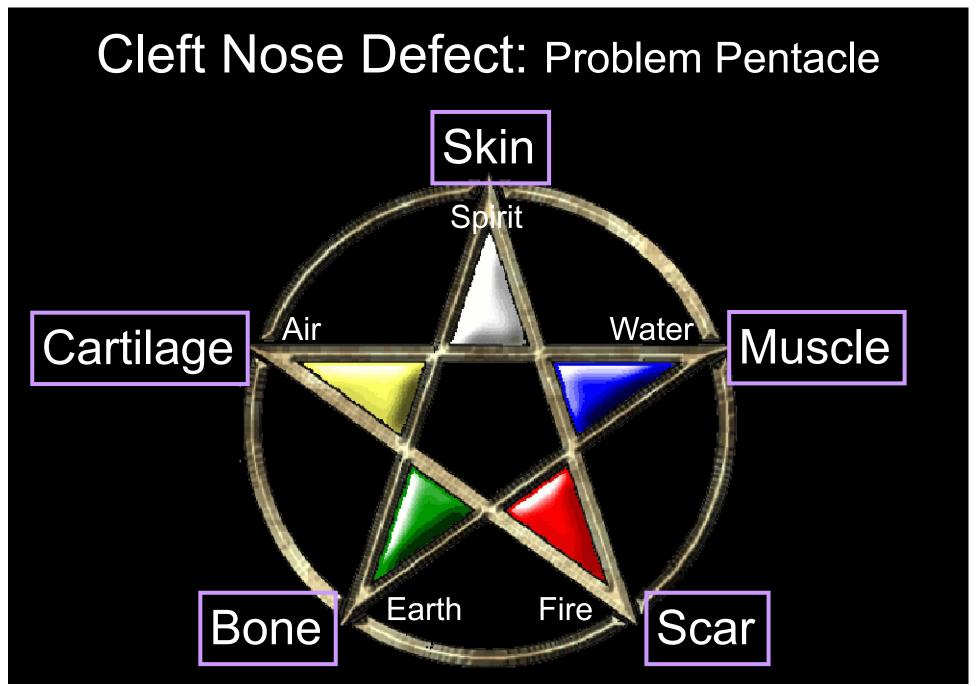
SCAR of the cleft lip surgery distorting the ala

Underlying alveolar and piriform BONY DEFECT not stabilized Maxillary Hypoplasia on cleft side

NASALIS MUSCLE not positioned during primary lip repair

OVERLYING SKIN stretched over the nostril on cleft side





#### Cleft Rhinoplasty

Treatment for the cleft nose has to include all or some of the following

Rhinoplasty with

Secondary lip repair,

Alveolar bone grafting and

Maxillary advancement

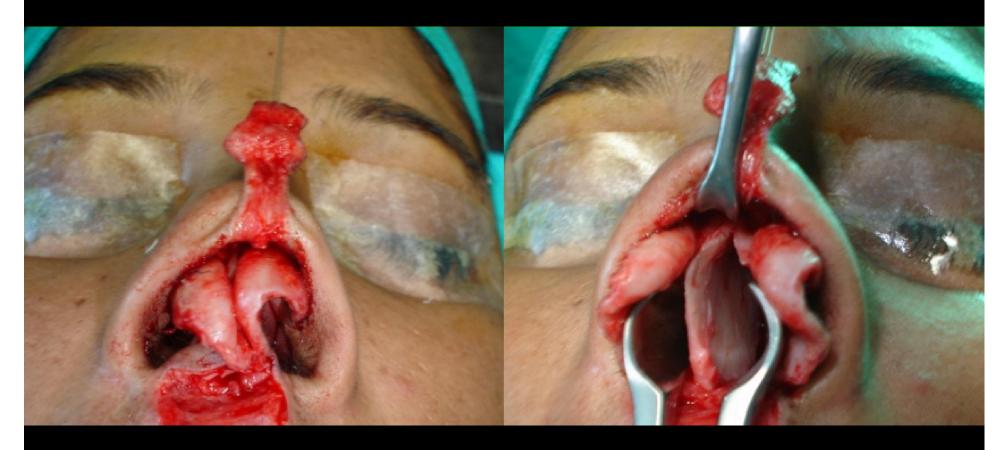
We should call it PROFILOPLASTY

#### Anatomy of cleft nose: Unilateral Cleft



- The alar cartilages will not be at the same level
- The septum will be deviated towards the non cleft side

#### Anatomy of cleft nose: Bilateral Cleft



- The alar cartilages may be at the same level but will be buckled
- The septum will not be deviated but will also be buckled

**Open Rhinoplasty** 

1. Using Septal Graft

2. Using Costo-chondral or alloplastic implants

#### The Need for Maxillary Advancement

Prior to Rhinoplasty

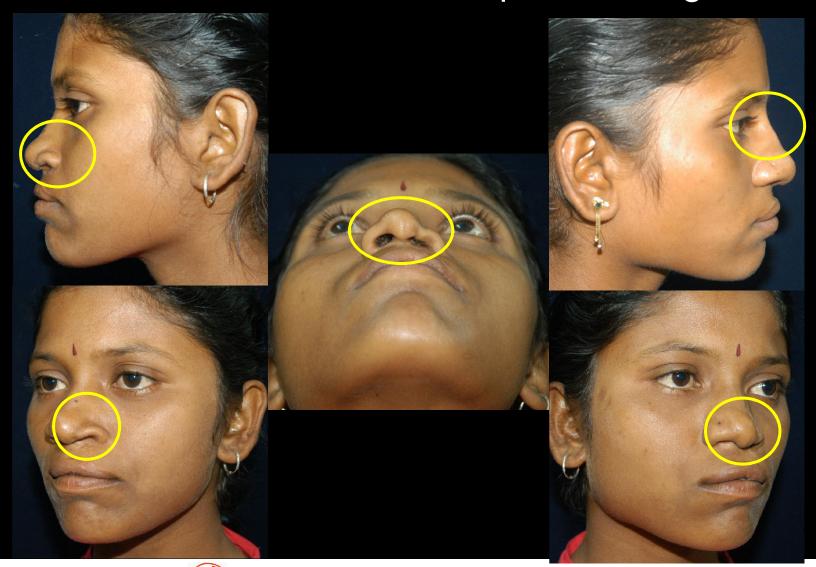


#### The Need for Bone Grafting

Prior to Rhinoplasty



Unilateral Cleft with Septal Grafting



Unilateral Cleft with Septal Grafting





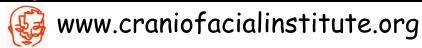
Marking and opening the nose



Unilateral Cleft with Septal Grafting



- Exposing the septum
  - Note the extreme angle of caudal part of the septum due to its attachment to the anterior nasal spine which in cleft defects is lateralized towards the cleft side
  - Septoplasty is done by resecting the posterior and inferior end of the septum



Unilateral Cleft with Septal Grafting



- Closing upper lateral cartilage
  - The upper lateral cartilage needs to be opened when there is gross deviation of septum to release the bend in the septum



Unilateral Cleft with Septal Grafting

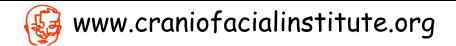


 Positioning the strut made from the excised inferior and posterior part of septum

# Surgical approach: Unilateral Cleft with Septal Grafting



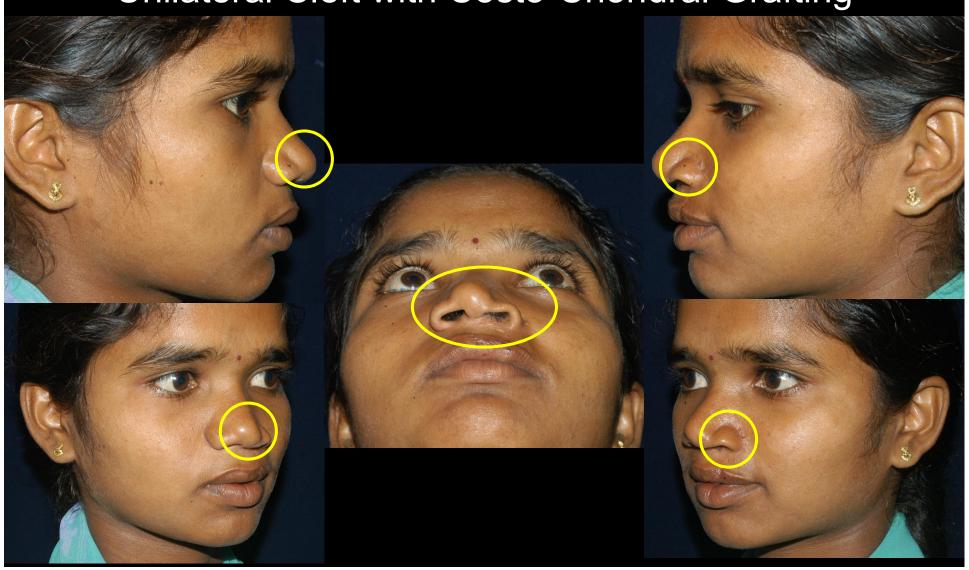
Closure



Unilateral Cleft with Septal Grafting



Unilateral Cleft with Costo-Chondral Grafting



Unilateral Cleft with Costo-Chondral Grafting



Exposure of the alar cartilages

Unilateral Cleft with Costo-Chondral Grafting



Exposure of the septum



Unilateral Cleft with Costo-Chondral Grafting



- Septoplasty
  - Done by resecting the posterior and inferior end of the septum

Unilateral Cleft with Costo-Chondral Grafting



 Dissecting both sides of the alar cartilage to ensure more lift of the cartilages

Unilateral Cleft with Costo-Chondral Grafting



Carving and positioning the costo-chondral dorsal graft

Unilateral Cleft with Costo-Chondral Grafting



Suturing the alar cartilages to the dorsal graft

Unilateral Cleft with Costo-Chondral Grafting



Positioning and fixing the strut

Unilateral Cleft with Costo-Chondral Grafting



 Positioning the Baton graft to strengthen the ala on the cleft side

Unilateral Cleft with Costo-Chondral Grafting



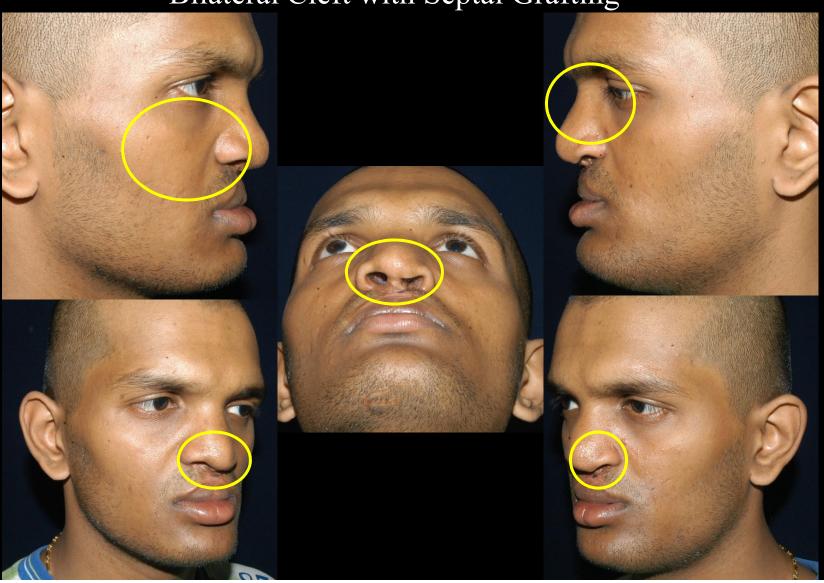
Closure



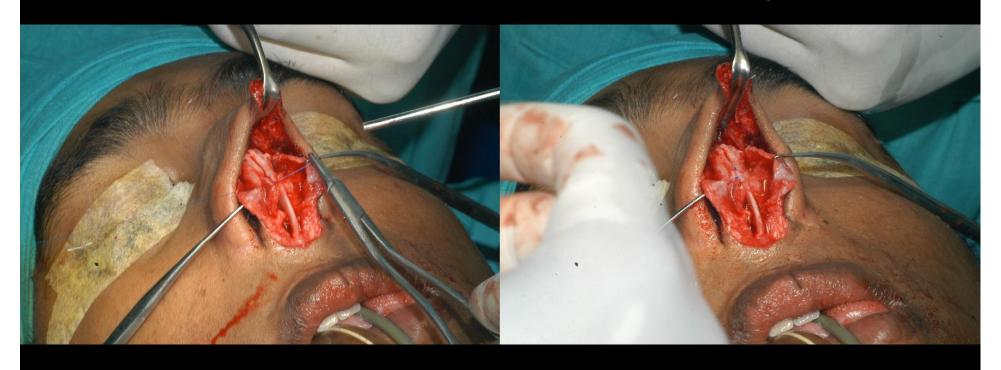
Unilateral Cleft with Costo-Chondral Grafting



Bilateral Cleft with Septal Grafting



Bilateral Cleft with Septal Grafting



- After exposing the ala and septum as was done in unilateral cleft nose defects, septoplasty is done.
- Mucoperichondrium is closed

# Surgical approach: Bilateral Cleft with Septal Grafting



 Transdomal suture is placed to lift the alar cartilage and remove the buckling

# Surgical approach: Bilateral Cleft with Septal Grafting

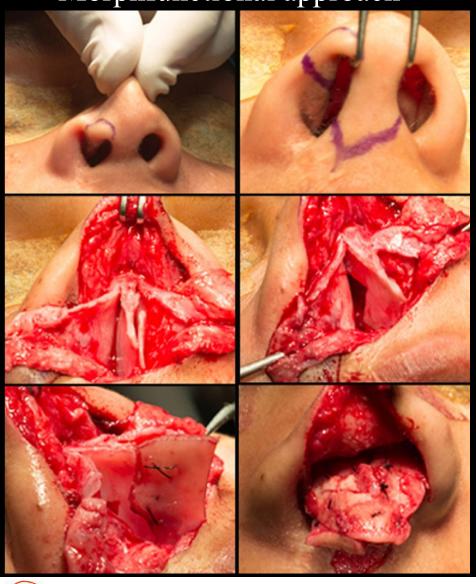


- After transdomal sutures are placed on both alar catilages they are tied together to get interdomal suture.
- This is done after the strut is placed and secured.

Bilateral Cleft with Septal Grafting



Morphfunctional approach





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