ALAR BASE RESECTION - MEDIAL FLAP TECHNIQUE

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Abstract: The primary goal of alar base resection is the narrowing of nasal base while preserving or recreating normal contour. The standard wedge resection, as proposed by Weir, does narrow the base but too open at the expense of normal appearing nostrils.

25 patients were taken up for corrective septo-rhinoplasty of which 5 patients needed alar base resection. The medial flap technique as proposed by Jack Sheen was adopted and normal appearing nasal base achieved in all cases.

Keywords: Alar base resection, medial flap technique

INTRODUCTION

The primary goal of alar base resection is the narrowing of nasal base while preserving or recreating normal contour.

This obvious basis concept is frequently over looked. Standard wedge resection, as proposed by Weir, does narrow the base but too often at the expense of natural-appearing nostrils. However, appropriate pre-operative planning and slight modification in technique can achieve the goal of a narrow alar base with natural contours.

For pre-operative planning it is useful to categorized alar bases as types I, II and III.

Type I: Heavy alar lobules with nostrils of proper size.

Type II: Heavy alar lobules with slightly large nostrils.

Type III: flaring of the alar base where the curve of the lobule is parallel to that of the nostrils.

In the present study of septo-rhinoplasty 25 cases were taken up for corrective surgery. Of these in 5 cases alar base resection was felt necessary after reduction rhinoplasty to correct the flared nostrils. We adopted the technique of medial flap alar base resection as advocated by Jack Sheen to achieve normal nasal contour and successful post operative result were documented.

MATERIAL AND METHODS

The present study was conducted on 25 patients requiring corrective septo-rhinoplasty from April 2002 to October 2003. In the department of ENT and Unit of Plastic and reconstructive surgery

in J.N. Medical College, AMU, Aligarh. These patients were seeking surgery either due to cosmetic reasons or organic symptoms due to altered nasal anatomy and physiology.

Five patients were taken up for alar base resections after intra-operative assessment and medial flap technique was adopted to correct alar base.

SURGICAL STEPS

An incision was made with a No.11 blade along the alar base, progressing medially to within 3 mm of the rim. Then a back cut is made to create a small triangle of skin extending from the nasal sill (as shown in Fig. B). A superior cut then completes the excision. When the incision is closed the flap provides a small arc of tissue that ensures a smooth, natural curve to the nasal sill.

An oval contour was achieved at the alar base and no Wedging showed that the medial flap technique was a better option, to standard alar base resection.

DISCUSSION

An approach to alar base requires meticulous pre-operative planning and per operative assessment of the tip in relation to the reduced nasal dorsum. Many a times, tip plasty or alar base resection is simply not needed, especially in the North Indian population who have thick nasal skin and a slightly rounded nasal contour. When the height of the tip is decreased by lowering

A: Diagrammatic representation of standard alar base resection
B: Medial flap technique of alar base resection

Fig II : Pre op. worm's eye view showing collapsed rt. Ala

the dorsum and by resecting the angle of the septum, bowing of nostrils will result. Obviously, large ala, marked flaring and a very prominent tip all require alar base resection to finish off the rhinoplasty. However, it is not always possible to anticipate the need for resection and per operative assessment is of more importance. In our series out of the 25 cases taken up for corrective septo-rhinoplasty only 5 i.e. 20% required alar base resection. It was seen that retaining the medial flap creates a smooth nasal sill, which was more natural appearing in comparison to the notched nasal sill of Weir's technique.

REFERENCES

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Fig III : Post op. worm's eye view - widening of ala achieved

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OTO-PHONO Workshop 2006

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