The American Academy of Facial Plastic and Reconstructive Surgery (AAFPRS) recently released survey results about facial plastic surgery trends last year, and surveyed AAFPRS members noted a 10 percent increase in rhinoplasty in 2013 over 2012. In fact, in 2013, according to the survey results, the most popular cosmetic surgical procedures were rhinoplasty followed by facelifts, blepharoplasty, septoplasty, and ablative skin resurfacing. Nose jobs remain the most requested surgical procedure for both men and women under the age of 35 (90 percent and 86 percent), respectively. And the survey showed that for the most part, the average number of procedures has declined or remained flat since 2009, with the exception of rhinoplasty, which has increased among both genders, and Botox, which has increased among women but decreased among men back to the level reported in 2011.

Total projected dollars spent on procedures among AAFPRS member physicians is $1,164,105,482, with the highest amounts being spent on facelifts ($209,697,134) and rhinoplasty ($205,987,944). The average cost per rhinoplasty procedure was $5,151 in 2013.

Q. The AAFPRS Survey Results Showed A 10 Percent Increase in Rhinoplasty in 2013 Over 2012? Are You Seeing A Similar Trend in Your Practice? If So, Why?
A. Yes—in fact, in my practice, I would venture to say the increase has been even higher, especially in ethnic patients and teenagers. The trend for increased rhinoplasty procedures is likely due to an increased acceptance of plastic surgery in general. Improved outcomes—seeing less disastrous outcomes in media reports and more positive news—are other factors. As non-invasive cosmetic procedures continue to become more socially acceptable, so, too, do procedures like rhinoplasty. More people are exposed to aesthetic enhancements and therefore it becomes less of a taboo to have plastic surgery.

Q. Who Is The Typical Patient That Presents Most Commonly for Rhinoplasty? Are There Patients Who Are Not Good Candidates?
A. Men and women are actually presenting in equal numbers for rhinoplasty in my practice. This is very different than what we see with other cosmetic procedures. It is more common for patients to be younger, although patients in their 50s and 60s are asking more often to have nasal enhancements along with their facelifts. The number of procedures being performed among ethnic populations is growing significantly.

As always, determining if a patient is a good candidate depends on the patient’s physical and emotional health, as well as the patient having realistic expectations.

Q. When a Patient Presents for Evaluation for a Nose Job, How Do You Assess the Patient? Are There Trends in the Types of Alterations Patients Are Looking for From Rhinoplasty?
A. Patients most commonly present for rhinoplasty because of a certain flaw they don’t like about their nose. The recent AAFPRS survey actually showed a decline in the number of patients who present for cosmetic procedures asking to look like a particular celebrity. Only three percent of facial plastic surgeons reported that they had seen an increase in requests for celebrity procedures in 2013—these requests appear to be on the decline.

We use 3D morphing software to help patients see how they could potentially look after rhinoplasty. We often find that even though a patients thinks they would like one type of rhinoplasty, they find that they would actually prefer...
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other changes to be made (for instance to their nostrils as well as the bridge), or that the results from a type of rhinoplasty they hadn’t considered could produce more desirable results. In these cases, 3D digital modeling can allow the physician and patient to discuss the potential changes in outcome of surgery, thereby reducing the risk of misunderstanding. 3D digital modeling technology is complex, and instead of simply altering a 3D image in one way, it takes a patient’s unique facial measurements into consideration. As a result, the surgeon is provided with a reliable facial analysis, precise measurements and ratios, and a highly realistic prediction of the post-operative result. The technology allows surgeons to view the patient’s face from a number of angles as they carry out the surgery. Having an image to work toward is highly useful, not to mention trustworthy; it acts as an approved guide that the patient has given to the doctor.

It’s very important to set realistic expectations for patients. Otherwise, I don’t offer surgery.

And according to the AAFPRS survey, for the most part, facial plastic surgeons are seeing less than 25 percent on average of both male and female rhinoplasty patients who are dissatisfied and seeking revisions.

Q. HAVE THERE BEEN ANY ADVANCES IN RHINOPLASTY SURGERY TECHNIQUES THAT HAVE ALTERED HOW YOU PERFORM THIS PROCEDURE?

A. Yes! Structural support of the nose is vital so it remains stable for a long time. I also look at the entire face so the nose is in harmony with every feature rather than treat it as an isolated entity.