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OBJECTIVE AND SUBJECTIVE ASSESMENT OF COLUMELAR SCAR IN OPEN RHINOPLASTY

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Introduction

The first description of open access for rhinoplasty through transcolumelar incision was done by Rethi in 1934. Many authors have suggested and defended this technique mainly because of the excellent exposition when compared to the close technique. However the resultant scar is the main disadvantage cited. The purpose of this paper is to asses subjectively and objectively the columelar scar in patients who were submitted to open rhinoplasty.

Methods

There were evaluated 32 patients submitted to open rhinoplasty at Service of Otolaryngology of Hospital Geral de Bonsucesso from august 2003 to august 2004. It was used to access a marginal incision associated with an transcolumelar inverted "V" incision and suture of this last one with mononylon 6.0. After six months of follow-up, subjective evaluation was performed, with a 4 questions questionnaire, and objective evaluation, through critical analysis of each patient scar (any result different than a level, barely visible line, without difference of coloration with adjacent skin was considered unsuccessful).

Results

Subjective analysis presented 1 unsatisfactory result (3,12%), of one white patient that reported the presence of a columelar scar in her quotidian. In the objective evaluation also was found 1 unsatisfactory result (3,12%).

Conclusion

The Results of this paper were similar to ones in literature. Although the discussion between open and close rhinoplasty sustains, we can conclude that seldom the scar bothers the patient or presents an objectively unsatisfactory result.

