

SURGICAL REPAIR IN RHINOPHYMA

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A 55-year-old male Nepali patient developed rhinophyma. He had rosacea and history of intake of alcohol for a long duration. The cosmetic defect was removed by surgical repair.

Key words : Rhinophyma, Surgical excision.

Rhinophyma is an irregular, disfiguring, hypertrophic distortion of the nose varying in degree, type and extent, occurring in alcoholic men past 50 years of age. It is often associated with rosacea.¹

Case Report

A 55-year-old Nepali male had been having erythema over the butterfly area of the face for the last 10 years. Off and on attacks of erythema became acute. It was neglected and four years back, swelling started over the tip of the nose which went on increasing in size. He took various types of treatment but got no relief. He also noticed itching over the nose off and on, more on exposure to sunlight. He was consuming alcohol in heavy amounts daily for the last 20 years. He was married and had five children. No one else in the family had such a type of disease. Swelling over the external nose involved the tip, dorsum and alae of the nose with patulous orifices and irregular craggy surface (Fig. 1). Foul smelling keratinous discharge could be expressed from the large patulous follicular openings. There was also erythema over the prominence of cheeks, nose and forehead. Telangiectasia and oedema were also present at places.

Histopathological examination of the tissue showed dilated sebaceous ducts, filled with keratinous material. Size and the number of



Fig. 1. Bulbous swelling over the nose with patulous orifices.

sebaceous glands were increased. The upper dermis had chronic inflammatory infiltrate and dilated capillaries. There was no evidence of carcinomatous change.

Cosmetic excision was performed. The resurfacing was done by thick split thickness skin graft taken from the medial aspect of the arm to give the colour-texture match to the nose.

Comments

Rhinophyma may occasionally develop a basal cell carcinoma or squamous cell carcinoma.² Our patient had a remarkable improvement by excision and full thickness graft over the nose.

References

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