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an interview with Pioneer Facial Plastic Surgeon, Sam Rizk, M.D., F.A.C.S.
by Wendy Lewis
Bone structure, skin type, age and ethnic background all play a role in determining his surgical plan. In fact, Dr. Rizk has become an expert in refining noses for people from diverse ethnic backgrounds. In many cases, African American, Middle Eastern/Mediterranean, Latino-Hispanic and Asian patients may tend to have thicker skin that requires specialized techniques to resculpt the nasal tip. “Rather than the cartilage excising techniques used on individuals with thin skin, these rhinoplasty patients often require more skill and expertise. It is not uncommon to see cases where the nasal tip is quite bulbous or there is a lack of support,” said Dr. Rizk. “Having thicker skin with very little cartilage support, or where the cartilage is weak creates a more complex operation. These types of rhinoplasties often require cartilage grafts from the patient’s own septum or from behind the ears, and defatting the thick skin to achieve excellent definition.”

Dr. Rizk is one of only a handful of surgeons who performs both open and endoscopic closed techniques for rhinoplasty. He first published an article on endoscopic rhinoplasty with small incisions made inside the nose in the Annals of Plastic Surgery in 1997. While each rhinoplasty procedure is tailored to the individual patient, there are two basic approaches, commonly referred to as open and closed. Open rhinoplasty refers to the technique where a small incision is made at the columella (the skin separating the right and left nostrils). With closed or endonasal rhinoplasty, all incisions are internal inside the nose, so there is no possibility of visible scars. Typically, the closed approach is employed when the surgical objective is to reduce a bump or straighten the bridge. An open rhinoplasty may be selected when the skin is very thick, there is significant asymmetry in the nasal tip or when certain types of implants are required.

For decades, plastic surgeons have preferred the closed approach because of the lack of scarring and quicker healing process. However, Dr. Rizk believes that philosophy severely limits the results, particularly with ethnic rhinoplasties. He does not think that a surgeon should limit a patient’s choices and the potential outcome because he has been trained in only one of these techniques. Since there are advantages to both, Dr. Rizk incorporates the closed and open rhinoplasty
approaches in his practice. In addition, he has pioneered a cutting-edge open/closed technique. With this approach, he addresses all issues involving the bridge, including refining a bump with a closed technique, but corrects the tip of the nose through a partial open incision.

In performing revision rhinoplasty, he says, "It's not only about getting a good cosmetic result. There is an important functional component to most of what I do. A lot of people I see can't breathe. Their noses have been collapsed after previous surgeries. Revision rhinoplasty requires both the functional and the cosmetic approach combined." And he is not afraid to say no to potential patients who have unrealistic expectations or medical conditions that may cause delayed healing.

**INNOVATIVE TECHNOLOGY**

Another keen innovation of Dr. Rizk's is the use of 3D High-Definition Technology in his surgeries. With rhinoplasties, where a few millimeters can make a big difference in the outcome, he uses the 3D High-Definition approach as well, which increases precision and results with minimal trauma."In nasal surgery," he said, "it is critical to achieve a natural result.
Patients today do not want upturned noses, pointy tips, scooped-out bridges, or pinched nostrils that used to be commonplace in the 1980s. Instead of rasping over soft tissue, muscle, and blood vessels and getting bruising, I am specifically reducing cartilage and bone under direct visualization with a high-def 3D telescope system.

One of the first surgeons to use this technology with rhinoplasties, the 3-D High-Definition system basically gives him a precise view of the interior nasal area by inserting a telescope that is connected to an imaging system. With this enhanced view, Dr. Rizk can avoid disrupting blood vessels, muscles and other sensitive tissues so there is less bruising and swelling later on, which promotes a quicker recovery. But the advantages go far beyond rapid recovery. Because of increased visibility, the surgery is more precise and allows him to create more natural-looking results, as tissue is not distorted by swelling during the procedure. In addition, he does not use nasal packing; only tissue glue to insure a faster and more comfortable recovery.

Another of his signature techniques is employing a micro-powered diamond machine to soften and refine the edges of all of his cartilage grafts. “I see a large number of primary and revision rhinoplasties, so I am always searching for ways to get a smoother outcome with cartilage grafts. Having had experience using diamond burr high powered units to smooth out the bone during reconstructive ear surgery, I decided to apply this technique with cartilage grafts to create a rounded edge. This worked extremely well and I have been able to achieve the round edges of a cartilage graft that I desired,” he says.

Deciding to have surgery is a big decision. Before taking the plunge, patients want an idea of what the outcome will be. Dr. Rizk uses a facial visualization system so that he can adjust the image to approximate what the patient will look like following facial plastic surgery or rhinoplasty. “Imaging technology is critical to allow me to provide each patient with a near image of the results that they can realistically expect following a procedure. It is a vital educational tool, especially in light of how knowledgeable patients are today about the details of rhinoplasty surgery,” Dr. Rizk said.

**WHAT MAKES HIM TICK**

Dr. Rizk is most proud of his academic credentials and the opportunity to teach and network with peers and colleagues all over the world. His unique expertise makes him a sought after presenter at national and international plastic surgery conferences. He was invited to share his latest advances in rhinoplasty at the International Federation of Facial Plastic Surgery Societies (IFFPSS) VII International Congress in Rome, Italy. He also presented his facial rejuvenation methods for the third year at FACE Ltd. in London, UK, where he has developed a following among patients as well as physicians.

Dr. Rizk also receives accolades for his humanitarian efforts. He is an active participant in the American Academy of Facial Plastic and Reconstructive Surgery’s Face-to-Face program that provides surgeries to children and adults around the globe, who suffer from facial deformities caused by congenital birth defects or trauma. He was also honored as the Chief Consultant Reconstructive Surgeon at Hospital 57257 in Cairo, Egypt, a non-profit organization dedicated to the wellbeing of children. “Doing reconstructive surgery on children who have critical deformities resulting from facial cancer was a life altering experience. The ability to give them a fresh start in life has been incredibly rewarding to me personally,” said Dr. Rizk.

When we asked what he enjoys most in his free time, Dr. Rizk responded, “Aside from spending time with my wife, Carolina, friends and family, I have become an avid art and photography collector. I like Michael Cooper’s photographs of The Beatles and Warhol’s images of famous beautiful women. I recently acquired the only Grace Kelly for sale by Warhol. I like his approach to portraits, attention to detail, and vibrant colors. My newest addition is William Klein’s image of Anouk Aimee’s face in my consulting room. My patients say that our office looks more like a fine art gallery than a surgery center.”

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