

# Septal Perforation: Long-Term Outcomes

## Nasal Septum Repair/Septal Perforation Surgery/Nose Deformity

Jason S. Hamilton, MD, FACS

Director of the Division of Plastic and Reconstructive Surgery  
Osborne Head and Neck Institute, Los Angeles, CA

Ryan Osborne, MD, FACS

Director of the Division of Head and Neck Surgery  
Osborne Head and Neck Institute, Los Angeles, CA

### Clinical Challenge

Septal perforation surgery is likely one of the most difficult reconstructive surgical procedures performed by a nasal reconstructive surgeon. Long-term follow-up is mandatory to insure that the perforation heals well without complications.

### Management Considerations

The complexity of each case is dictated by the comorbidities present. Patients presenting with septal perforations may have a history of nasal fracture, deviated septum, prior surgery, illicit drugs use, allergic rhinitis (hay fever), sinus disease and/or turbinate hypertrophy. Many patients may also suffer from depressive disorders, anxiety, or obsessive compulsive disease. Proper management requires managing all factors that could compromise the surgical outcome of the patient. This may require comanagement with an internist, allergy specialist, ENT, and occasionally psychologist/psychiatrist.

### Clinical Results

Patients are most satisfied when all procedures can be completed in one setting. Rhinoplasty, septoplasty, turbinate reduction, sinus surgery, septal perforation repair, and nasal collapse should all be performed with one procedure. This case presents a patient that underwent correction of a deviated septum, turbinate reduction, and rhinoplasty in conjunction with his septal perforation repair. The results shown are of a one-year follow-up.

### Surgeon Comments

Dr. Hamilton- *"Recovery from septal perforation surgery is relatively quick in proportion to the degree of difficulty associated with the surgery. Never-the-less, it takes months after the "bandages come off" before the nose feels completely normal inside. This may seem like an eternity to a patient who has suffered with a perforation for years, and may be very anxious regarding the final results. Proper recovery requires a lot of t.l.c. from the physician and lots of patience on the part of the patient, but in the end nearly all patients see positive results from their surgery."*

Dr. Jason Hamilton is the Director of Plastic and Reconstructive Surgery for the Osborne Head and Neck Institute, and is double board certified by the American Board of Facial Plastic and Reconstructive Surgery and the American Board of Otolaryngology/Head and Neck Surgery. Dr. Hamilton is one of only handful of septal perforation specialist worldwide

For more information on the deviated septum, septoplasty, functional rhinoplasty, and septal perforation repair by Dr. Jason Hamilton, septal perforation specialist, please contact the Osborne Head and Neck Institute or visit [www.perforatedseptum.com](http://www.perforatedseptum.com).

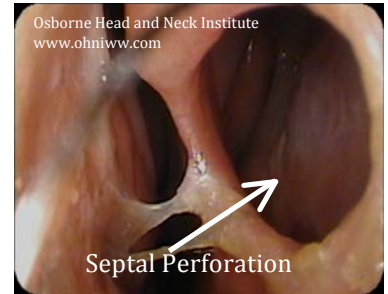


Figure 1: Nasopharyngoscopy demonstrating nasal septal perforation.



Figure 2: Nasal septum perforation. A ruler has been inserted into the opposite nostril to demonstrate scale.

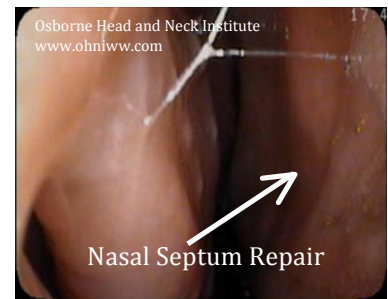


Figure 3: Nasopharyngoscopy demonstrating septal perforation repair.

**Editor In Chief:**  
**Alex Fernandez, MS**

**Corresponding Author:**  
**Jason Hamilton, MD, FACS**

**Osborne Head and Neck Institute**

8631 W. Third Street, Suite 945E  
Los Angeles, CA 90048

T: 310-657-0123 (United States)

F: 310-657-0142 (United States)

[www.ohni.org](http://www.ohni.org)