



REGENYAL
idea

Rinoplast

RESHAPING
THE NASAL PYRAMID SAFEL

THE FIRST DEDICATED **BIORIVOLUMETRIA** PRODUCT

REGENYAL
LABORATORIES

Rinoplast

Alternative to conventional rhinoplasty

RINOPLAST is a bio-revolumetric product specifically designed for nose reshaping based on hyaluronic acid. It can quickly and safely correct certain aesthetic nose defects (e.g. a hump or droopy nose) using a non-invasive reshaping technique. The correction is carried out through micro-injections containing hyaluronic acid.



RESHAPES THE NASAL PYRAMID QUICKLY

The various layers of the soft nose tissues



- DERMIS
- SUPERFICIAL FAT
- FIBROMUSCULAR LAYER
- DEEP FAT
- PERIOSTEUM

The Fibromuscular layer is the nasal SMAS. This layer allows the dermis to glide. It is advisable to always use small amounts of the product to avoid compressing small vessels or overcorrection.



Nose correction requires using a product that is especially versatile so that it can be placed at different levels. Thanks to its chemical features, **RINOPLAST** can be used at a deep level (supra-periosteal) for any hump correction, as well as more superficially, in the subcutaneous and supra-cartilaginous layer, to increase the projection of the nose tip.

RINOPLAST	COMPOSITION	DOSAGE	MOLECULAR WEIGHT	HA CONCENTRATION	INDICATIONS	PACKAGE	CROSS-LINKING AGENT	NEEDLES & CANNULAE	DEEP OF INJECTION	DURATION
	CROSS-LINKED AND LINEAR INTERCALATED HYALURONIC ACID	0,8 ML	1MLN DALTON + 2 MLN DALTON CROSS-LINKED + 5% LINEAR INTERCALATED HYALURONIC ACID 1 MLN DALTO	20 MG/0,8 G	RHINOPLASTY	1 PRE-FILLED SINGLE USE SYRINGE	RESIDUAL BDDE <0,1 PPM	2 NEEDLES 23G x 19mm 27Gx13mm 1 CANNULA 25Gx38 mm	DEEP HYPODERMIS ABOVE THE PERIOSTEUM	12 MONTHS

TECHNIQUE

MEDICAL RHINOPLASTY

Medical rhinoplasty is an increasingly popular treatment among patients. Excluding cases of clear surgical relevance, by using an injected product it is possible to reduce a small to medium-sized hump and raise a tip that is a little too droopy.

INDICATIONS

Dorsum Correction

The nose has a dense vascular network so the risks of vascular compression or intravascular injection with possible skin necrosis or embolism are high. It is recommended to perform dorsum correction by placing small amounts of the product at the supraperiosteal level, following the midline using a 27 g needle.

If a cannula (25 g) is used, the correction may also be performed more superficially at the hypodermic level: the blunt tip of the cannula will prevent intravascular injection but not vascular compression.

Tip Projection and Correction

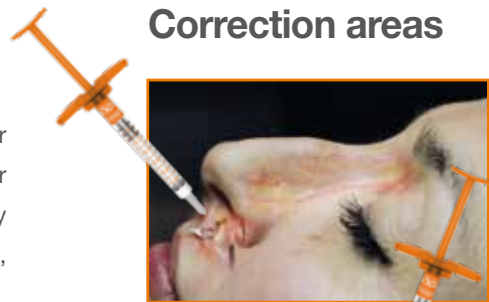
In order to correct the tip and increase projection, a 25 g cannula is preferably used by placing the product in the soft tissue between the middle Crura of the Alar Cartilages. Use a small amount of product and inject slowly.

Base Projection

Sometimes it may be necessary to deposit the product above the nasal spine at the base of the columella. This will help increase tip projection. In this case, a 27g needle is used.



Correction areas



Base Projection



Dorsum Correction



Tip Projection and Correction

CORRECTIONS OF SMALL, MEDIUM AND LARGE DEFECTS

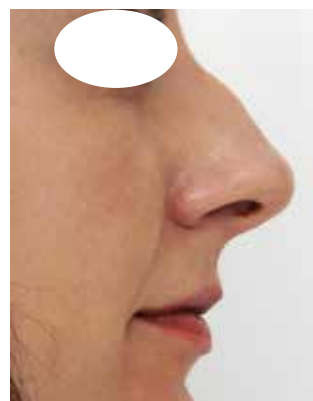
BEFORE



AFTER



BEFORE



AFTER





Rinoplast

MADE IN ITALY

