

The Role of Postoperative Nasal Retainer in Achieving Nasal Symmetry after Modified Subunit Cheilonasorraphy: A Case Series

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Background: Postoperative nasal relapse — loss of alar symmetry and descent of the nasal tip — remains a common problem after primary repair of the cleft lip and nose, in both unilateral and bilateral forms. Postoperative nasal retainers and subunit-based lip closure have each been proposed to address this, but they are rarely reported together, and rarely across both cleft types in the same series.

Objective: To evaluate nasal symmetry and philtrum outcomes achieved by combining a modified subunit cheilonasorraphy — a combined lip-and-nose closure individually adapted to each patient's anatomy — with a postoperative nasal retainer, in patients with unilateral and bilateral cleft lip and nose.

Methods: This is a case series of 6 patients with unilateral and bilateral cleft lip who underwent primary cheilonasorraphy using a modified subunit technique. All patients received a postoperative nasal retainer for 30 days. Outcomes were assessed using clinical image and physician's clinical evaluation over a follow-up period of January to May 2026.

Result: All six patients showed a rounded, symmetric alar shape without nasal-tip flattening, and the lip philtrum remained well defined postoperatively. No infection, no dehiscence, minimum septum deviation and hypertrophic scar occurred were observed.

Conclusion: Combining a modified-subunit cheilonasorrhaphy technique with postoperative nasal retainer appears promising for perserving nasal shape and philtrum contour in primary repair to unilateral and bilateral cleft lip. Controlled comparative studies with larger samples and objective measurements are needed to confirm the advantage of this technique over conventional approaches.

Keywords: cheilonasorrhaphy, cleft lip, nasal retainer, subunit technique