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NOTABLE NOTES

The Bard's Blunder-Debunking the Myth Around Rhinophyma

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While the eyes are commonly referred to as windows to the soul, studies suggest that the nose could be the door. This most conspicuous facial feature has been shown to influence body image, selfperception, and even personality. The American Society of Plastic Surgeons reports rhinoplasty to be one of the most commonly requested surgical procedures; positive outcomes of these procedures have been shown to ameliorate psychological suffering due to deformities of the nose, to have beneficial psychological implications, and even to allow patients to feel more comfortable with their identity.1 The role of the nose in shaping one's image in society is best exemplified through rhinophyma, an end-stage form of rosacea affecting primarily men ages 50 to 70 years, leads to enlargement, fibrosis, and telangiectasia of the nose, and has long been associated with a love of drink. Although alcohol and other substances, such as caffeine, cause local vasodilation that can exacerbate the symptoms, the cause has yet to be elucidated.²

The common misconception involving alcohol and rhinophyma is illustrated and propagated throughout classical literature. In *Macbeth*, Shakespeare's characters warn their readers, "Drink, sir, is a great provoker of three things...nose-painting, sleep, and urine. Lechery, sir, it provokes and unprovokes," thus mercilessly linking a red nose to alcohol and shameful behavior. The Pardoner in Chaucer's *Canterbury Tales* highlights the vices of alcohol through emphasizing its role in disfiguring the face and focuses on the snoring sound of the nose:

A lecherous thing is wine, and drunkenness Is full of striving and of wretchedness. O drunken man! disfgur'd is thy face, Sour is thy breath, foul art thou to embrace: And through thy drunken nose sowneth the soun', As though thous saidest aye, Samsoun! Samsoun!

The man described in these lines may very well be suffering from a condition unrelated to alcohol that causes chronic edema, local inflammation, and sebaceous gland and dermal hyperplasia of the nose. His labored breathing could be due to alar thickening that obstructs nasal airways.² These and other literary references dating as far back as the 14th century have innocently helped propagate a pejorative view of individuals with rhinophyma. The stigma and psychological implications associated with the disease have inspired studies that have shown no significant difference in alcohol consumption in patients with rhinophyma compared with control patients.³ These data refute the theory that alcohol leads to a large and ruddy nose, and yet "rum-blossom" and "whiskey-nose" colloquialisms for the condition, as well as the related stigma, still exist. It is imperative that this misconception be recognized and acknowledged so that those experiencing the symptoms of rhinophyma do not also have to suffer societal prejudice and being labeled as alcoholics.

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