

Supernumerary Nostril

(A case report)

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Supernumerary nostril is a very rare congenital anomaly. In a review of literature only three other cases were found. The author presents another case of Supernumerary nostril.

(CASE REPORT)

A boy aged 2 years was admitted to the wards with a deformity of the nose since birth. His mother had a normal pregnancy and delivery previously.

On examination an accessory nostril surrounded by a well formed crescentic alar fold was seen in the midline over the dorsum of the nose (Fig. 1). A probe could be passed through the abnormal nostril into the nasal cavity on the right side. The nasal septum was normal. There was a crescentic defect in the right alar margin. No other congenital malformation was found elsewhere in the body.

The abnormal nostril was explored through a midline incision on the dorsum of the nose. It revealed a well formed cavity lined with mucosa communicating with the nasal passage on the right side (Fig. 2). This was excised and the wound was closed by suturing the mucosa and the skin in respective layers.

Discussion :

Lindsay in 1906 reported a case of bilateral supernumerary nostrils. Each nostril, situated above the normal nostril, opened into the nasal cavity on the same side. The septum stood in the midline and the two nasal cavities were otherwise normal.

Rawse in 1923 reported a child with a supernumerary nostril situated 1 cm. above the normal right nostril. It opened into a separate nasal cavity on the right side. This cavity had a connection with the right nasal airway.

Takuya Onizuka in 1972 reported a case of supernumerary nostril on the left side.

The present case differed from the other reported cases in the anatomical position of the external opening of the supernumerary nostril. In this case the abnormal nostril was situated in the midline on the dorsum of the nose, not laterally above the normal nostrils as described in the previous cases. It was interesting to note that although the accessory nostril was situated in the midline, the olfactory sac was directed obliquely to the right side and opened into nasal cavity on the right side.

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Developmentally, in cases of a double nose, it has been postulated that some irregularity in the evolution of the two olfactory placodes causes them to produce four olfactory pits, all in the horizontal plane. It is not that two pits give rise to four nostrils

and four nasal cavities. If the accessory nasal pits are located above and laterally rather than medially it would not prevent fusion of the two laminae to form one nasal septum. If an accessory olfactory sac is formed, this usually fuses with the normal



Fig. 1—Supernumerary nostril situated above the normal nostrils in the midline, and also showing a crescentic defect in the right alar margin.

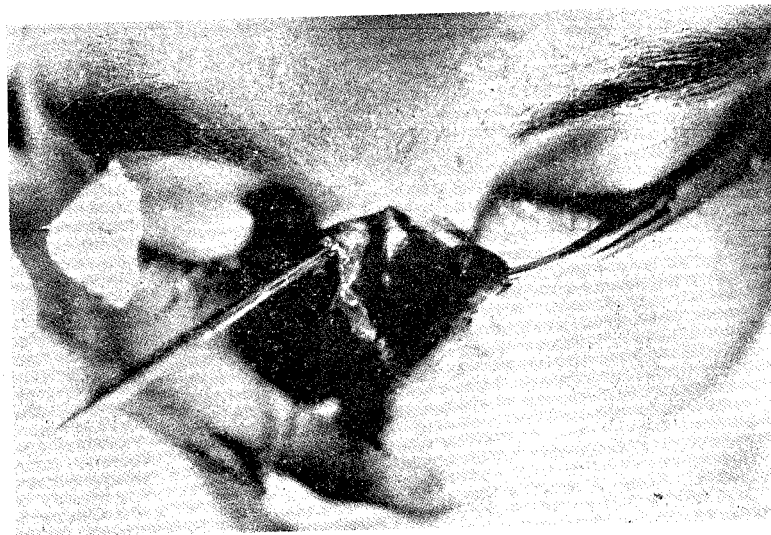


Fig. 2—Showing a probe in the accessory olfactory sac.

nasal sac. Thus most of the supernumerary nostrils open into the same nasal cavity rather than two separate nasal chambers.

In the present case the supernumerary nostril was situated in the midline. I feel in this case the accessory olfactory pit was

located in the midline, during development it grew backwards and lateral to the nasal laminae expanding into a sac which ultimately opened posteriorly into the normal primitive nasal cavity. It did not prevent fusion of the two laminae to form a single nasal septum.

REFERENCES

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