

Plastic Surgery Gets a New Look

Drastic Is Out. Subtle Is In. And Cutting Is Giving Way to Filling

By JAMES GORMAN

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VANCOUVER, British Columbia — Cosmetic surgery is getting a makeover.

People want to look younger, rather than different — to have the face in their mind's eye, not the one in the mirror. They want quicker, less expensive and less invasive procedures, and new medical technologies are feeding and increasing the demand.

Along with the incremental improvements come other changes. Surgeons are seeing the numbers and percentage of men increase, and treating younger as well as older patients as cosmetic improvement becomes a lifelong pursuit.

"I think there is a paradigm shift in thinking, right at this moment," said Dr. V. Leroy Young of St. Louis, chairman of the emerging trends task force for the American Society for Aesthetic Plastic Surgery. The group had its annual meeting here this month.

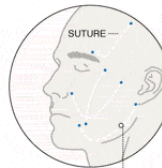
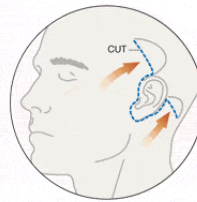
Surgeons, Dr. Young said, are backing off from more aggressive surgeries and moving toward nips, tucks and injections. Operate early and often might be the new motto. Traditional cosmetic self-improvement, in the form of breast enlargement and nose surgery, are still significant, but surgeons see their field in the process of transformation.

The change, said Dr. Brian Kinney of Los Angeles, a member of the trends panel, "comes for three or four reasons."

"One is younger people who aren't going to wait," Dr. Kinney said. "They want to start surgery now. Smaller

Fixing the Face, Early and Often

FACE-LIFT The traditional surgery that plastic surgeons have used to give the impression of a youthful face requires incisions and sutures to lift or pull the skin and its underlying layers. There are now many less aggressive versions of this procedure, and some require only local anesthesia and sedatives.

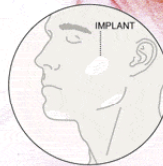


BARBED SUTURES One new procedure, attracting considerable attention, involves sutures that are made with tiny barbs all along their length. Surgeons can work these under the skin using only small incisions, and do a face-lift that is much less invasive, with recovery in days instead of weeks.

THE NOSE A traditional target of cosmetic surgery, it can now be reshaped not only with surgery but with injections.

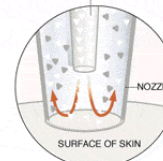


INJECTABLE FILLERS Many surgeons are now using a variety of natural substances, like the patient's own fat cells or products made from chemicals found in the body, to fill out the brow or the smile lines or to make the lips more puffy. Some cosmetic surgeons think filling the face out is far more effective than lifting it to achieve the look of youth.



IMPLANTS Molded silicone implants, different from the gel that was used for breast implants, have been used in various parts of the face, like the chin and cheekbones. They are also used in other parts of the body, including pectoral muscles, buttocks and calf muscles.

ALUMINUM OXIDE PARTICLES



MICRODERMABRASION This technique is like a gentle sandblasting of the face with an instrument that sprays tiny crystals and vacuums the debris. It requires no anesthetic and has almost no recovery time, but requires frequent treatments.

BOTOX Continued growth in injections of botulinum toxin has made this one of the most popular procedures in the world. The toxin paralyzes muscles, making frown lines disappear. The effect is temporary.



INJECTION FOR LIPS

Illustration by Bonnie Hefkin

budgets. They don't want to spend as much money. Also, they don't have time. We're an instant-gratification society."

Drastic changes in appearance are the rare exception, despite the potential influence of television shows that feature extensive surgery like "Extreme Makeover" and "The Swan." More typical is the surgeon who asks patients to bring in their high school yearbooks, to see how to go back to the future.

Another force that continues to change cosmetic surgery is the emergence of new technologies. In the past, liposuction and Botox injections were revolutionary. New parts of the body are always attracting attention. Calf implants never really took off, although they are available. But gluteal implants, for what one surgeon called "the J-Lo look," might take off, although numbers remain very small.

Much more important are a raft of new fillers coming on the market for injection under the skin to fill out the face rather than lift it. The whole idea of the lift, some experts say, is old-fashioned and inappropriate. Gravity is not the enemy of youth, they say, but loss of volume.

Face-lifts live, but they have become very specific. It's not the face, but the brow or midface that is done. And there are new minimalist techniques, some involving new sutures, used to produce the weekend face-lift, so-called because the recovery time is so short.

But most surgeons are holding on to their knives, and few predict that the traditional face-lift will be replaced entirely.

Dr. Sydney Coleman of New York is a partisan, the acknowledged guru of fat injections. He developed techniques and instruments to take fat from one part of the body and inject it in tiny quantities into the face and other areas. Fat is living tissue and, under the right conditions, will survive in its new location.

Dr. Coleman also works with other fillers, and he said these methods, all to restore the volume of the aging face, are replacing old-fashioned cutting. "Syd really doesn't do face-lifts," Dr. Young said. "And of course, when you've got a hammer, the world is a nail."

But, Dr. Young said, fillers and more limited surgery



©Dr. Sydney Coleman
NIPS AND TUCKS A patient before and three and a half years after cosmetic surgery to her face, including the forehead, cheeks, lips, jawline and chin.

might well be the future in the intense worldwide pursuit of rejuvenation.

Another partisan of fat, Dr. Richard Ellenbogen of Los Angeles, made a presentation to the assembled surgeons in which he argued that injecting fat or other fillers could be an alternative to just about every cosmetic procedure like face-lifts, breast augmentations and removing bags under tired old eyes.

The business that seems to be changing direction is a big one. Last year, according to the Society for Aesthetic Plastic Surgery, 1.8 million cosmetic operations were performed in the United States. There were an additional 6.4 million nonsurgical procedures like skin resurfacing or Botox injections. In fact, first liposuction and then Botox have changed cosmetic surgery, moving it away from the knife. Dr. Coleman said liposuction was the single most common surgical procedure in the world.

Statistics show that the traditional procedures, if Botox and liposuction are included, continue to dominate the



©Dr. Sydney Coleman

This patient before and one year and six months after her last LipoStructure® procedure to her forehead, temples, brow, between eyebrows, nose, eyelids, cheeks, lips, around the mouth, chin & jawline.

field. But the new developments occupied much of the meeting, as surgeons disagreed about the promise and safety of various procedures.

What was clear was the intense interest in new substances as fillers, and in the approach to aging that suggests filling out is more important than lifting up. Dr. Coleman and partisans of volume say the damage from gravity has been exaggerated. The real culprit, he says, is the loss of tissue under the skin.

A brow lift, he said, tackles the wrong problem. The brow, he said, "descends only because you're missing huge volume, so yanking it up doesn't really make sense."

He takes a person's own fat and pushes it under the skin in tiny amounts, using a blunt-tipped instrument called a cannula. He does the same for a sagging lower

eyelid, arguing that it makes no sense to cut muscle and fat, the usual surgery. That procedure leaves a hollow-eyed look, he says.

For lips, however, he uses a new material, hyaluronic acid, a substance found in the body that also fills out tissue but is not permanent. Although there are 24 or so fillers on the international market, few are approved in the United States. But that is changing, Dr. Young said, noting, "The fillers are evolving so rapidly that there's a new one every month almost."

One approved for use is calcium hydroxylapatite, also a natural substance. Dr. Coleman was critical of its widespread use, although many doctors find it useful. "No one has ever used it for more than two years in subcutaneous tissue," he said. "There is no experience."

Although hyaluronic acid is temporary, calcium hydroxylapatite is semipermanent. It is not known how long it lasts, Dr. Young said. "In dogs," he said, "it lasts up to five years. There is no data in humans out that far."

Even with substances with long safety records, technique is crucial. With a sharp needle, an artery can be pierced and the fat injected into it can block capillaries, shutting blood flow to a part of the body. Liposuction patients have died of pulmonary embolisms in this fashion.

Injections in the face have caused at least two instances of blindness, when the retinal artery was accidentally blocked, Dr. Coleman said. In another case, the soft tissue on and around the nose died and simply sloughed off the face.

Risks are part of surgery, but people seeking cosmetic fixes are not sick, and, the surgeons emphasized, patients need to recognize that as benign as something like liposuction sounds, it is still surgery.

A more mechanical innovation involves barbed sutures. The synthetic thread, used for stitching, has barbs all along its length, to help it anchor in tissue. In a traditional face-lift, surgeons make a large cut in the face, lift a section of skin and the tissue beneath it and tie in sutures like bridge cables to pull up the face. The recovery from such an operation takes weeks.



©Dr. Sydney Coleman

This patient before and one year and six months after her last LipoStructure® procedure to her forehead, temples, brow, between eyebrows, nose, eyelids, cheeks, lips, around the mouth, chin & jawline.

With the new barbed sutures, surgeons say, they can make a small incision, then use a long needle to thread the suture under the skin to the place where it needs to be anchored and tie it at the top.

Dr. Woffles Wu of Singapore described how he performed what he called the Woffles face-lift with barbed sutures. He presented the cases of a woman who needed a quick improvement for her daughter's

wedding, three weeks away, and another woman who wanted to look fresh for her husband, who was coming home after a long time away. This is the face-lift as hairdo.

The safety of the sutures themselves was not questioned. But many surgeons had doubts about their endurance and how the results would appear. Dr. Fritz Barton of Dallas said at a panel: "Plastic surgery is not different from the rest of life. There is no little procedure with a big benefit."

There are other trends to watch, as well. One new technology uses tools that emit radio waves to tighten the skin. Statistics show that it does not work for 20 percent of patients, however, and, like other procedures, can have negative effects, too.

The buttocks implant is one procedure that physicians are watching closely.

"I think the thing that's really unknown here," Dr. Young said, "is what the role of gluteal augmentation is going to be. We only started keeping statistics on it a year ago."

The numbers are still small; 3,885 procedures were performed last year, a 533 percent increase over 2002.

If Americans turn out to be as crazy about buttocks as they are about breasts, plastic surgery has a whole new source of income. More than 280,000 women had breast implants in 2003.

As Dr. Young pointed out, "in contrast to breast augmentation, men and women can get it in roughly equal proportions."

"The question," he said, "is still, Is this a fad or is this really one of these things that's reaching a tipping point where enough people catch on to it?"