

Good Decision-Making with Your AESTHETIC PROCEDURES:



Questions Answered

DR. DONN R. CHATHAM

Aesthetic surgery and procedures continue to become increasingly popular worldwide. Sometimes the reasons for requesting an aesthetic procedure are unclear, and there may be unhealthy reasons as well as healthy reasons for seeking a procedure. Dr. Donn Chatham answers some of our questions about why people seek information and request procedures on themselves. With offices in Louisville, KY and New Albany, IN, Dr. Chatham has practiced facial plastic surgery for the past 29 years.

Q: What is the most common reason in your practice that patients seek an aesthetic procedure?

A: There actually are many reasons. Some people want to soften the aging process in a subtle way. Others want a more definitive improvement to help reverse some of the aging changes and this requires surgery. Others have a facial feature they never liked, such as an unattractive nose, and want this made more attractive. Others may want just a little 'maintenance', perhaps beginning some serious skin care, or even neurotoxins and fillers. Others recognize they have sustained unwanted sun damage and wish to have not only prettier but healthier skin. What they all have in common with each other is a desire to feel more attractive and thus feel better about themselves.

Q: Do you think adult patients want to feel more attractive to perhaps improve their love lives or professional lives?

A: Feeling more attractive, especially if one is actually more attractive, has more than one benefit. Others can see this newfound confidence, both in one's personal life and work life. Many of our patients are in the marketplace, working with those younger and appearing more vital. Naturally they don't want to become a victim of age discrimination, and by looking and feeling younger, this can have a beneficial effect at work. And very few of our patients seem to be doing this for another person such as their spouse, or boyfriend or girlfriend, but all agree it is a good thing to feel more attractive.

Q: Do others perceive patients as being more attractive after an aesthetic procedure?

A: I would hope that a successful aesthetic procedure, whether small or big, would produce a visible improvement in that person's face, which is now more attractive. Often other people don't know exactly what the change is but at a basic level seem to know that there is something good going on in that person's face. This may be interpreted as looking rested or having lost weight or just appearing just a bit younger. A study

published recently in the journal *JAMA Facial Plastic Surgery* found that women who underwent facial rejuvenation surgery were perceived to be not only more attractive but also more likeable than they were before the surgery.

Q: Why would they appear more likable?

A: Observers were asked to review a series of 'before & after' photos, and rate them according to one of six personality traits: aggressiveness, extroversion, likeability, trustworthiness, risk-seeking and social skills. Following surgery such as facelift and eyelid surgery the resting facial expressions of the patients appeared happier, which in turn led people to believe that they were more likeable.

Q: But shouldn't changes associated with aging convey maturity and wisdom, perhaps making an older person more socially likable than perhaps a younger person who is awkward socially?

A: Yes, perhaps we should all learn to 'age gracefully' and appreciate our birthdays, but there does exist in our society a bias against aging. As reported by the Association for Psychological Science, "good-looking" faces are likely to get more affection from their mothers, get better marks from teachers, and

get paid more at work. If a face looks unnatural in any way, this has a negative impact. So any procedure that creates a strange or unusual look will convey an undesirable message. Giant lips following fillers are a prime example.

Q: Do most prospective patients really say they “want to look younger”?

A: Many of our patients seeking procedures for aging changes wouldn't mind looking a bit younger, but most really want to look more like themselves, like they used to look. Excess skin makes their eyes look smaller, and drooping jowls obscure their once defined jaw line. So if we can help get some of these features out of the way, then they can see their 'old selves' a bit better!

Q: How do we decide on what is 'attractive' or 'beautiful' or just plain 'normal'?

A: We are hardwired to appreciate beauty. Six-month-olds prefer to look at the same relatively attractive faces that adults do. We make judgments about a person within seconds of seeing their face for the first time. There are faces that launch a thousand ships, and faces that only a mother could love, and we are supremely attuned to tell the difference. The brain, among its many other functions, is a 'beauty detector'. We can geometrically measure the ideal face, its features and proportions and reduce it to mathematics, but in the end we know beauty when we see it.

Some of the most important and consistent factors in facial attractiveness are structural qualities of the face that are highly sex-typical. Men are perceived as attractive with prominent cheekbones, low brows and long jaws. Women are thought attractive with large eyes, small noses and smooth skin. Symmetry is very important, even though most faces are not really symmetrical. But 'average' faces are usually thought of as being the most desirable. Not the exotic faces, but a composite blending of many faces is perceived by most of us as not only 'average' but most attractive.

Q: What are the healthiest reasons a person may request an aesthetic procedure? Surely it is not to look 'average'?

A: When there is an obvious physical problem and both the patient and surgeon clearly see it, this is an easy decision. Examples include, a large or crooked nose, or a poorly healed traumatic scar. When a feature contributes to social anxiety or creates depression, and the patient identifies their desire to feel better by improving the unwanted feature, this can be healthy. For example, take a person who tries to keep fit and make all healthy decisions but nothing they can do helps their saggy eyelids and neck. Here surgery may be the route to improved self-esteem. Patients who have considered this for a long time and can articulate their desires exhibit positive attributes. Expectations need to be realistic of course.

Q: At what age do you think a patient is equipped to make a decision about an elective aesthetic surgery? Should teenagers make this decision?

A: Making a healthy decision requires a certain maturity. But sometimes the parent, when a child is young, acts as a proxy decision-maker for that child. For example, a 6 year old with large protruding ears or a disfiguring birthmark would likely benefit from intervention, but is too immature to understand this, so their parent with the surgeon's help, will make that decision. A teenager with an unwanted nose problem could possibly be mature enough to participate in the decision to undergo a surgery. Yet a different teenager who impulsively pushed for a popular procedure, especially if influenced by her peers, may not have the maturity to really understand what she is asking for. Helping younger patients understand these issues can be very challenging but also rewarding.

Q: What are unhealthy reasons?

A: There are many. If a patient feels

coerced or aims to please another person, or is behaving impulsively, or asks to look like a celebrity, or hopes a procedure will lead to happiness, then these are warning signs. A jilted lover wanting to impress their 'ex' or those in the initial stages of divorce or still reeling from a loss would perhaps be advised to wait. People who have an excessive focus on a very small defect exhibit an unhealthy obsession or even body dysmorphic disorder that can lead to greater problems if they undergo surgery.

Q: Are you seeing more body dysmorphic disorders? What exactly is this?

A: Body dysmorphic disorders, or BDD, are a complex psychological malady where a person believes there is a defect in their body or face, which is so severe they cannot lead a normal life, perhaps unable to leave the house or maintain a relationship. Some studies suggest that many have suffered some form of childhood physical or emotional abuse. Operating on these patients only exacerbates their stress.

Q: So how do aesthetic surgeons best evaluate and choose patients for procedures including surgery?

A: I believe that careful unhurried listening to each new patient is key, and this takes time and focus. Asking each one what they perceive their problem to be, and what they are hoping to achieve with a procedure is a good beginning. Remember, all patients do want to feel better once a procedure is completed and healed, if surgery is involved. So this becomes an emotional goal as well as a physical goal. And one can never spend too much time on trying to understand expectations. If unrealistic, the best and greatest procedure performed with the highest degree of skill and precision will fail if the patient's expectations exceed reality.

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