

BEAUTY / By Pamela Troy

Face-Lifts & Fright Masks

– Latest Trends –

The first plastic surgery textbook, published in the 16th century by **Gaspere Tagliacozzi**, offers a good example of what people will go through for the sake of a pleasing profile. Damaged or amputated noses were a common problem in that era of swordplay, a disfigurement that could be complicated by the fact that having one's nose cut off was a common penalty for adultery.

Tagliacozzi described a method for reconstructing a nose using skin grafts from the patient's forearm. It was done without anesthetics, of course, and required the patient to keep his arm pressed to his nose for a few weeks, but there were apparently enough people willing to undergo the ordeal to make the procedure worth recording.

Today, cosmetic surgery is not quite as daunting. The advent of anesthetics in 1846, and the discovery of antisepsis two decades later made surgery less life-threatening; and by the middle of the 20th century, plastic surgery was being performed, not only to correct obvious deformities like scars or harelips, but to improve the appearance of perfectly normal, uninjured patients.

As cosmetic procedures have become safer, less intrusive and less expensive, more and more people are considering them as options. According to the American Society for Aesthetic Plastic Surgery (ASAPS), surgical cosmetic procedures including face-lifts, tummy tucks, and breast augmentation have leapt from 972,996 performed in 1997 to 1,819,485 performed in 2003. Non-surgical cosmetic procedures like Botox injections, chemical peels, and laser hair removal have gone from 1,126,177 in 1997 to 6,432,509 in 2003!

"The most obvious factor is demographic," says Dr. **Corey Maas** of the Maas Clinic, San Francisco. "A lot of people are hitting the range where they're seeing signs of facial aging. We're also, as a population, healthier than we used to be at age 50 or 60. Now when you're 60, you're just starting to have fun."

The first procedure that comes to mind when the subject of aging comes up is the face-lift, an operation that still retains a faint stigma. As recently as 1990, **Jane & Michael Stern's** funny and useful reference book, *The Encyclopedia of Bad Taste*, included the face-lift as an entry, primarily by virtue of its association with show biz personalities determined to cling to their youth at all cost.

Who hasn't watched a favorite celebrity age over the years in that uniquely Hollywood fashion in which the facial skin becomes increasingly

tight and stretched into a permanent shine with jarring patches of hairline wrinkles around the eyes and the corner of the mouth? The rather bloodcurdling description of a face-lift offered in the Sterns' book has a definite undercurrent of disapproval:

"The skin of the patient's face and neck is cut away from underlying muscle and tugged back so that it is as smooth as an adolescent's. Excess skin is cut off, and the newly taut skin is stitched behind the hairline and around the ears in such a way that the scars don't show. Depending on the skill of the surgeon, the resulting face will either look like a young version of the patient or like a freeze-dried fright mask of the patient with epicanthic eyes and a tightly drawn fissure with exposed teeth where the mouth and lips used to be."

This is hardly likely to make the reader desire the procedure, especially when it's accompanied, as it is in the book, by a picture of **Phyllis Diller**. But does it really have to be that way? After all, it's been more than 10 years since that passage was written. A great deal has changed both in physicians' approach to cosmetic surgery and in the options available to patients who want to improve rather than completely alter their appearance.

The face-lift (or rhytidectomy) has branched out into different variations since it was first performed in 1919. In the late 1970s the SMAS

(superficial musculo-aponeurotic system) lift was developed, in which the deeper layers beneath the skin and fatty tissues of the face are lifted. The theory was that this form of face-lift would last longer than the more traditional subcutaneous lift, but according to Dr. **Robert Kotler**, in his book, *Secrets of a Beverly Hills Cosmetic Surgeon*, this procedure hasn't proven to be much more durable.

In the '80s, something called the deep plane lift began being used as a way of avoiding overstretching the skin. This technique includes lifting the facial muscles, and runs the risk of pulling back the brows and eyes into an expression of permanent astonishment. All three lifts, the traditional, the SMAS, and the deep plane, are still commonly used, and the merits and demerits of each should be discussed with a physician by anyone considering surgery. All three require that the patient go under general anesthesia, and spend at least two weeks recovering.

A more recent variation is the appealingly named Aptos Feather Lift, a procedure that involves the use of barbed or "Aptos" sutures that, according to the ASAPS are "placed underneath the skin's surface through tiny incisions, then gently tightened to achieve soft tissue support." The nicknames used for this procedure, the "lunchtime," "weekend," or "hairdresser" face-lift, reflect the shorter recovery time (a matter of days rather than weeks.)

Unfortunately, they may also reflect the longevity and effectiveness of the procedure. "They do help a little when it comes to certain kinds of lines, and the medical reports in Europe where it started have shown some modestly favorable results," observes Maas. "But the data is still very scant." A recent *New York Times* piece on plastic surgery (April 27, 2004) points out that while there are apparently no questions about the sutures' safety, "many surgeons had doubts about their endurance and how the results would appear."

What do seem to excite cosmetic physicians are advances in non-surgical options like Botox, Injectable fillers, and lasers. Botox injection in particular is listed by the ASAPS as the top nonsurgical procedure, with 2,272,080 performed in 2003. This muscle weakener, which is made from botulinum toxin, is most often used on lines across the forehead or between the eyes. The effects take a few days to become evident and can last as long as six months.

The drawback is that weakening the muscles of the forehead may result in the patient looking younger but also as expressionless as a goldfish. (One woman executive, who oversees many male subordinates, when advised to get a Botox injection for the line between her brows, replied that she'd struggled for years to get her intimidating frown-line and had no intention of giving it up.)

One of the most rapidly changing and expanding fields in cosmetic medicine is injectable fillers, which are shifting the emphasis in anti-aging procedures from a fight against gravity to a fight against tissue loss. Dr. Maas observes, "As we get older there's a loss of volume around cheeks and brows, so there's an initiative to do volume replacement." Collagen is the filler most people think of, especially as a plumping agent for lips, but some patients are allergic to it, and other products that have a lower risk of reaction, like Hyaluronic Acid, are rapidly overtaking it. "Five years ago, 80 percent of physicians were using collagen. Now 50 percent are using Restylane (Hyaluronic Acid) as a filler."

"I think these injectables are a great product," says dermatologist Dr. **Seth Matarasso**. "You come in, you have them injected, and you're out the door and back in the saddle on the same working day."

Another procedure, intense pulse light treatments, involves applying a pulse of broad spectrum visible light to the skin's surface. "It targets the brown and red pigments in our skin, as well as dilated capillaries and damage," according to Dr. Maas. Then there are what are sometimes called "nonablative lasers." Observes Dr. Matarasso, "They hardly take any time at all. You go in and out very quickly. In that same category is Thermage."

Thermage is sometimes touted as a "no-surgery face-lift," and uses radio frequency technology to generate new collagen to form under the skin, smoothing and firming, and resulting in a more youthful appearance. After the face is numbed with a cream, the ThermaCool TC wand is passed over the desired area – the FDA has approved it for use around the eyes – in a procedure that can be uncomfortable but takes less than an hour. It takes several months for complete improvement to be evident. "The results are very, very subtle," Dr. Matarasso says, "and I'm not sure whether the proof is there yet for this particular treatment."

The consensus among physicians is that while these procedures provide less invasive, expensive, and time consuming alternatives, they're unlikely to replace the face-lift for sheer effectiveness and durability. As Dr. **Fritz Barton** of Dallas told the *New York Times*, "Plastic surgery is not different from the rest of life. There's no little procedure with a big benefit."

Nor, we should remember, is there any medical procedure that doesn't come with an element of risk. One danger associated with the increased variety and availability of cosmetic procedures is that consumers can forget that these are, in fact, medical procedures requiring qualified practitioners, and not salon beauty treatments. Next Month's *Gazette* will feature an article detailing the hazards associated with cosmetic

procedures, and the need for common sense and caution when considering them. Stay tuned.

*For more info: American Society for Aesthetic Plastic Surgery,
surgery.org*