



## 20 Most-asked Questions about Cosmetic Surgery!

Captains of industry do it, and so do magazine centrefolds. Aging socialites do it, and so do nubile social climbers.

But the majority of those hot-footing it to the clinics of cosmetic surgeons today are neither super-rich nor famous. You'll find students, retired government employees and housemaids all going under the knife to be "done". So, if you're pondering youth surgery, too, you're far from being alone.

But, even as you consider seeking a little surgical help for your looks, you'll find yourself assailed by questions, anxieties and doubts. Health and Nutrition spoke to cosmetic surgeon Vijay Sharma to discover the most common questions that prospective candidates ask, and to bring you the answers:

### 1. *Should I 'go in for' cosmetic surgery?*

This is the primary question, of course — to 'get-a-fix' or not to... Cosmetic surgeons tell us that all of us have some imperfection or the other that we'd like to correct. And today a whole range of corrections, camouflages and conjurations are possible: from face-lifts to rear-end alignments. You can prune your proboscis, get a presto change o'chins, a tighter tummy or less fleshy flanks.

Should you?

Cosmetic Surgeon Vijay Sharma says the most important question — and the one often given the least consideration by those pondering cosmetic re-dos — is their reason for doing so. One woman comes to him saying she wants a face like Madhuri Dixit; another woman wants her breasts enlarged in order to get a straying husband back in line; a young man feels that acquiring a more aquiline nose will catapult him up the ladder of success; yet another young man is told by his best friend that he would look much better if he had a firmer thrust of jaw.

All these are the wrong reasons for opting for cosmetic surgery. A bustier bust will not guarantee marital fidelity; an aristocratic nose in itself will not cause you to metamorphose from a mousy clerk into a self-assured CEO; 20 successive re-dos may fail to make you look like Madhuri Dixit; and as for what your best friend thinks would look good on you, he may just be dead wrong.

Your reason for cosmetic surgery should just be that you are convinced it will bring about an

improvement in your personal appearance. And the key word is *improvement* — do not expect miraculous transformations. Many people do blossom after cosmetic surgery and there is no virtue in stoically living on with a disfigured nose or a severely receding chin. But, more often, you'll only get enhancements, not transmutations. So, keep your expectations reasonable: To expect to go from 4 to 6 on the appearance scale is reasonable; to expect to go from 1 to 10 is not.

It's equally unreasonable to expect cosmetic surgery to transform you overnight from a failure into a success. "Cosmetic surgery can give your self-confidence a boost," says Sharma, "but the rest is upto you."

Even if your expectations are reasonable, cosmetic surgery may be the drastic, extreme solution: have you considered simpler, more conservative means? For instance, it's amazing what clever make-up can do today to mask minor wrinkles, folds and furrows (and the results are subtle enough not to scream 'Face Lift!').

Again, if you need to lose weight overall, your method of choice should be diet-cum-exercise, not liposuction of the thighs, hips, buttocks, arms and double chins! (Liposuction is a valid option only for stubborn, localised fatty deposits — generally familial in origin — which do not yield to overall weight reduction).

Next, consider whether surgery is possibly contraindicated in your case. Some people are poor candidates for surgery — any surgery, including



# TO FRESHEN, FIRM AND FIX



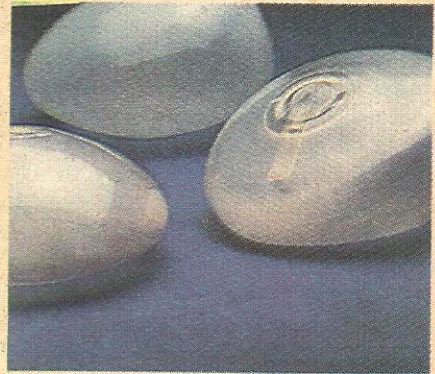
**TWO-IN-ONE:** In this case, the surgeon used a nose implant to correct the awkward, upward angle, as well as a chin implant combined with filling to create a natural dent in the chin



**IS SILICONE SUSPECT?** Critics of the silicone gel breast implant allege that it leaks and may trigger immune disorders



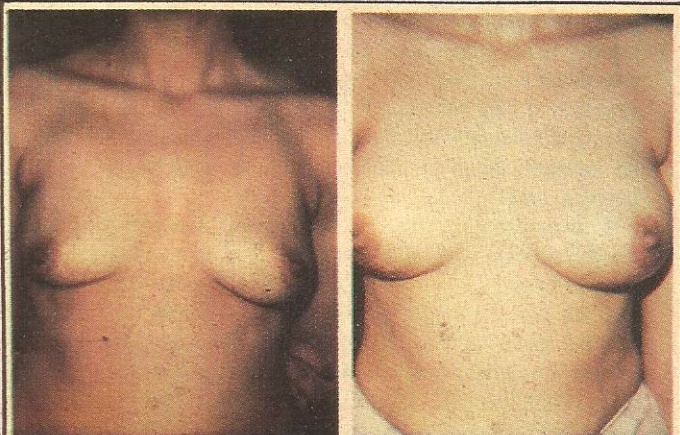
**MOUTH-MELTING MOMENTS!** Cosmetic surgery can even give you a dimple — or two, if that's what you want!



**NEW & IMPROVED...** Saline-filled implants with newer, stronger valves which don't break as easily as the earlier models, and are reportedly safer than silicone gel implants



**PLUMPING CHEEKY!** Auto-fat injection (i.e. injection of your own body fat taken from another area) can plump out hollow cheeks



**FROM SMALL AND SAGGING TO FIRM AND FULL:** Breast augmentation



cosmetic operations. If you suffer from high blood pressure, diabetes or asthma, or are highly debilitated, the risks of surgery rise in proportion. Lopping off your abdominal folds may not be worth the risk of dying from post-operative bleeding.

In the case of cosmetic surgery, you must also have the emotional maturity to cope with the aftermath of the procedure, which may include not only physical trauma but also depression, anxiety — and resentment if you feel the surgeon's performance has not matched his promises! Are you tough enough to take all this in your stride? If you're not, you're a poor candidate for surgery although you may be physically fit and healthy.

Finally, consider whether you're the right age for the particular cosmetic procedure you're considering. For instance, surgical correction of the ear can be done as early as five or six years by which time the ear has almost reached adult size; but in the case of nose operations, surgeons generally prefer to wait until around 17 years when full growth is attained.

On the other hand, chronological age is often less important than emotional maturity: you may be 17 years but far from prepared, emotionally, to handle the stress of the surgery.

A third, quite different, factor to consider, however, is psychological need: in the case of the same nose operation, for instance, if the disfigurement is so severe that it is psychologically traumatic, a surgeon might well agree to operate at the age of 15 or 16 — considering the 1 or 2 mm. additional growth that could occur after surgery less important than the obvious emotional need (which is, in fact, the very purpose of the surgery).

## 2. Can I get a sneak preview of what I will look like after the cosmetic surgery?

For a long time, the surgeon was only able to give the prospective patient a very approximate idea of the changes he could expect from surgery. This was because he was limited to verbal description or to line drawings or to inking in modifications in the patient's photographs. All this was of course too crude and inexact to convey something that involved not only surgical expertise but also artistic creativity. To nobody's surprise, then, the patient often misunderstood what he could expect, leading to severe disappointment, even shock, after the results were 'in'.

Computers to the rescue. Computer imaging is a major advance over the earlier ambiguous methods. The system uses a computer, a video camera and a colour TV. The computer projects duplicate images of the patient on the screen. Keeping one image intact, the cosmetic surgeon modifies features (nose, chin, ears, or whatever) on the other image, to give the patient a picture (literally) of the changes that the surgery can accomplish. So, at the first sitting

itself you can see whether what you have in mind and what the surgeon has in mind, tally. You may both not see eye to eye on what change suits you best — in which case you might want to seek a second opinion.

Or, if you're not happy with what's possible, you can simply decide to forego surgery — rather than going into it blind (more or less) and later regretting the results.

Computerised imaging is also helpful to those who do not have any facial defect but would like to improve upon their existing looks. These seekers of excellence may not, however, know exactly what changes will achieve the ideal they have in mind. The computer allows them to see the range of permutations and fine tunings that are possible. For instance, each organ of your face (the nose, lips, cheeks, etc.) can be modified individually or in combination to discover the different possibilities. (You may even decide that you like your original looks better!)

The computer system is not without its risks, however. The screen image is, after all, just a configuration of thousands of dots that can be manipulated by the surgeon in hundreds of ways, and the danger lies in an irresponsible surgeon projecting impossible results on the screen — absurd modifications that are beyond the capabilities of cosmetic surgery.

The surgeon must be ethical enough to show you only what's closest to what you can actually expect from the surgery.

## 3. How do I shop for the right surgeon?

Word-of-mouth is still one of the best ways to get a surgeon who delivers too many messy results is obviously not the man whose scalpel you want to go under. Unfortunately, hardly anyone talks about the cosmetic surgery they've done: it's one of the best-kept secrets of its beneficiaries, whether celebrities or non. And even less do people want to talk about it when they've been left worse off than before!

You could try approaching the Indian Association of Cosmetic Surgeons for referrals. Address: Vishal Mandir, 6th Road, Khar (W), Bombay.

Indicate the procedure you're interested in because even within this specialty there are super-specialists: one surgeon may be a wizard at face-lifts, another may have developed an amazing expertise in hair transplants.

And do tell the association where you would like the surgery done, so that they can send you a choice of names of surgeons practising in that area.

If you decide to go by word of mouth (or word of media) do make sure that your intended surgeon is properly qualified. A homeopath who does liposuctions is preferably not the 'surgeon' to go to. (There's a real-life instance of one, about whom we at *Health & Nutrition* have received angry

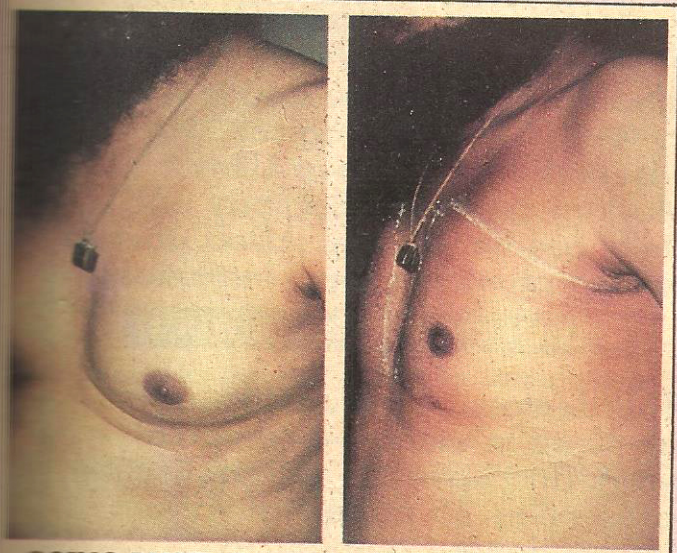




**ONE MONTH LATER:** The results of a chemical peel



**HEMIATROPHY** of the face, a congenital deformity corrected through cosmetic surgery



**GOING BUST:** Gynecomastia, enlarged breasts in the male, treated with liposuction



**SMELLING OUT SUCCESS:** A bulbous nose is surgically re-styled



**WHEN TIME DOES NOT HEAL THE SCARS...** a chemical peel can help



Even if expectations are realistic, nose operations can sometimes result in asymmetrical contours: this is because nasal surgery requires precision in both, surgical judgement and execution — which, no matter how experienced the surgeon, cannot be repeated, machine-like, every time — some allowance has to be made for the human factor.

In surgery involving implants — whether breast, nose, chin, ear or cheek — failure can also result from the spontaneous rejection of the implant by the body, which can happen within days of the surgery or even after a year.

Sometimes keloids may appear — these are ugly, elevated, hypertrophied scars that form above the surface of the skin; they frequently itch and may ulcerate in places. Certainly not something you want from an operation that's supposed to make you look better!

Then there are the risks specific to different kinds of cosmetic surgery. Here are some examples:

**Liposuction.** (This is the removal of fat using a laparoscope, a tube-like device which is inserted under the skin through a small incision. Manipulating the laparoscope, the surgeon disintegrates the globules of fat that lie just under the skin; the fat is then suctioned out through the laparoscope itself which is attached to a vacuum device).

The risks: the incision sites for the introduction of the suction device might heal unfavourably; some skin loss (slough) might also occur, resulting in surface scarring or requiring skin-graft repair. These risks are higher the more the amount of fatty tissue removed, and the less the elasticity of the skin (skin loses its elasticity as it ages).

**Breast augmentation.** Where an implant is used (silicone injections are virtually passé now), "capsular contracture" occurs in an estimated 15 per cent of cases — this is tightening of the fibrous capsule which forms around the implant, causing undue hardness of the breast.

Sometimes, there is a pooling of blood around the implant within the first 24 to 48 hours after surgery. If the volume is significant, it may be necessary to re-open the incision to control the bleeding.

### **8. How should I prepare for the surgery?**

You'll have to plan well ahead and schedule the date of surgery keeping in mind that cosmetic surgery requires an extended recuperation period, and that many procedures also require you to severely restrict your activities for an appreciable amount of time after the operation. That means taking a long break from work (or, if you're a student, scheduling surgery during vacation time); it also means ensuring that no major merry-making event, such as a family wedding, is coming up within a week or so of surgery — if you've had a chemical peel, or a breast operation, there's no way you're going to be able to attend, leave alone make merry.



**A computer's eye-view: Of what is, and what could be**

Other more specific instructions related to the surgery will be given to you by the physician once the date has been fixed.

### **9. What is the type of anaesthesia that will be used?**

In most cosmetic surgery, either general anaesthesia or local anaesthesia may be used, according to the surgeon's preference. Some surgeons use a combination of light general anaesthesia and local anaesthesia — which permits a high level of oxygen to be maintained throughout surgery. But each patient's sensitivity and responses vary, and a surgeon may have to modify the type of anaesthesia used accordingly.

### **10. How long will the operation last?**

Between 20 minutes to five hours, depending on the type of surgery and on the amount of work required on a particular patient. Liposuction to correct a double chin would require only about 20 minutes; but liposuction around the hips, buttocks or thighs would take two hours. A face-lift would take about three and a half hours, so would breast augmentation. But breast reduction would take a full five hours.

### **11. Will I need to be hospitalised?**

Most cosmetic surgery can be done today on a day-care basis; unfortunately, there are not too many day-care centres in India. On the other hand, the cosmetic surgeon may prefer that you stay at the nursing home overnight.

However, if there are signs that post-operative complications are likely to develop — indicated by a drop in b.p., shallow or fast respiration, paleness, blue nails, etc — you will definitely have to stay on in the hospital till you have tided over the problem.

### **12. What will I look — and feel — like in the immediate post-operative period?**

In the case of facial surgery, probably unrecognisable even to yourself. Swelling,



discoloration, numbness, bruising, pain and discomfort are common effects of all cosmetic surgery. The anaesthesia will numb the acute surgical pain during the first 4 to 6 hours following surgery; after that, pain-killers will alleviate the dull lingering pain that may persist for days.

The other effects like swelling and bruising will subside on their own very gradually. The time varies according to the cosmetic procedure. Here's a glimpse of what you can expect in one procedure, nasal surgery:

Varying degrees of swelling and discoloration around the eyes become evident during the first 24 hours, and decrease gradually over a week.

Nasal swelling itself persists longer, upto around a fortnight. But some degree of numbness and swelling in the nasal tip area will persist much longer, the feeling being one of tissue firmness. Final settling and softening may take 6 to 9 months — and there's no way you can hurry it along.

Post-operative nasal bleeding can occur on the first or second day after surgery, or after removal of the nasal packing (which may be used by the surgeon to provide interior support of the new nasal contours).

### **13. What are the precautions I will need to take during the post-surgery period?**

The surgeon will give you instructions — specific dos and don'ts — all aimed at avoiding injury or distortion during the vulnerable period immediately after surgery.

Some instructions apply to all kinds of cosmetic surgery: complete bed rest for at least the evening of the surgery; avoidance of quick movements, bending, straining, lifting and — if possible! — sneezing. You will be asked to avoid aspirin or aspirin-containing drugs for a week; this is because aspirin thins the blood and hampers the clotting that is essential to the healing process. You may also be asked to avoid alcohol for about a week: it's not unknown for a patient, under the influence of alcohol, to tear the dressings right off his face!

Other instructions are specific to the particular surgery performed. For instance, after blepharoplasty (eye-lid surgery), you'll be asked to apply ice-cold water compresses over the area, using gentle pressure, for one hour, four times on the day of the surgery. You'll also be asked to apply a prescribed ointment over the stitches every two to three hours. You'll need to avoid contact lenses for at least two weeks following the surgery. And you'll be instructed to call on the doctor or hospital immediately if you experience excessive swelling, pain or bleeding.

### **14. To what extent will my normal routine and work be disrupted in the period following surgery?**

In very many ways, but again variable according to the type of surgery. In general, you'll need to take a break from your job, and often from heavy household work and fitness workouts.

Be prepared for *tapasya*, says Sharma. Here's a look at how breast surgery, for instance, will restrict your normal routine:

For the first 10 days, regard yourself as a convalescent, with activities limited to reading and watching TV. If you have children under 3 years, you'll have to give over their care to someone else during this period.

Over the next 10 days, light activities such as dusting, and cooking that does not require cumbersome or strenuous preparation, can be started. Women who are in a physically undemanding job can return to it after about three weeks. But driving a car is not allowed for the first two weeks after surgery.

The wound must be kept dry for the first two weeks; and a breast-feeding bra must be worn round the clock for the same period, even in the bath. The purpose of the bra is to provide support, and the front clasp prevents you from straining vulnerable muscles when you try to hook it on at the back.

Over the fourth and fifth week, you can gradually return to your normal routine, with the exception of lifting, stretching and athletic activity.

Sexual activity involving the breast should be avoided for a month to 6 weeks.

In the case of some cosmetic procedures, the restrictions extend for an even longer time: after a chemical peel, for instance, you'll have to avoid exposure to direct sunlight, harsh electric lights and a running TV screen for upto 24 weeks (that's the better part of half a year!) For the same period, you'll also need to wash your face very gently and dab it with a towel (no rubbing); and you'll need to apply a protective layer of moisturising cream over your face for most of the time.

### **15. Will people know that I've undergone cosmetic surgery?**

If you can hide away from the world for as long as it takes for the post-operative swelling and discoloration to subside, then most people won't guess it at all. But do remember that these signs sometimes take a longer time than normal to disappear: For instance, discoloration can be particularly troublesome when the pre-surgery pigmentation has been dark.

Often, cosmetic surgery is apparent only to those who know the tell-tale signs. For instance, the surgical incisions of eyelid surgery initially appear as small red marks just to the side of the eye, and they take several months to fully fade.

Again, in nose surgery, flaring nostrils, or a tip that doesn't look quite right, are both giveaways. (To mould the tip into a desired shape, surgeons must



cut or gently crush nose cartilage, and sometimes the resulting — internal — scar causes cartilage to contract, pulling the tip out of shape).

### **16. Will the surgical scars be noticeable?**

Scarring — a normal and “accepted” side-effect of other kinds of surgery — defeats the very purpose of cosmetic surgery. That’s why the surgeon attempts to locate incisions in the natural folds of the body where the scars will not be visible, and also to keep incisions as small and as minimal as possible. Thus, nasal surgery, for instance, is performed from inside the nose, leaving no external scars, except in special circumstances. In face-lifts, the incisions are along the hairline behind the ears.

Today, the use of the laparoscope (which requires only a small incision through which the tube enters the body) has further reduced the extent of scarring. In liposuction for the thighs, for instance, the incision is made within the buttock crease and the laparoscope is passed through this incision to the side of the thigh. The small surface scar (about  $\frac{1}{2}$ ” to  $\frac{3}{4}$ ”) is well hidden in the crease line.

Again, in breast augmentation using the saline implant, the surgeon introduces the laparoscope (carrying the deflated implant shell) through the navel up to the breast area. (Saline is then injected into the implant, inflating it and pressing it into place behind the breast wall). The scar is all but fully concealed in the navel.

But not all scarring can do such a disappearing act. For instance, in abdominoplasty, the incision is made along the so-called bikini line, and the scarring takes as long as six months to a year to resolve itself — and some permanent mark will always remain. (That’s why abdominoplasty is not recommended for minor degrees of abdominal wrinkling or looseness, only for cases where the scar line is preferable to the grossness of the abdominal overhangs).

### **17. Can repairs be done if I don’t like the results?**

Sometimes.

But you need to wait before deciding you’re unhappy with the results. All procedures have a “settling-down period” — two to three months for eyelid surgery and breast augmentation, three to six months for face-lifts, and as long as a year for nose surgery.

An ethical cosmetic surgeon who is himself unhappy with the results will give you a re-do without charge — if a re-do is possible. For instance, nose or chin implants can be removed; breast implants of one type (eg. the silicone gel implant which has come under recent fire) can be replaced with another (say, the saline-filled implant, with reportedly lower risks).

Of the two most common lipo-related complaints

— the removal of too much or too little fat — it’s far easier to correct the latter. In the case of over-ambitious lipo surgery, some surgeons try to re-inject fat into sunken areas — but with mixed results, because the body tends to absorb some of the fat over time.

Nor are all re-dos an easy affair: sometimes, as in nose jobs, they are often as complex as the original procedure. (That is perhaps why the highest rate of dissatisfaction is associated with this most-requested facial surgery).

### **18. How long will the results last?**

The results of implant surgery — provided the implant is accepted by the body — are long-lasting.

In the case of eyelid surgery, too, once fatty tissue “bags” are removed, they do not generally return. But after 5 to 10 years, touch-ups are required for this and other facial surgery as the aging skin continues on its natural downward slide.

In the case of auto-fat injections, partial re-dos are eventually needed because transplanted fat is absorbed by the body within a year or so.

### **19. How expensive is cosmetic surgery?**

Some treatments are pricey; others won’t slash your wallet so badly.

Surgery costs in India vary from Rs. 3,000 to Rs. 15,000, according to Sharma. (Consultations, hospitalisation, medications, and implant costs are all additional). Since all implants, to date, are imported, the overall costs escalate when they are used. A single cheek implant costs Rs. 1,800 to Rs. 2,000; a pair of breast implants costs around Rs. 21,000.

### **20. What are the long-term/ permanent effects of cosmetic surgery?**

These vary with the procedure. In liposuction, some waviness in the surface (skin) contour may be permanent, depending upon the amount of fatty tissue removed.

In breast reduction surgery, the loss of soft tissue and its replacement by scar tissue is one of the major permanent effects. The greater the reduction in volume and the greater the contour changes needed, the greater the tissue loss — particularly in the nipple area which requires the greatest displacement.

In the same procedure, the nipple is re-located in the attempt to restore normal contours; apart from the partial or complete loss of nipple sensitivity (depending upon the type of surgery), breast-feeding will also generally not be possible. (If the surgeon has to allow for breast-feeding in the future, he has to vary the technique which may, however, compromise the results).

**NIRMALA FERRO**