

DR. BYUN IN MEDIA

BODY & MORE WINTER 2003

COVER STORY

HOLLYWOOD-STYLE SURGERY

IF THE NIPS AND TUCKS OF THE RICH AND FAMOUS MAKE YOU THINK ABOUT FINALLY HAVING A LITTLE WORK DONE, FIND OUT WHAT THE DOCS HAVE TO SAY ABOUT CELEB-INSPIRED COSMETIC SURGERIES.

By Margaret Littman

From gastric bypass to facelifts and even handlifts, the tabloid photos and TV headlines make life-and-body-enhancing surgeries seem like simple sculpting.

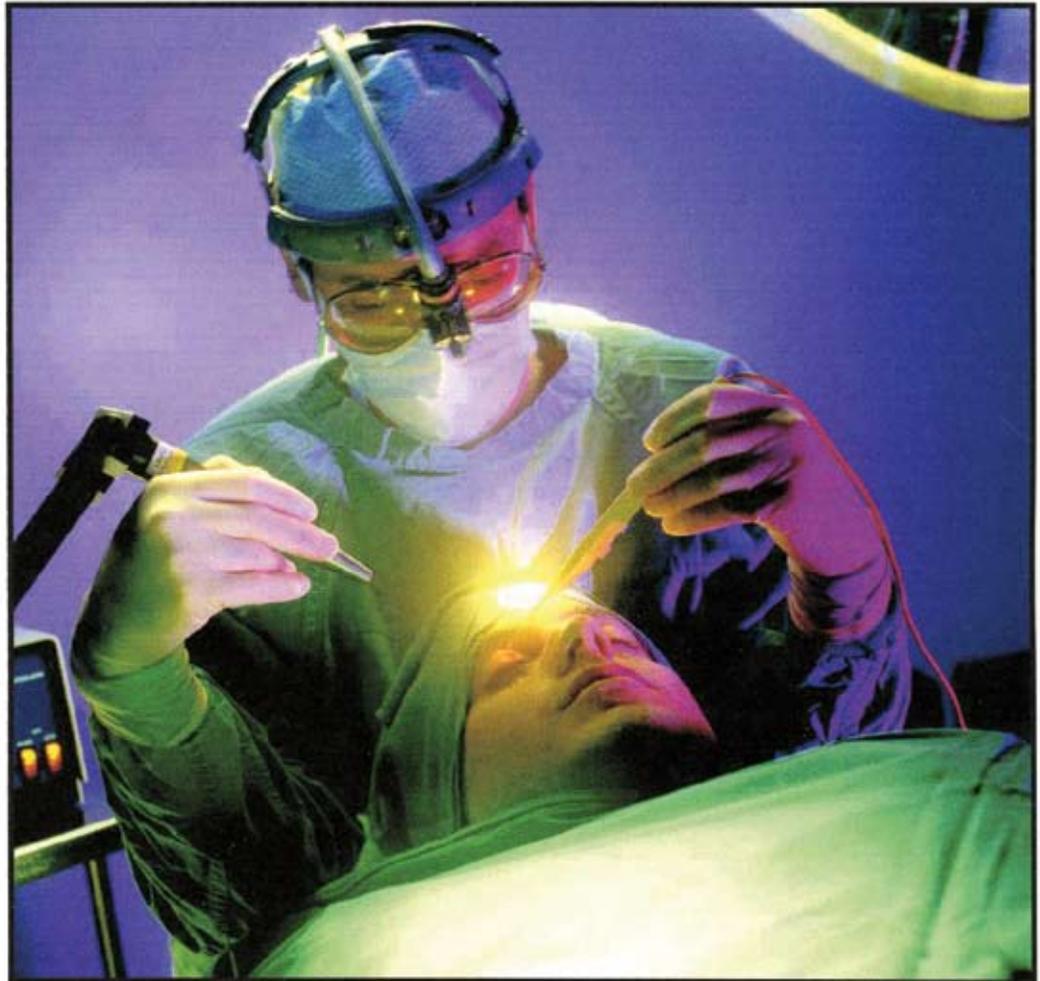
The before-and-after picks devoid of any images of bruising, lengthy recoveries and even follow-up surgeries are never shown. The sweet screen siren simply disappears for a few weeks (or months) and reappears looking younger, firmer, smaller, larger or smoother, depending on her chosen procedure.

These procedures aren't new, nor is the fact that celebs routinely get them to stay marketable. Dean Martin, Gary Cooper and John Wayne were all rumored to have had some "work done". What is new is the mass acceptance of this kind of elective surgery.

A 2000 Roper survey found that six out of 10 Americans felt plastic surgery was an acceptable choice for those not happy with their looks. As celebrities such as Catherine Zeta-Jones-Douglas continue to perfect themselves under the knife, readers of those headlines flock to their docs to emulate the look.

"There is, unequivocally, a connection between celebs and consumer taste," says Richard Rakowski, chairman of Advanced Aesthetics Institute in Palm Beach, Fla. The Institute is planning a nationwide expansion to be one of the only facilities in the United States where a plastic surgery "concierge" helps patients pick the appropriate procedures for the looks they want.

What else is new is that in the rush to look like Jennifer Aniston, people forget that, like everything, plastic surgery isn't necessarily as it seems on TV.



"In the last 10 to 15 years, what has driven plastic surgery is what people have seen on TV. They know what these people looked like before and they see

what they look like after, and they want to do these things," says Dr. Stanley Taub, a board certified plastic surgeon in New York City.

As seen on TV

When TV weatherman Al rocker lost nearly 100 pounds thanks to a gastric bypass

surgery, Taub saw an increase of people in his waiting room, and the doesn't even perform the procedure. And since singer Carnie Wilson underwent the same

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procedure, it seems she won't stop talking about it, if you see her commercials on daytime TV. (Note: Wilson had the additional cash to get her flabby arms, breasts and tummy tucked neatly away post fat surgery. She even posed for Playboy to show off her new self.)

"People come in after having it done and they've lost 140 pounds, but that doesn't mean their body shrunk down to what it looked like when they weighed that before."

Taub is faced with patients wanting plastic surgery to do away with those extra folds of skin, large sagging breasts of flapping empty thighs, left by the gastric bypass. Entertainment Weekly magazine recently reported that some of the women hoping to get nipped and tucked on ABC's "Extreme Makeover," were those who were suffered from the loose skin leftovers of their previous surgery.

While skin tucks are not particularly complicated procedures, and typically cause very little bleeding, they are surgeries nonetheless, and those who have planned their recovery only by reading fashion magazines are generally unprepared.

Dr. Michael Byun, M.D., a Chicago board-certified plastic surgeon and author of "The Non-Surgical Facelift Book, A Guide to Facial Rejuvenation Procedure" (Addicus Books, #19.95), has to give similar talks to patients who don't know the downsides celebrities endure with cosmetic surgeries. Perhaps because of the media blitz covering her possible nuptials, Byun spent the summer of 2003 talking to patients who wanted buttock implants so they could look more like Jennifer Lopez.

Bigger isn't better

"You know people come in here looking to add to their buttocks," a downtown Chicago Cosmetic Surgery consultant told a 35-year-old patient who did not want to be

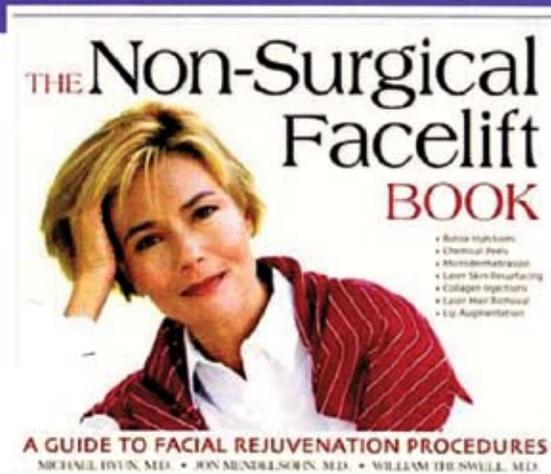
identified for this story for fear of embarrassment. While waiting for a dermatology appointment, the patient noticed a medical journal showing how surgeons can make "shelf" rear ends look smoother and flatter. The office was offering "What the heck, I've been teased about this behind all my life and nothing quite fits it, let's see if IO can do something about it."

As the consultant drew Magic Maker lines where fat could be sucked out, she wouldn't stop reminding the young professional woman that the upscale cosmetic surgery center's clientele generally comes in to have their buttocks enhanced.

"Well, you can donate my big butt to science them," the unnamed patient said. She ended up forgoing the surgery, as it was deemed her rear end was 99 percent muscle and therefore just like God meant it to

"THERE IS A LOT OF MISUNDERSTANDING. SURGERY IS DANGEROUS AND INVOLVES RISK. WHEN PEOPLE MAKE DECISIONS BY LOOKING AT CELEBRITIES WITHOUT A LACK OF KNOWLEDGE OF THE MEDICAL SIDE, THEY CAN HAVE UNREALISTIC EXPECTATIONS OF WHAT CAN HAPPEN. NOT ALL OF US ARE DEMI [MOORE]."

Richard Rakowski,
*chairman of Advanced Aesthetics
Institute in Palm Beach, Fla.*



be. But she was flabbergasted anyone in their right mind would want a bubble butt, J.L.o. not.

While on paper a buttock implant is much like a breast implant, albeit in a different part of the body, Byun says there are some complications. Because most people sit on their rears for a good part of the day, and breast aren't weight-bearing, the recovery time is longer and there are more restrictions on what a patient can do post-op. While a celeb may be able to get three weeks off work because she can't sit down, that's a harder request for most working people to make.

The whole story

While Taub and Rakowski are concerned that everyday people don't know about the real risks and complications of specific surgeries, such as gastric bypass and buttocks implants, what concerns them more is that prospective patients look at pictures in magazines and are unaware that what they are seeing may be the result of two or even more trips under the knife: perhaps a gastric bypass followed by a skin tuck, breast implant and Botox for the wrinkle lines, Not to mention another

surgery or two to make everything just right.

Taub tried to counsel his patients to understand that it may take two or three smaller surgeries to get a dreamtic makeover, otherwise the body can't recover from the shock. If a woman wants to go from being an A cup to a DD, for example, it should be done in several stages, Byun adds, so that the skin can stretch.

"Otherwise, the implant will pop out."

The order in which procedures are done is important, too. One should have time to recover from a rhinoplasty (a nose job) and look at the implant it has no one's face before deciding to have a face lift or Botox injections.

"There is a lot of misunderstanding. Surgery is dangerous and involves risk," says Rakowski.

"When people make decisions by looking at celebrities without a lack of knowledge of the medical side, they can have unrealistic expectations of what can happen. Not all of us are Demi[Moore]. Even with surgery, we can't all look like her. There has to be some aligning of expectations."