



Have Yourself a Merry Little **FACE-LIFT.** *Seriously?*

A Manhattan plastic surgeon, **GERALD IMBER, M.D.**, makes the case for having cosmetic enhancement done in small doses—and sooner rather than later.

IMAGINE NEW YORK'S JFK AIRPORT two days before Christmas: Business-class check-in looks like a Vuitton tag sale crossed with the running of the bulls at Pamplona. People are headed for chic spots everywhere—Palm Beach, Saint

Barths, Aspen, Europe. Private jets are stacked up, and Netjets will likely be flying all its 630-plus fractional-ownership aircraft. Ten days in the sun or on the slopes, mingling with the well-heeled crowds, may be some people's idea of heaven, but

this year it's not in the cards for my patient Lee Jenkins.* A blonde, trim, 52-year-old corporate lawyer, Jenkins will commute several blocks from her Fifth Avenue home in Manhattan to collect her Christmas present to herself. This year she will use a

Body Works | Plastic Surgery

break in her desperately tight schedule for a most precious and unusual gift, one I call rejuvenation. It's a unique antidote to the wear and tear of a high-powered life.

As more busy individuals designate the few predictable breaks in their calendars for some form of self-improvement, those of us in the cosmetic surgery industry are continually developing ways to accommodate their requests. We've already advanced the process from a hospital stay and weeks in hiding to a quick fix then back to work, making a visit to the plastic surgeon for the new year so popular that many appointments have to be booked 12 months in advance. John A. Grossman, M.D., a Denver plastic surgeon, notes, "The Christmas disappearing act has been fashionable for a

My colleagues and I hear this time and again; it's what drives people to search for the right remedy. With average life expectancy reaching the late seventies, we have years to ponder the inexorable changes in our perception of ourselves. This was not always the case. When I entered practice more than 25 years ago, the standard response to a 50-year-old woman complaining of jowls or a double chin was simple: "Wait until it gets worse then have a face-lift." There were no other options, and ten young years were wasted waiting to get old enough for the full-blown come-in-wrinkled-and-exit-smooth face-lift.

Those days are largely over. Consider the alternatives currently available, such as injections that require only an office visit

EIGHT QUICK FIXES

Botox, the purified type A botulinum toxin, has been proven extremely effective in correcting frown lines between the eyebrows and on the forehead, plus laugh wrinkles outside the eyes. But beware: Too much makes one temporarily expressionless. The good news is, it's temporary. The bad news is, the desired effects last only around four months.

From \$500 per area treated

Fillers such as CosmoPlast, Restylane, Hylaform, and others are great at filling in the nasolabial folds, those deep creases from the outside of the nostrils to the corners of the mouth. The effects last approximately four to six months.

From \$500 to \$750 per cc., with one cc. used for each treatment

Fat Transfers offer a natural, larger volume of filler, some of which becomes permanent. Most useful in the nasolabial folds and for cheek augmentation, it doesn't lend itself to filling fine wrinkles. It's usually done under sedation.

From \$2,000 to \$3,500 per session

Microsuction is a refined version of liposuction. Performed under sedation, it's the best tool for eliminating early jowls, double chins, and pouches on the cheeks. *From \$2,000 to \$5,000*

Lower-Lid Clamping, also known as the pinch technique, is relatively noninvasive. It eliminates excess lower-lid skin. *From \$2,000 to \$4,000*

Subconjunctival, or Transconjunctival, Blepharoplasty removes lower-lid bags from inside the eyelid without external scars. Not applicable for older people with loose skin, unless that skin is tightened as well. *From \$3,000 to \$5,000*

Limited-Incision, or Short-Scar, Face-lift employs one half to two thirds of the incision made in traditional face-lifts, with reduced recovery time. The surgery does not produce scars behind the ears or on the neck, so hair can be worn up. Not effective on the forehead or a wrinkled lower neck. *From \$10,000 to \$15,000*

Mini-lift uses the smallest incision, from the sideburn to the ear. Skin is tightened; cheeks and jowls lifted. Recovery takes less than a week. *About \$10,000*



SOME PLASTIC SURGEONS ESCHEW THE "LESS IS MORE" APPROACH AND CHAMPION MORE EXTENSIVE REJUVENATING PROCEDURES.

while, particularly near Rocky Mountain destinations like Aspen and Vail." He even encourages liposuction patients to spend the last few days of the holiday on the slopes.

For many choosing to smooth out their lines or puff up their cheeks, it's predominantly about maintaining a youthful visage, which has generated a rise in the growth and popularity of antiaging techniques. According to the American Society of Plastic Surgeons, the number of such procedures reached more than nine million in 2004. The reasons for this phenomenon? Wrinkles and loose skin have increasingly met their match with injectables such as Botox, skin treatments like microdermabrasion, and other less-invasive operations—for example, mini-lifts and fat transfers. So instead of waiting until their late fifties and sixties to take action, men and women are opting to tackle the signs of aging as they show up. "I'm young, I exercise, I'm at the top of my game," Jenkins says. "Then one day I look in the mirror and see my mother. I love my mother and all that, but this is a different generation. We think younger, we act younger, and we want to look younger."

and no downtime. These treatments are not a secret; everyone who reads fashion magazines or watches television knows all about Botox and its kissing cousins CosmoPlast, Restylane, and the rest of the wrinkle fillers. Though they work, these are only temporary measures—very temporary. None of the most popular injectables has been shown to produce results lasting more than a few months (six at the outside, usually less). Still, they hold an important place among our tools. They can tame frown lines and furrowed brows in minutes, plus soften the nasolabial folds (those deep creases that run from the outside of the nostrils to the corners of the mouth).

Yet, the search continues for organic, long-lasting substances that mimic the skin's natural collagen and elasticity. Every week, it seems, a new miracle product is touted to doctors and the public alike. Each is rigorously and expensively tested, and each represents just a baby step forward. In my opinion, however, the most practical solution to sagging skin has been a series of less-invasive surgeries.

In the interest of full disclosure, I should point out that over the past two decades

Body Works | Plastic Surgery

I have been preaching the gospel of getting these smaller procedures done earlier in life. Naturally, I've been delighted to see so many of my colleagues adopt the faith, but enthusiasm is never universal and not every plastic surgeon agrees.

These quick-recovery remedies encompass an "evolution, not revolution" philosophy. That is, they tighten, lift, smooth, reduce, and enhance where necessary before a total transformation is required. As a number of my patients have made clear, no one wants to march around advertising "I had my face done." They would much rather elicit comments such as "You look just great" and "Everyone else seems to get older while you stay the same."

THE VISIBLE CHANGES OF GROWING older occur in a fairly predictable pattern. When you reach your late thirties, smile lines under and outside the eyes, as well as deepening nasolabial folds, begin to appear. Bags under the eyes and excess,

overhanging upper-lid skin are phenomena of your forties. And as you head into your fifties, loosening begins at the jawline. This is all compounded by changes in the superficial layers of the skin, brought on by too much sun exposure and smoking.

Throughout the years surgeons have developed an arsenal of tools and strategies to deal with specific trouble spots as they arise. Popular among these smaller procedures is microsuction. It involves inserting a two- or three-millimeter stainless-steel tube, called a cannula, through a tiny incision under the chin and jowls to melt away a double chin. A side benefit is that the irritating effect of the cannula causes the skin to lift and tighten.

Aging brings wrinkled, excess skin to the lower eyelids as well. This can be quickly corrected by pinching off and excising the unwanted layers. Invisible, dissolving sutures often help minimize the care required afterward. Similarly, removing under-eye puffiness is done quickly and easily from inside the lid. Of all the

injectable fillers, fat transfers work best for this type of correction. Injecting live fat cells also yields excellent results when enhancing the cheekbones or chin. Rapidly performed, with about a day of downtime, fat transfer has become a mainstay of the "less is more" school of cosmetic surgery.

Most significant among the list of smaller procedures performed sooner is the mini-lift. This method—in which a tiny incision is made from the sideburn to the ear—lifts the cheeks and jawline and restores angularity to the shape of the face. The incision is virtually hidden and heals in a short amount of time.

Of course, such procedures are not applicable to all patients and all situations, and more severe problems require more involved surgery. Some plastic surgeons, like Sam T. Hamra, M.D., of Dallas, eschew the less is more approach and champion extensive rejuvenating processes. Hamra, who developed the deep-plane, or composite, face-lift, in which all of the underlying fat and muscle move as one bloc with

the skin, believes isolating single areas for treatment misses the mark. "Any person with aging signs should have the complete face, eyes, neck, and forehead rejuvenated together," Hamra says. "Otherwise a disharmonious appearance may occur."

Whatever philosophy we doctors subscribe to, virtually all of us respect our patients' understandable desires to hide the signs that they have had work done. Beverly Hills plastic surgeon Norman Leaf, M.D., tells his male patients to grow a beard after surgery, keep it for a few weeks, and dispense with it when people have already adjusted to a new you. Changes in hairstyle, tinted glasses, and a new wardrobe help serve a similar purpose. Harry Glassman, M.D., another Beverly Hills plastic surgeon, points out that the curtain drops on the entire entertainment industry from mid-December to New Year's. "Even peripheral businesses shut down," Glassman says. This gives his patients time for a "soft opening" of their new look, and the opportunity to enjoy a bit of vacation.

MEANWHILE, BACK IN NEW York City, Lee Jenkins prepares to receive her mini-lift. She's getting it to firm up her sagging jawline and return the angularity to her cheekbones. She's also having a small incision made to remove the puffiness under her eyes. Despite a bit of trepidation, Jenkins has done her homework and tells me she feels confident and excited.

She proceeds to check in to the same facility at which I held the original consultation about her surgery. She speaks with the anesthesiologist, the nurse, and then once more with me.

In the operating room, she is sedated via an intravenous line and is fully asleep by the time a local anesthetic is injected. First, I make small incisions inside her lower lids to remove the fatty deposits responsible for her constantly puffy eyes.

Next, I use microsuction to remove the hint of a double chin and jowls. Then I create a hidden incision in the lowest follicles of the sideburn ducking into the ear.

This gives me access to the underlying muscle and fascia—which is tightened, gently lifting the neck, jawline, and cheeks—and allows for a fast recovery without the telltale signs.

Swathed in bulky dressings of cotton and elastic, Jenkins spends two hours in a private recovery room, with compresses soothing her eyes. After some tea and buttered toast, she and her nurse whisk off to a suite in a local hotel, avoiding the eternal New York problem of doorman scrutiny. Four days later, her eyes hidden behind sunglasses, she joins friends for lunch and replays her experience. A week after surgery, I remove the sutures—and a day or two later she is back at work.

The celebrations have passed and the new year is two days old. In the office, tans are fading, noses are peeling, party tales have grown stale, and the buzz of the workweek has rendered the holiday vacation a distant memory. The smiles are gone, except for the one on Jenkins's face. Her smile gets brighter every day. ■