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## For Cosmetic Surgery, It's Mars versus Venus

By David J. Levens, MD, PA, FACS

Not too long ago, it was quite unusual for a man to have cosmetic surgery—and admit it. Today, surveys show men are not only having more and varied types of cosmetic procedures each year (more than one million in 2006), most are no longer uncomfortable if their friends and co-workers realized they have “had something done.”

Last year, men had record numbers of minimally invasive procedures that provide improvements for the aging face and surgical procedures for a more contoured body. Thigh lifts increased by 39%, male breast reductions by 22%, and tummy tucks by 4%.

Chalk it up to better consumer education and increased media coverage of the subject, or count it as just one more indication that we Baby Boomers, male or female, like the notion of looking better, younger, longer.

But when it comes to who's having what “done”, simple physiology makes it a matter of Mars versus Venus.

The American Society of Plastic Surgeons reports that in 2006, the five most popular cosmetic surgeries for men were: nose reshaping; eyelid surgery, liposuction, hair transplantation, and male breast reduction. Most popular non-surgical treatments were: Botox®, laser hair removal, microdermabrasion, chemical peel and laser skin resurfacing. For ladies, the order was: (Surgical), breast augmentation, liposuction, nose reshaping, eyelid surgery and tummy tuck. For non-surgical procedures, choices were more similar to those of men: Botox®, chemical peel, fillers, laser hair removal and microdermabrasion.

In tribute to Father's Day, here's a brief description of how the three most common cosmetic surgeries for men are typically performed.

**Nose reshaping:** The nose can be straightened and altered in terms of width, size and angle. Bumps can be removed, bulbous nose tips downsized and nostrils tapered and reshaped. Small incisions are made, either inside the nose or externally in concealed areas. The structures making up the nose's framework are altered and reshaped, including cartilage and bone. Skin is re-draped over the new framework. Internally, deviated areas of the nasal septum are straightened to maximally open airways while preserving the septum's support function. Finally, tape, a nasal splint and packing are applied to secure and cushion the framework changes. Packing is removed after 1-2 days; the splint within a week. There are visible refinements in the nose immediately but Improvement in definition continues for several months. Swelling and bruising develop within the first 24 hours. but

will decrease significantly over the first 5-7 days. Most patients report only minor discomfort and/or a sensation of fullness which lasts a few days. Most patients return to work within 7-14 days or less.

**Eyelid Surgery.** Typically, both upper and lower eyelids are treated simultaneously. To reduce excess volume in the upper eyelids, incisions are made in the eyelid folds. Skin and some fat are then removed and the skin is closed with tiny sutures. For the lower lids, incisions are placed immediately below the eyelashes where they are inconspicuous or inside the lower eyelids, depending upon the patient. Fatty tissue which had caused a puffy look is carefully removed or repositioned and the incisions are closed. Careful peeling of the eyelid skin with a laser or chemical is sometimes used to minimize fine lines and wrinkles, blend pigmentation spots and tighten the skin. Often, Botox® and/or fillers are also used around the eyes to address lines and contour deficiencies and enhance overall results.

There is some bruising and swelling for the first week, but after 7-10 days, most patients return to work and social activities, though strenuous activity should be avoided for 3-4 weeks. It is imperative to avoid sun exposure.

**Liposuction.** Detailed lines are drawn on the body, marking areas to be suctioned. Tiny incisions are made in concealed areas, where possible, and a small suction tube (called a cannula) is inserted to the proper depth of the fat deposit. The cannula is maneuvered carefully until an appropriate amount of fat has been removed. The entire bulging area is treated, removing small amounts of fat at a time, constantly checking fat thickness and contour. After suctioning on one side of the body, the opposite side is addressed, constantly comparing to ensure good symmetry or to compensate for any “mismatch” noted prior to the procedure. Incisions are carefully closed and an elastic garment or dressing is placed to put gentle pressure on the skin and prevent excess fluid accumulation in the area suctioned.

For a few days, there is mild to moderate discomfort. The patient wears an elastic garment for at least 3 weeks to minimize swelling and help re-contour the skin. There may be bruising, swelling or numbness which resolves greatly in the first 1 to 3 weeks. Most patients return to work and social activities within 2 or 3 days. Aerobic or strenuous activity should be avoided for 2-3 weeks.

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