

Winter 2023

volume 27, number 1

beauty • artistry • expertise • education

AESTHETIC SOCIETY NEWS

—
Celebrating 30 Years of ASERF
Groundbreaking Research

—
Save the Date—
3 Days in Miami Beach

—
More than a Machine—Diving into
Hyperbaric Oxygen Chambers

—
The Future of Finance—
Actions to Take Now

—
Tackling Ethical Conundrums

—
Analyzing Breast Implant
Illness Outcomes

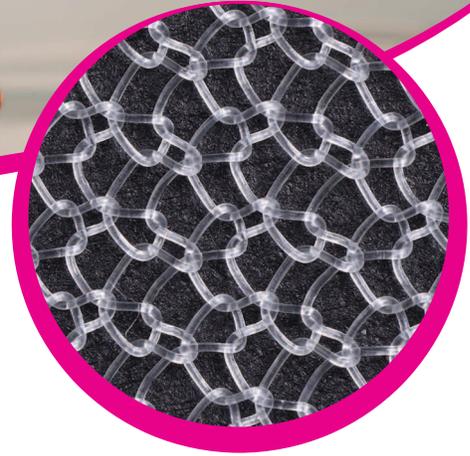


 The Aesthetic Society®

Art by: Anureet Bajaj, MD, MBA

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GalaFLEX LITE™

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Indications for Use GalaFLEX LITE scaffold is intended to reinforce soft tissue where weakness exists in patients undergoing plastic and reconstructive surgery, or for use in procedures involving soft tissue repair, such as the repair of fascial defects that require the addition of a reinforcing or bridging material to obtain the desired surgical result.

Important Safety Considerations Possible complications include recurrence of the soft tissue defect, infection, seroma, pain, scaffold migration, wound dehiscence, adhesions, hematoma, inflammation and extrusion. The safety and product use of Galatea scaffold for patients with hypersensitivities to the antibiotics kanamycin sulfate and tetracycline hydrochloride is unknown. Galatea scaffolds have not been studied for use in breast reconstructive surgeries. The safety and effectiveness of Galatea scaffold in neural tissue and in cardiovascular tissue has not been established. The safety and effectiveness of Galatea scaffold in pediatric use has not been established.

For complete safety information, consult the GalaFLEX LITE Instructions for Use, which can be found at www.galateasurgical.com/ifu.

1. Preclinical data on file at Tepha Inc. Results may not correlate to clinical performance in humans.
2. Deeken, Corey R., and Brent D. Matthews. "Characterization of the mechanical strength, resorption properties, and histologic characteristics of a fully absorbable material (poly-4-hydroxybutyrate--PHASIX mesh) in a porcine model of hernia repair." ISRN Surgery. 2013.
3. Data on File at Tepha.



Aesthetic Society News

Quarterly Newsletter of The Aesthetic Society

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The Aesthetic Society: www.theaestheticsociety.org

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Send address changes and membership inquiries to:

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The Aesthetic Society

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5 President's Message

7 Meetings Calendar

EDUCATION

10 The Aesthetic Meeting 2023—Let's Connect in MIAMI BEACH!

17 Nuances in Injectables 2022—What you missed!

AESTHETIC CARE TEAM

19 What You Need to Know About Hyperbaric Oxygen Chambers

SOCIETY NEWS

21 *ASJ* and *ASJ Open Forum*

25 The Aesthetic One App

29 Questions for Cover-Artist, Dr. Anureet Bajaj About Her Interest in Art and Painting

33 Media Notes and Quotes

Meet the Staff: Shelene Knisley

34 The Aesthetic Society's Premier Partners

36 The Aesthetic Society's Alliance Partners

39 Industry Partners Support The Aesthetic Society's Mission

43 Membership FAQs and Membership Myth-Busters

FOUNDATION NEWS

45 Update on ASERF

49 New Findings from the Biospecimen Study on Breast Implant Illness (BII)

53 SETA—Successful Research Demands the Right Combination of Technology and Support

55 Douglas S. Steinbrech, MD—The Newest member of ASERF's President's Circle

ASERF to Honor James M. Stuzin, MD and John B. Tebbetts, MD in Miami Beach

PRACTICE SOLUTIONS

57 What The World Needs Now is a Little More Kindness

59 Recession Ready or Not?

61 Leveraging Your Google Business Profile to Drive Revenue and Growth

63 7 Tips for Choosing an SEO Agency

65 How Do I Choose an Insurance Company and What Sort of Policy Should I Have?

67 Don't be Blindsided by Staff...

69 Three Financial Actions to Take to in Uncertain Times

71 Creating a Positive Team Culture

73 The Straight & Narrow—Ethical Dilemmas: When Ads Don't Add Up & Dating Detriments

SAFETY MATTERS

75 Patient Safety in Chin Augmentation with Implants

78 Scissors on the Seam—Patient Safety in Chin Augmentation with Implants

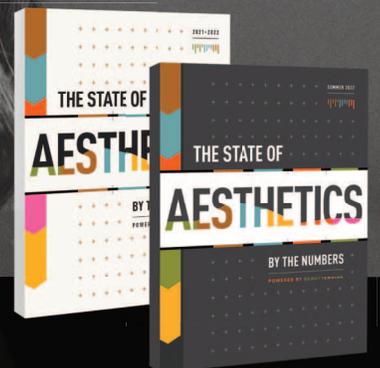
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AESTHETICS
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With Gratitude

By Jennifer L. Walden, MD, FACS

Dear Members,

This winter and holiday season, I want to take a moment to say how thankful I am for being able to be your President this year and have the opportunity to interact with so many inspiring and tenacious residents, fellows, academic faculty members and private practice aesthetic plastic surgeons. This year is going by so quickly! Before I blink, I'll be handing the gavel over to friend and colleague Dr. Mindy Haws this April in Miami Beach. We hope to see you there!

I wanted to bring your attention to an educational and newsworthy press release, bit.ly/3Yjp9lb, that went out recently to bring attention to ASERF's crucial research on Breast Implant Illness as led by lead authors, Drs. Patricia McGuire and Caroline Glicksman. This is important to be in the public domain, as it sets the record straight on many lay questions raised online. I believe there is value in having a positive conversation about this in our public

messaging to combat the negatives related to BII online with articles in mainstream and social media surrounding Danica Patrick and other celebrities.

Continuing on my with grassroots tour, this November I had the honor of speaking to the Houston Society of Plastic Surgeons where I got the chance to visit with local plastic surgeons and visit with one of my favorite Texas legends, Dr. Tom Biggs. I also enjoyed being a visiting professor for the University of Texas Houston Grand Rounds and The University of Texas Medical Branch residents and faculty (see photo with Dr. Linda Phillips, Truman G. Blocker Chair of Plastic Surgery, UTMB).

Many thanks to Dr. Camille Cash for being my parliamentarian this year (see photo), as she breaks barriers in our field and leads our ASERF Externship Task Force for underserved students, bit.ly/3uIQJky. ASERF's Externship Program was designed to expose medical students to aesthetic plastic surgery. Externs are matched with board-certified plastic surgeons who will serve as their mentors and will be provided opportunities to assist with research, attend a national meeting, and participate in a five-day observership within their mentor's practice.

Dr. Cash received 28 applicants for this first time program, exceeding expectations. We would love to find more willing mentors to participate. If you are interested in participating in the Externship program and in being a mentor for a medical student without local institutional access or exposure to plastic surgery, please email me at drwalden@theaestheticsociety.org. On the same note, if you are an industry representative and are interested in becoming a sponsor for this important initiative, please contact me!

Back in October, I traveled to ASPS' Plastic Surgery The Meeting 2022 in Boston.



With Dr. Camille Cash, Board Parliamentarian.

I attended and audited their Board of Directors meeting and also went their BOD Dinner that evening with Dr. Haws. We all, of course, share similar struggles and victories in the practice of plastic surgery. Areas of more coordinated collaboration have been in recent Joint Advisories on BBL Safety, bit.ly/3FJOlwF, and our Statement Against Physician Violence, bit.ly/3Fp9eiW. Dr. William Adams has also worked over the past months to bring back the Breast Implant Collaborative Community with key stakeholders from The Aesthetic Society, ASPS, patient advocates, and industry as we communicate cohesively for the house of plastic surgery with the FDA.

Another meeting I went to in Boston was the Oral Examiner Training Course hosted by the American Board of Plastic Surgery. The Board is actively working to increase the number of examiners who are board-certified aesthetic plastic surgeons in private practice since so many of its future diplomats go into private practice and perform aesthetic surgery. We want to ensure representation of our members amongst board examiners, so have recently arranged for the Oral Examiner Training Course to take place at our annual meeting, this April in Miami, as well. If you have any interest in learning more about that process, please reach out to me or Dr. Nolan Karp at nolan.karp@nyulangone.org.

In closing, I wish you the best for a prosperous new year and I'll see you in Miami Beach!



With Dr. Linda Phillips, Truman G. Blocker Chair of Plastic Surgery, UTMB

If you are interested in participating in the Externship program and in being a mentor for a medical student without local institutional access or exposure to plastic surgery, please email me at drwalden@theaestheticsociety.org.




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Indication: *Sculptra*® (injectable poly-L-lactic acid) is indicated for use in people with healthy immune systems for the correction of shallow to deep nasolabial fold contour deficiencies and other facial wrinkles.

Sculptra should not be used by people that are allergic to any ingredient of the product or have a history of keloid formation or hypertrophic scarring. Safety has not been established in patients who are pregnant, lactating, breastfeeding, or under 18 years of age.

Sculptra has unique injection requirements and should only be used by a trained healthcare practitioner. Contour deficiencies should not be overcorrected because they are expected to gradually improve after treatment.

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The most common side effects after initial treatment include injection site swelling, tenderness, redness, pain, bruising, bleeding, itching and lumps. Other side effects may include small lumps under the skin that are sometimes noticeable when pressing on the treated area. Larger lumps, some with delayed onset with or without inflammation or skin discoloration, have also been reported.

Sculptra is available only through a licensed practitioner. Complete Instructions for Use are available at www.SculptraUSA.com/IFU.

REFERENCE: 1. *Sculptra*. Instructions for Use. Galderma Laboratories, L.P., 2021.

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The Aesthetic Meeting 2023
April 19–23, 2023
Exhibits: April 21–23
Miami Beach Convention Center
meetings.theaestheticsociety.org



The Aesthetic Cruise 2024
June 11–23, 2024

Jointly provided by



Hawaii Plastic Surgery Symposium

January 21–23, 2023

Waikiki Prince Hotel
panpacific.org

Baker Gordon Educational Symposium

February 9–11, 2023

Miami, FL
bakergordonsymposium.com

The 15th American-Brazilian Aesthetic Meeting

February 16–20, 2023

Park City, UT
americanbrazilianaestheticmeeting.com

Northwest Society of Plastic Surgeons— 61st Annual Scientific Meeting

February 18–22, 2023

Whistler, BC
nwsp.org

The Rhinoplasty Society Annual Meeting 2023

April 19, 2023

Miami Beach, FL
rhinoplastysociety.org/meetings

Endorsed by



38th Annual Atlanta Breast Surgery Symposium

January 27–29, 2023

The Intercontinental Buckhead, Atlanta, GA
sesprs.org

Dallas Cosmetic Medicine & Surgery and Rhinoplasty Meeting

March 10–13, 2023

Dallas, TX
dallasrhinoplastyandcosmeticmeeting.com

SOFCEP Congress 2023

French Society of Plastic Aesthetic Surgeons

June 1–3, 2023

Versailles, Palais Des Congrès
[chirurgiens-esthetiques-plasticiens.com/
congres-sofcep-2/?lang=en](https://chirurgiens-esthetiques-plasticiens.com/congres-sofcep-2/?lang=en)

5th Norwegian-American Aesthetic Meeting

October 27, 2023

Oslo, Norway
naam.no



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We provide surgeons with the latest and most cutting-edge tools, techniques and resources they need to safely innovate and advance the field of Aesthetic Surgery and Medicine.

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The Aesthetic Meeting 2023



Miami Beach, FL
Miami Beach Convention Center
April 19–23, 2023
Exhibits: April 21–23
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THE AESTHETIC MEETING 2023

Three Full Days of All-Inclusive Programming for One Fee
ARRIVE EARLY AND ADD ONE MORE DAY OF OPTIONAL COURSES!

Nolan Karp, MD—Program Chair

Let's Connect in MIAMI BEACH!

This year's Aesthetic Meeting will be filled with unrivaled educational options, many opportunities for in-person interactions and memory-making social activities all set in the beautiful sun-drenched city of Miami Beach!

By now, you should have received your meeting brochure. It's so easy to register! meetings.theaestheticsociety.org/the-aesthetic-meeting/index.php

ENHANCE YOUR EDUCATIONAL EXPERIENCE!

In addition to the three packed days included with your registration fee, plan to arrive early and take advantage of all the extras Thursday has to offer... Residents and Fellows Forum, cadaver labs, injector competence training, ASERF Premier Global Hot Topics, and so many more specialized courses.

As a reminder, continue to check our website: TheAestheticSociety.org for regular updates.

Bring your swimsuits and flip-flops! We can't wait to see you in sunny Miami Beach.



**REGISTER BY MARCH 1, 2023
FOR EARLY BIRD SAVINGS**

THURSDAY, APRIL 20

7:00am – 10:00am

S1 Nurse Cadaver Lab
RN/NP/PA ONLY
Chairs: Charles Thorne, MD
Stelios Wilson, MD

7:30am – 1:00pm

S2 Endoscopic and Minimally Invasive Techniques for Middle and Upper-Third Facial Rejuvenation – A Cadaver Lab
SURGEONS ONLY
Greg Albert, MD
Grady Core, MD
Chia Chi Kao, MD
Kiya Movassaghi, MD
Renato Saltz, MD

8:00am – 1:00pm

S3 Rhinoplasty Symposium
Co-Chairs:
Jamil Ahmad, MD
Jay Calvert, MD

8:30am – 5:30pm

S4 Medical Life Drawing and Sculpture: The Human Figure
SURGEONS ONLY
Grant R. Fairbanks, MD
Grant A. Fairbanks, MD

9:00am – 3:00pm

S5 Skills for Successful Patient Coordinators
NO EXHIBITORS
Karen Zupko

9:00am – 11:30am

S6 Women Aesthetic Surgeons' Symposium
SURGEONS ONLY
Co-Chairs: Anureet Bajaj, MD
Susan MacLennan, MD
NO CME

11:00am – 6:30pm

S7 Composite Facelifts Simplified through Modern Understanding of Deep Plane (spaces and ligaments) Anatomy - A Cadaver Workshop
SURGEONS ONLY
Chair: Bryan Mendelson, MD

11:30am – 6:00pm

S8 Residents and Fellows Forum
FOR ALL RESIDENTS/FELLOWS/MEDICAL STUDENTS
Chair: Kye Higdon, MD
Vice Chair: Al Cohn, MD
Endorsed Fellowship Co-Chairs:
Kiya Movassaghi, MD
Bradley Calobrace, MD
NO CME

11:45am – 1:15pm

S9 ASERF's Luncheon – Spotlight on Research
Chairs: Caroline Glicksman, MD, MSJ
David Sieber, MD

12:00pm – 3:00pm

S10 Temperament Theory: Using Science to Improve the Art of Business and Team Relationships
Joslyn Vaught

1:30pm – 6:30pm

S11 Masterclass: Facelift – Planning and Technique
Timothy Marten, MD

1:30pm – 6:30pm

S12 Premier Global Hot Topics
Chairs: Jamil Ahmad, MD
Tiffany McCormack, MD
Simeon Wall, Jr, MD
NO CME

2:00pm – 6:00pm

S13 Modern Techniques in Rhinoplasty for Everyone – A Cadaver Workshop
SURGEONS ONLY
Chairs: Joe Grysiewicz, MD
Robert Gilman, MD

2:00pm – 4:00pm

S14A Physician Extender Injector Competence Training – Level 1 – Understanding the Basics of Injection Techniques with Neurotoxins and Hyaluronic Acid Dermal Fillers
RN/PA ONLY
Chair: Z. Paul Lorenc, MD

4:30pm – 6:30pm

S14B Physician Extender Injector Competence Training – Level 2 – Advanced/Combination Injection Techniques with Neurotoxins and the Array of FDA-Approved Dermal Fillers
RN/PA ONLY
Chair: Z. Paul Lorenc, MD

3:30pm – 6:30pm

S15 The Ritz-Carlton Leadership Center presents: Brand Differentiating Service – Delivering an Elevated Experience
Ritz Carlton Speaker TBD

4:00pm – 6:30pm

S16 Patient Coordinator Alums: Overcoming Scheduling Objections
SPOUSES/RN/PA/OFFICE PERSONNEL ONLY
Karen Zupko

 For Aesthetic Care Team Attendees

FRIDAY, APRIL 21

	General Session	Aesthetic Care Team Session	The Aesthetic Arena (located in The Aesthetic Marketplace) (NO CME)	All-Inclusive Courses	
7:30am				Sunrise Sessions	
8:00am					
8:45am			Opening Keynote Lecture		
9:15am					
9:30am	VISIT THE AESTHETIC MARKETPLACE				
9:45am	General Session	Aesthetic Care Team Session	Scientific Paper Presentations	Mini Symposium #1	
10:00am					
10:30am					
11:00am					
11:30am					
12:00pm	Lunch in The Aesthetic Marketplace		Lunch/ Industry Presentations		
12:30pm					
1:00pm					
1:30pm					
2:00pm	General Session	Aesthetic Care Team Designated Courses	Scientific Paper Presentations	Courses 101-110	Mini Symposium #2
2:30pm					
3:00pm					
3:30pm					
4:00pm	VISIT THE AESTHETIC MARKETPLACE				
4:30pm		Aesthetic Care Team Designated Courses	Mojito Madness 10 Consecutive Cases Panel	Courses 201-210	Mini Symposium #3
5:00pm					
5:30pm					
6:00pm					



BE SURE TO VISIT THE AESTHETIC MARKETPLACE



BOOK YOUR HOTEL EARLY TO ENSURE YOUR FIRST CHOICE OF ACCOMMODATIONS

We have created a large portfolio of options for your stay in Miami Beach. Each hotel has its own unique story to tell. Please secure your reservations early as this popular destination has limited availability. Shuttle services will be available from the Fontainebleau, Marriott Biscayne Bay, Loews and The 1 Hotel. *(Subject to change)*

SCAN HERE TO MAKE YOUR HOTEL RESERVATIONS



FOR UPDATES AND DISCLOSURES VISIT [MEETINGS.THEAESTHETICSOCIETY.ORG](https://meetings.theaestheticsociety.org)

THE AESTHETIC MEETING 2023



SATURDAY, APRIL 22				
General Session	Aesthetic Care Team Session	The Aesthetic Arena (located in The Aesthetic Marketplace) (NO CME)	All-Inclusive Courses	
7:30am			Sunrise Sessions	
8:00am			Sunrise Sessions	
8:45am		Opening Keynote Lecture		
9:15am				
9:30am	VISIT THE AESTHETIC MARKETPLACE			
9:45am				
10:00am				
10:30am	General Session	Aesthetic Care Team Session	Scientific Paper Presentations	Mini Symposium #4
11:00am				
11:30am				
12:00pm	Lunch in the Aesthetic Marketplace or The Aesthetic Society/ASERF Business Meeting Luncheon			
12:30pm			Lunch/Industry Presentations	
1:00pm				
1:30pm				
2:00pm				
2:30pm		Aesthetic Care Team Designated Courses	Scientific Paper Presentations	Mini Symposium #5
3:00pm			Courses 301-310	
3:30pm	General Session			
4:00pm	VISIT THE AESTHETIC MARKETPLACE			
4:30pm				
5:00pm		Aesthetic Care Team Designated Courses		Mini Symposium #6
5:30pm			Courses 401-410	
6:00pm				

REGISTER BY MARCH 1, 2023 FOR EARLY BIRD SAVINGS

SUNDAY, APRIL 23					
General Session	Aesthetic Care Team Session	The Aesthetic Arena (located in The Aesthetic Marketplace) (NO CME)	All-Inclusive Courses		
			Sunrise Sessions		7:30am
					8:00am
		Opening Keynote Lecture			8:45am
					9:15am
VISIT THE AESTHETIC MARKETPLACE					9:30am
General Session	Aesthetic Care Team Session	Scientific Paper Presentations	Courses 501-510	Mini Symposium #7	9:45am
					10:00am
					10:30am
					11:00am
					11:30am
					12:00pm
VISIT THE AESTHETIC MARKETPLACE					12:30pm
					1:00pm
					1:30pm
					2:00pm
General Session	Aesthetic Care Team Designated Courses		Courses 601-610		2:30pm
					3:00pm
					3:30pm
					4:00pm
					4:30pm
					5:00pm
					5:30pm
					6:00pm



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BOOK TODAY!

THE AESTHETIC CRUISE 2024

July 11–23, 2024

Chair: Tim Papadopoulos, MD

Vice Chair: Kristi Hustak, MD

OCEANIA CRUISES — *Vista*

- Barcelona, Spain
- Palma de Mallorca, Spain
- Saint Tropez, France
- Florence/Pisa/Tuscany (Livorno), Italy
- Olbia/Porto Cero (Sardinia), Italy
- Rome (Civitavecchia), Italy
- Naples/Pompeii, Italy
- Messina (Sicily), Italy
- Istanbul, Turkey
- Bozcaada (Troy), Turkey
- Athens (Piraeus), Greece

CME Available

Join ASERF as we Celebrate our 30th Anniversary at The Aesthetic Meeting

Join ASERF at The Aesthetic Meeting!

Stop by the ASERF Lounge and learn more about what's happening in our 30th Anniversary year, including recently-funded projects, available research and patient assistance grants, the new Externship Program, and our Electronic Data Capture System (SETA). Make a major donation to support 30 years of quality research and education within our specialty.

OPTIONAL COURSES

Additional Fee Required

THURSDAY, APRIL 20

ASERF LUNCHEON SPOTLIGHT ON RESEARCH—S9

11:45am – 1:15pm

Get the latest information on research projects funded through the ASERF grant program, made possible through dues and donations to The Foundation. Watch your peers present their current progress or final results lead by our Scientific Research Committee Co-Chairs, Drs. Caroline Glicksman and David Sieber. Plated lunch will be served.

ASERF PREMIER GLOBAL HOT TOPICS—S12

1:30pm – 6:30pm

Recognized as a "must-see" program each year and lead by Co-Chairs Drs. Jamil Ahmad, Tiffany McCormack, and Simeon Wall Jr, world-renowned surgeons advocate for or against new technologies and surgical procedures which shape the future of the specialty.

CELEBRATING 30 YEARS



Advancing Aesthetics
Since 1993

SATURDAY, APRIL 22 • 12:00pm – 2:00pm



James M.
Stuzin, MD



John B.
Tebbetts, MD

ASERF CAREER ACHIEVEMENT AWARD

Uniquely passionate about education and incredibly talented, these two influential surgeons will be receiving the 2023 ASERF Career Achievement Award. Join us as we honor James M. Stuzin, MD, and posthumously honor John B. Tebbetts, MD at The Society and Foundation Annual Member Business Meeting Saturday, April 22 from 12:00pm – 2:00pm. Honor their contributions by donating to ASERF at aserf.org/awarddonate.



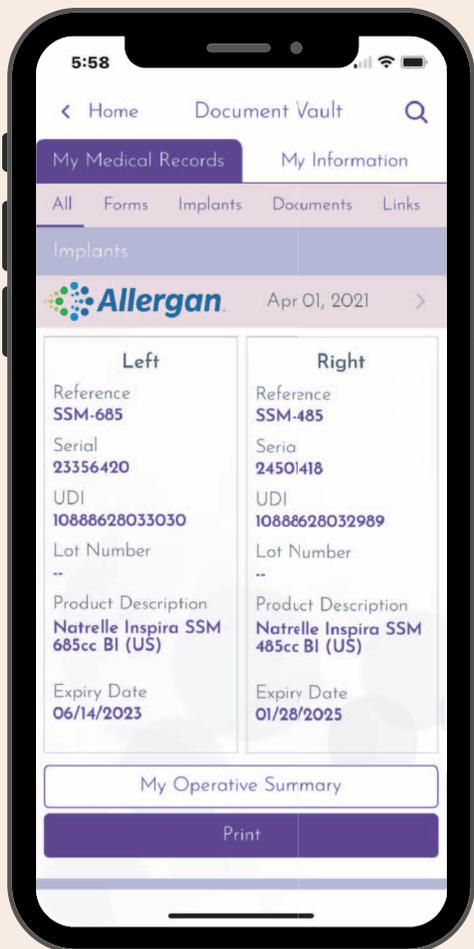
ASERF SILENT AUCTION

Shop the Silent Auction and find unique products and services for your practice while supporting aesthetic research! Download the Handbid app or visit events.handbid.com/auctions/aserf-auction-2023 and place a bid. Bidding begins on Friday, March 31—watch your email for details!

The Auction officially closes at 2:00pm Eastern on Sunday, April 23.

We're Not Your Typical Registry.

Previous registries are time-consuming, hard to access, and fail to empower patients with details of their implants and surgical procedure.



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Scan the QR code to learn more or register.

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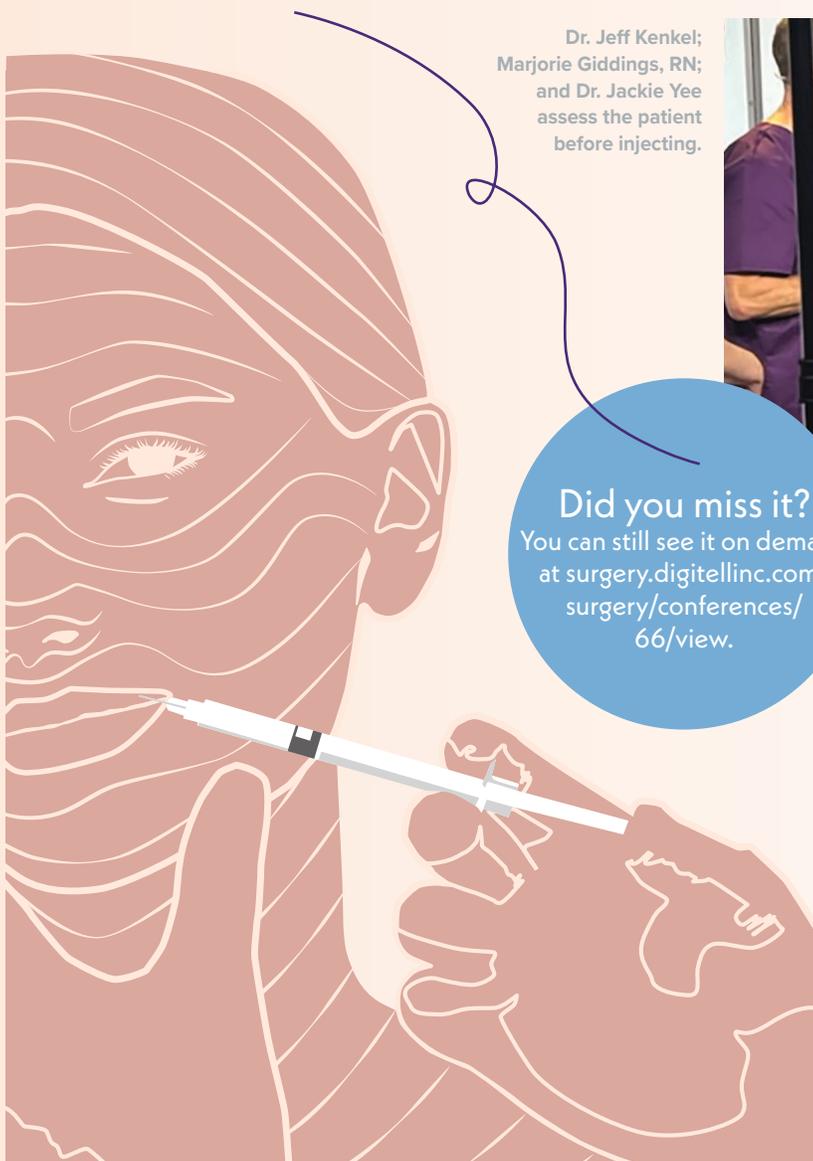
Nuances in Injectables 2022—What you missed!

Co-Chairs: Chris Surek, DO and Jackie Yee, MD

The Aesthetic Society presented Nuances in Injectables for 4 hours on Saturday, October 15. The faculty was gathered live in Dallas, Texas at the beautiful new Plastic Surgery Channel studio. While the camaraderie was strong at the studio, the virtual audience was chiming in with questions and comments about the consultation process, the faculty's techniques, and patient care. Chairs, Chris Surek, DO and Jackie Yee, MD led a strong and talented faculty consisting of Drs. David Funt, Michael A.C. Kane, Jeffery Kenkel, and Steve Weiner. Arthur Swift, MD provided a wonderful recorded talk sharing his views on the latest developments in aesthetic refinements. It was a great way to spend a small part of our Saturday.



Faculty: Drs. Chris Surek, David Funt, Jackie Yee, Steven Weiner, Michael A.C. Kane, and Jeffrey Kenkel.



Dr. Jeff Kenkel; Marjorie Giddings, RN; and Dr. Jackie Yee assess the patient before injecting.



Did you miss it?
You can still see it on demand at surgery.digitellinc.com/surgery/conferences/66/view.



Plastic Surgery Channel did an outstanding job of capturing the Nuances in Injectables Symposium. Dr. Steve Weiner answers questions and shares his perspectives with the virtual audience.

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AESTHETIC CARE TEAM AFFILIATE PROGRAM

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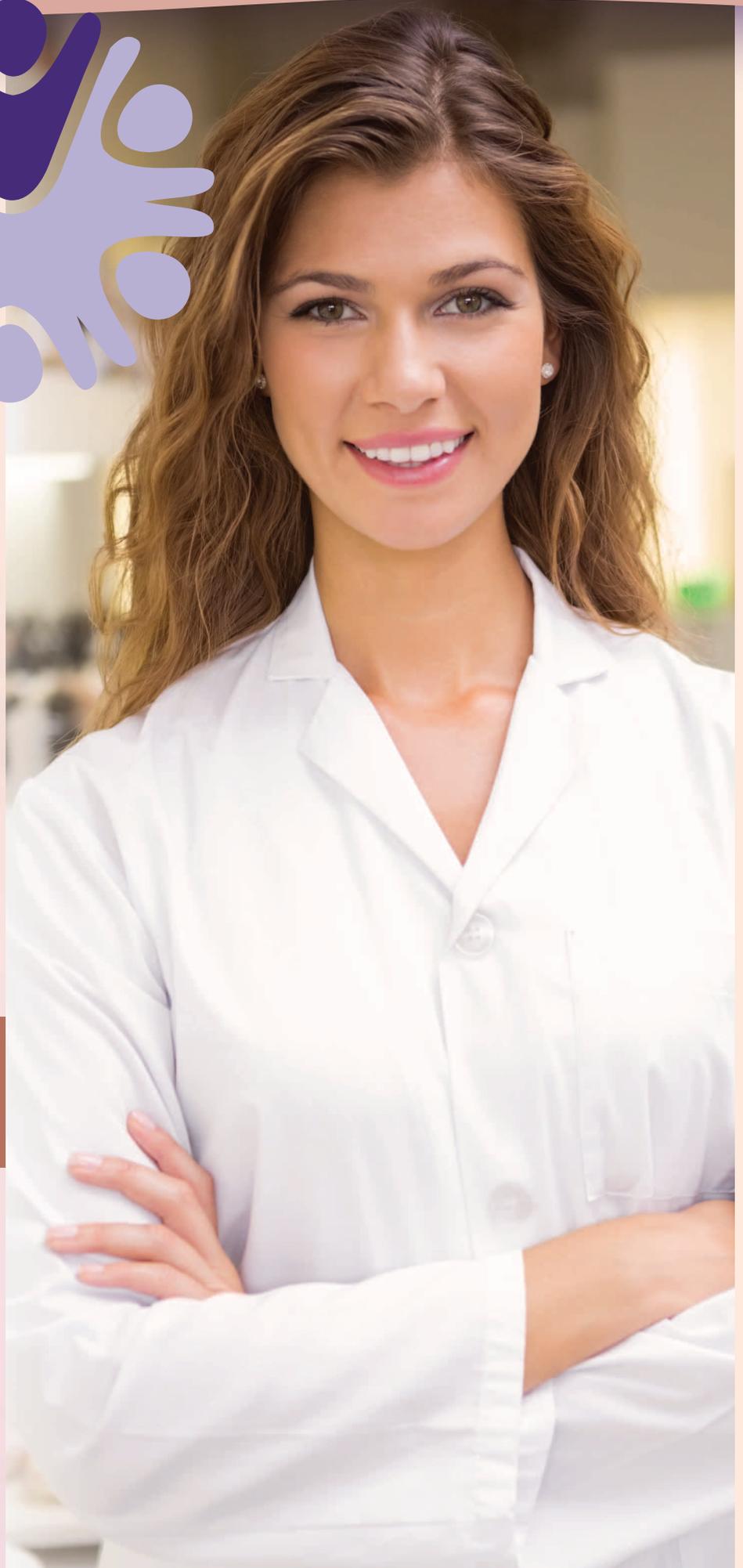
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What You Need to Know About Hyperbaric Oxygen Chambers

By Lily Daniali MD

A: As Hyperbaric Oxygen Chambers become a household name in post-surgery wound recovery, we had the pleasure of speaking with Lily Daniali, MD on what to look for in a high-quality machine. Here she helps break down the basics, proving that not all HOCs are created equal and showing that the right machine can provide benefits that go beyond post-surgery.

Q: What outcomes are present in using Hyperbaric Oxygen Chambers for Post-Surgery/Scar Recovery?

A: Improved healing, decreased edema, resolution of infections, also specifically very helpful with irradiated wounds.

Q: Does recovery time improve by using this method? Does the effect vary based on; age, ethnicity, or other patient variables?

A: Yes, most definitely. HBO helps optimize any patient's ability to heal.

Q: Are there risks associated with this device?

A: Ear drum injury/perforation, pneumothorax.

Q: Describe the perfect candidate and are there any surgeries or wound closures that pair best with HBO?

A: Really anyone who has any type of surgical wound or incision that is trying to optimize healing; diabetics.

Q: Anything you'd like to add?

A: I am a plastic surgeon at a level one hospital who also does aesthetic surgery. I am the medical Director of our wound care center as well and trained in hyperbaric medicine. I have been exceptionally impressed with the optimization of healing for the patients that are receiving hyperbaric treatments. It is important



For improved healing, always look for a true (Hard) Hyperbaric Oxygen Chamber which are largely found in medical facilities such as hospitals.

for people to know that not all hyperbaric therapies are created equally. There are a lot of soft chambers that are being marketed to plastic surgeons that do not actually bring the patient to the increased atmospheric pressure that is necessary to drive through oxygenation of the tissues. There is no data that demonstrates that the soft chambers are efficacious. All of the studies were done in

true hyperbaric chambers that are available in typical medical facilities such as hospitals. It is with these true hyperbaric chambers that one will actually see the improved healing and stem cell mobilization with hyperbaric oxygen therapy treatments. It is critical for members to know about this difference.



Calling all Members!

We would love to hear from your Aesthetic Care Teams. Please encourage them to submit an article to be featured in this quarterly publication *Aesthetic Society News*. Articles can cover an innovative array of skincare/device methodology used in pre and post op care to improve patient progress and wound-healing results.

info@theaestheticsociety.org

The Aesthetic Society Mission

Advance the **science, art,** and **safe practice** of **aesthetic plastic surgery** and cosmetic medicine through **education, research,** and **innovation** while maintaining the highest standards of ethical conduct.

Education

Expertise

Beauty

Artistry



ASJ and ASJ Open Forum

The December issue of *ASJ* is live here: academic.oup.com/asj/issue/42/12
ASJOF Volume 4 is available here: academic.oup.com/asjopenforum/issue

EDITOR IN CHIEF ANNOUNCEMENTS



We are pleased to announce that in January 2024, Jeffrey M. Kenkel, MD, FACS, will succeed Dr. Foad Nahai as Editor in Chief of *Aesthetic Surgery Journal*. He has served as the Associate Editor of *ASJ* since 2009. Dr. Kenkel is the Betty and Warren Woodward Chair in Plastic and Reconstructive Surgery and Professor and Chair of the Department of Plastic Surgery at UT Southwestern Medical Center. He also holds the Rod J. Rohrich, MD Distinguished Professorship in Wound Healing and Plastic Surgery and is the Director of the Clinical Center for Cosmetic Laser Treatment. A transition of responsibilities will begin in 2023 to facilitate a smooth onboarding process. Congratulations, Dr. Kenkel, we look forward to working together under your leadership.



We are also pleased to announce that Al S. Aly, MD will become Editor in Chief of *ASJ Open Forum* in January 2024, also beginning his transition in 2023. Dr. Aly is a Professor in the Department of Plastic Surgery and Director of the Post-Bariatric Body Contouring Program at UT Southwestern Medical Center. He has also served as the Body Contouring Co-Section Editor for *ASJ* since 2008. Congratulations, Dr. Aly, we are excited to begin working under your leadership as well.

SIGN UP FOR E-ALERTS

Ready for regular alerts about *ASJ* and *ASJ Open Forum* content? Sign up here for e-alerts and don't miss a single article: <https://tinyurl.com/mr2rhbaa>.

ACCESSING PAST ASJ JOURNAL CLUB & ASJ GEMS WEBINARS

If you missed a recent *ASJ* Journal Club or *ASJ GEMS* webinar, log on to RADAR Resource, access them under *ASJ*-Videos and watch at your leisure. Thank you to all who joined us this year for the webinars, we appreciate all your support and help in promoting these events.

ASJ AND ASJ OPEN FORUM "ON THE ROAD"

Meeting up with editors, authors, reviewers, and readers at meetings across the world is invaluable. Here we share images from recent conferences PSTM 2022 in Boston, MA and Oxford Journals Day in Cary, NC. We look forward to greeting you personally from the road at one of the next conferences. As always, you can share thoughts and ideas with us at: journal@theaestheticsociety.org.



PUBLISHING OPPORTUNITIES AND DISCOUNTS FOR OUR MEMBERS

Ready to publish in *ASJ Open Forum*? Don't forget to take advantage of a special member discount. Mention this discount in the cover letter when you submit a brand new article and save 50% off the publishing charges in *ASJ Open Forum*. Ready to make your *ASJ* article open access? We've got a discount for that! Members save 20% off the open access publishing fees for all *ASJ* articles. Questions? Drop us a line: journal@theaestheticsociety.org.



This esteemed group of authors found out at the meeting their article had been accepted to *ASJ*. Huge congrats to (top row) Drs. Jason Pozner, Gregory Mueller, Barry DiBernardo, and (bottom row) Drs. Isaac James, Diego Gomez, and David Turer.

Continued on Page 23

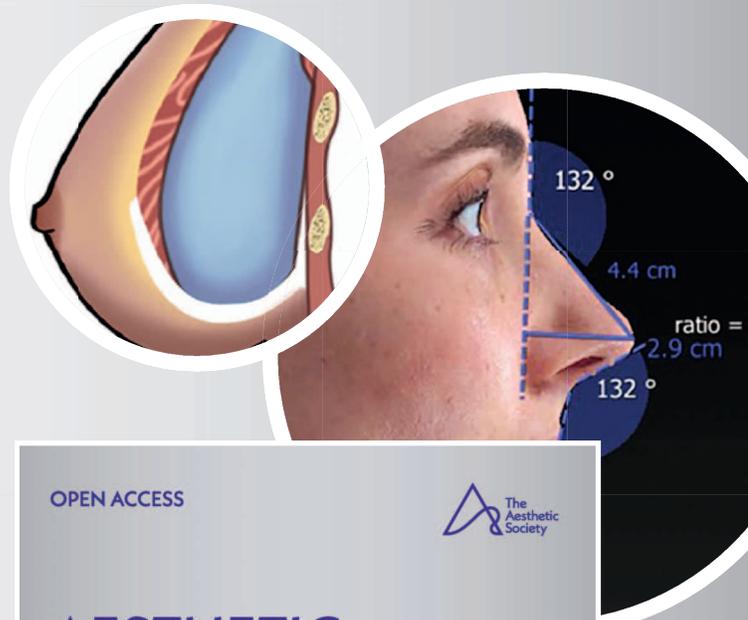
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ASJ and ASJ Open Forum

Continued from Page 21



An all-star group of plastic surgeons and ASJ staff Abby Pugh and Phaedra Cress visit with friend and colleague Dr. Monte Eaves, Founder and Executive Chairman of brijjit. Shown here are: Dr. Jason Pozner, Dr. Barry DiBernardo, and Dr. Brad Calobrace.



President of The Aesthetic Society, Dr. Jennifer Walden and Executive Publisher, Journals, Phaedra Cress share a look at ASN during the meeting featuring Dr. Walden's cowgirl-themed party in San Diego earlier this year.



Abby Pugh, Dr. Brannon Claytor, and Phaedra Cress caught up to talk about his upcoming Editorial on cybersecurity.



Oxford Journals Day was a success. Phaedra Cress attended and spent time with OUP publishing professionals, in particular partners Deanna Zarillo, Assistant Publisher, Academic Journals and Executive Publisher Journals, Terry Materese.



Abby Pugh, Managing Editor of ASJ walking the exhibital hall during PSTM 2022 in Boston, MA.

Abby Pugh visits with Marie Bonazinga, President and CEO of ASSI, one of ASJ's long-standing and supportive advertisers.



AESTHETIC ONE EXCEEDS

25,000

REGISTERED IMPLANTS

590+

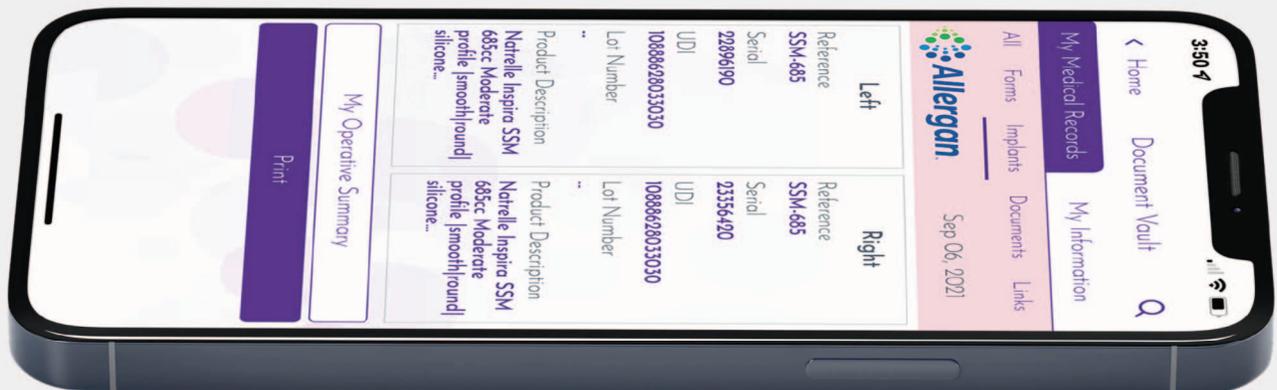
physicians saving time by ditching papers forms and faxes

25K+

implants registered with manufactures resulting invaluable research data for the FDA

14K+

patients given permanent access to their implant details





The Aesthetic One App

By Nolan Karp, MD

CHANGING THE GAME WHEN IT COMES TO IMPLANT REGISTRATION AND DATA COLLECTION

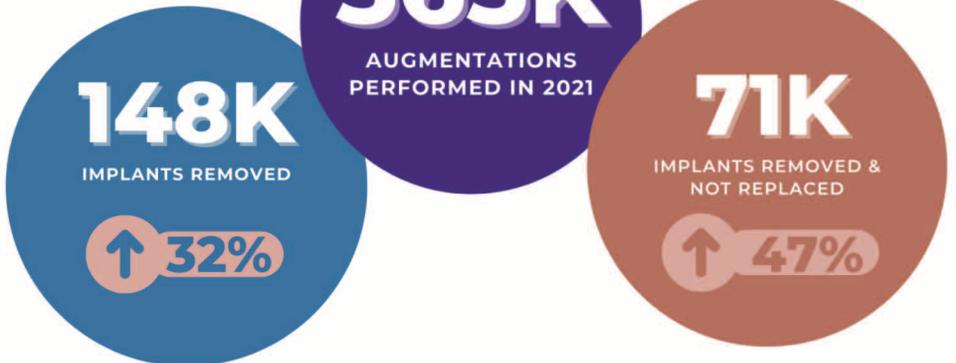
As surgeons, many of us have experienced an increase in the number of patients requesting removal and/or replacement of breast implants. Data from the Aesthetic Society's Annual Statistics show that in 2021 there were 365,000 breast augmentations performed. In addition, 148,000 women had implants removed and replaced (+32% from 2020), and 71,000 had their implants removed and not replaced (+47% from 2020). The Aesthetic One app, a free implant registration platform developed by The Aesthetic Society, can help improve decision-making for these patients and their surgeons in the future.

It's not unusual for a patient needing a revision or replacement to find themselves in the care of a different surgeon than the one who performed their initial implant procedure. Today's patients are more mobile and often seek care in a different city or state. Recent consumer data has shown that even when they are not relocating, the younger generations are more likely to "physician hop." Some patients see many different physicians and specialists over the lifetime of their implants. Other patients may seek a revision implant procedure years after their primary operation and their original surgeon has retired.

Whatever the reason, patients may find themselves in the care of a new surgeon, and the problem remains the same. Determining the original implant manufacturer, fill, shell, size, and pocket location becomes a guessing game for the new surgeon. Patients rarely have all of these details, and many don't even



aesthetic one



recall the name of their original surgeon, let alone the details of the implants placed.

When assessing a patient for a breast implant revision or replacement, having the proper clinical information is extremely important and can help guide the decision-making for the physician and patient. When an implant is registered with the Aesthetic One app, the patient and physician have permanent on-demand access to all relevant implant and operative data. Every patient whose implant is registered with Aesthetic One will have access to a digital implant ID card as well as a comprehensive operative summary with details of their procedure. This data is permanently accessible to patients whenever and wherever they need it. With Aesthetic One, patients can easily share their implant

Data from The Aesthetic Society's Annual Statistics show that in 2021 there were...

details and operative summary with all physicians involved in their care.

We are building a network of portable data so that any time a patient needs additional care, all relevant information will be available to any physician involved. Imagine the improved outcomes and efficiencies for revision and replacement procedures if every patient walked into their surgeon's office with all the details of their previous procedures. By registering implants with Aesthetic One, you can ensure that this type of data access is available for patients and surgeons everywhere.

When assessing a patient for a breast implant revision or replacement, having the proper clinical information is extremely important and can help guide the decision-making for the physician and patient. When an implant is registered with the Aesthetic One app, the patient and physician have permanent on-demand access to all relevant implant and operative data.

Get Started Today!

Physicians can sign up for Aesthetic One at www.aestheticone.com/register.

Account activation generally takes 1–2 business days.

STAFF can be set up with an account through the app after their physician's account has been activated.

Your patients may be looking for more than they think.

One procedure, such as rhinoplasty or liposuction, may bring patients in, but there may be other procedures they'd like to consider. Taking that extra minute to ask about the complete look they want can build trust, improve their experience and bring them back.



Help patients look and feel great.

Patients arrive for their appointment with questions, excitement and the hope they'll be able to get the beautiful look they want.

A patient undergoing liposuction may also be concerned about loose skin. A patient in for an eyelift may also be curious about Botox. And yet, they may be reluctant to ask about other procedure options that could ultimately make a big difference in their overall satisfaction and self-confidence.

Take an extra minute.

Two simple steps can help more patients get all of the cosmetic procedures and life-changing results they want:

1. Once their primary concern is addressed, ask if they have any other aesthetic goals on their mind.
2. Let them know a financing solution, like the CareCredit credit card, is available that lets them pay over time for the complete look they want.

Help them find a way.

81% of cosmetic providers surveyed say they enrolled with CareCredit so they can offer an alternative payment option to their patients.¹



More than they thought possible.

The CareCredit healthcare credit card can help patients fit cosmetic surgery and procedures into their budget. When your practice accepts CareCredit, cardholders can take advantage of:

- **Flexible financing options** that may not be available with most general purpose credit cards.
- **A contactless way to pay** that works before, during and after appointments.
- **A way to pay for all the procedures you provide**, which can be a key factor when it comes to elective out-of-pocket costs.
- **A solution they can use again and again** with no need to reapply.

The most positive experience. Help patients get the look they really want.

"I am so thankful for CareCredit. Because of you, I was blessed to be able to have skin removal surgery after large weight loss. I was able to have a mini tummy tuck, brachioplasty, medial thigh lift and extensive liposuction.

I would never have been able to do this on my own without being able to finance part of my surgeries..."

— Glenda K, CareCredit cardholder



Make it easy to explore all options.

When patients know there's a way to pay over time with promotional financing, it can help them feel more confident about moving forward with your full recommendation instead of a partial plan. CareCredit provides resources to help, including a Payment Calculator that makes it easy for patients to quickly see what their estimated monthly payments could be based on financing options you offer.

When you give your patients a way to pay over time, more of them can experience the full range of cosmetic expertise they've been hoping to find. And you may find that's good for your business, too.

CareCredit works for your practice, too.



- ✓ You get paid in just two business days.
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80% of cardholders say they are likely or very likely to use their CareCredit credit card again.²

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Already enrolled?

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¹ CareCredit Provider Satisfaction, conducted by Chadwick Martin Bailey on behalf of CareCredit, June 2021.

² CareCredit Cardholder Engagement Study, conducted by Chadwick Martin Bailey on behalf of CareCredit, Q2 2021.

³ Health & Wellness 2021 Analytics and The Nilson Report—February 2022 ed., 50 largest U.S. Visa & Mastercard Credit Card Issuers data table.

This insert was independently produced by CareCredit. *Aesthetic Society News* had no part in its production. The views expressed here do not necessarily reflect those of the editor, editorial board, or the publisher.

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*BASED ON DATA FROM 10-YEAR FDA CLINICAL STUDIES, AMONG SILICONE GEL IMPLANTS, PRIMARY AUGMENTATION AND RECONSTRUCTION MRI COHORTS. NOT INTENDED TO BE HEAD-TO-HEAD COMPARISON; STUDY DESIGNS VARIED AMONG MANUFACTURERS.^{1,2,3}

KEY COMPLICATIONS PRIMARY AUGMENTATION COHORT (SMOOTH AND TEXTURED DEVICES) THROUGH 10 YEARS, BY PATIENT KM RISK ESTIMATES

KEY COMPLICATIONS PRIMARY RECONSTRUCTION COHORT (SMOOTH AND TEXTURED DEVICES) THROUGH 10 YEARS, BY PATIENT KM RISK ESTIMATES

	Sientra ⁴ 10-Yr N=1,116	Mentor ² 10-Yr N=552	Allergan ³ 10-Yr N=455
Number of Implants	2,230	1,102	908
MRI Cohort Patients	398	220	158
Capsular Contracture III/IV	12.9%	12.1%	18.9%
Rupture (MRI Cohort)	8.7%	24.2%	9.3%
Reoperation	24.2%	25.5%	36.1%

	Sientra ⁴ 10-Yr N=225	Mentor ² 10-Yr N=251	Allergan ³ 10-Yr N=98
Number of Implants	412	410	127
MRI Cohort Patients	48	134	51
Capsular Contracture III/IV	15.8%	20.5%	24.6%
Rupture (MRI Cohort)	16.5%	32.7%	35.4%
Reoperation	48.2%	49.0%	71.5%

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1. Stevens WG, Calobrace MB, Alizadeh K, Zeidler KR, Harrington JL, d'Incelli RC. Ten-year core study data for Sientra's food and drug administration-approved round and shaped breast implants with cohesive silicone gel. *Plast Reconstr Surg.* 2018;141:75-195. 2. Caplin DA, Calobrace MB, Wixtrom RN, Estes MM, Canady JW. Memory Gel breast implants: Final safety and efficacy results after 10 years of follow-up. *Plast Reconstr Surg.* 2021;147:556-566. 3. Spear SL, Murphy DK; Allergan Silicone Breast Implant U.S. Core Clinical Study Group. Natrelle round silicone breast implants: Core Study results at 10 years. *Plast Reconstr Surg.* 2014 Jun;133(6):1354-1361. doi: 10.1097/PRS.0000000000000021. PMID: 24867717; PMCID: PMC4819531. 4. Calobrace MB, Schwartz MR, Zeidler KR, Pittman TA, Cohen R, Stevens WG. Long-term safety of textured and smooth breast implants. *Aesth Surg.* 2017;1-11.(45):75-195.

Sientra breast implants are indicated for breast augmentation in women at least 22 years old and for breast reconstruction. Breast implant surgery is contraindicated in women with active infection anywhere in their body; with existing cancer or precancerous conditions who have not received adequate treatment for those conditions and; who are currently pregnant or nursing. Prior to use, plastic surgeons should review all risk information, which is found in the Instructions for Use. Key complications associated with the use of silicone gel breast implants include capsular contracture, implant removal, rupture and reoperation. The Instructions for Use and detailed information regarding the risks and benefits of Sientra breast implants can be found at sientra.com/resources.

The sale and distribution of this device is restricted to users and/or user facilities that provide information to patients about the risks and benefits of this device in the form and manner specified in the approved labeling provided by Sientra, Inc.

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Questions for Cover-Artist, Dr. Anureet Bajaj About Her Interest in Art and Painting



Q: Who is your artistic inspiration?

A: Henri Matisse is my favorite artist—I love his use of color and expressionism.

Q: What is your process?

A: I'm not sure that I have a set process. I attend weekly open studio sessions at a local art school. This is something that I've done for years—even during fellowship and my first job, I would seek out these opportunities. The advantage of my current open studio is that they have a model for figure drawing/painting every week, and I love painting the human figure.

Q: Why do you paint?

A: I paint to relax and escape my work life. I find it reinvigorating.

Q: What is your preferred medium?

A: I love oil paints, and I love bright colors.

Q: Anything else you care to share about your love of painting?

A: If I'm not going to open studio and painting live models, I've painted my nieces and nephews and my dogs from photos. When I first moved back to Oklahoma City, I actually considered getting my master's degree in art... and I am about half-way through. Unfortunately, now I don't have the time.



← Your artwork here!



Submit Your Artwork for ASN's Next Cover!

Aesthetic Society members, we invite you to submit a photo of your **original art** to:

hello@theaestheticsociety.org. One of our **four**

brand pillars is artistry, so we want to **showcase**

your work. After all, many of our members are artists,

not only on, but off the operating table. In years past, we adorned the

cover of *Aesthetic Surgery Journal* with **member-submitted artwork**. Now is a perfect time to return to that tradition, but for the cover of this publication,

Aesthetic Society News.

So please, show us what you've got; we would love to feature your creations!

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SKINUVA® **brite**

Skinuva Brite is a skin brightening cream for hyperpigmentation such as melasma and post-inflammatory hyperpigmentation. It is 30% more effective than hydroquinone, proven in a published clinical study in the Journal of Cosmetic Science.

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The Aesthetic Society has recently become aware that some members and colleagues have mistakenly clicked “Unsubscribe” on our emails, which removes a person entirely from all Aesthetic Society email communication. Typically, a person may think that they are unsubscribing from only that particular symposium promotion, for example, but in

reality they are unsubscribing from all Society emails. The Aesthetic Society makes every effort to ensure that the emails we send are relevant to you, with important Society information, educational opportunities, and member offerings. Please be assured that we never loan or sell our email lists.

If you have not received email from The Aesthetic Society in some time, it is likely that you may have mistakenly unsubscribed from email communications. If this was in error, please email hello@theaestheticsociety.org, and ask to be re-subscribed to our communications list. We value your support of The Aesthetic Society. Thank you!

Thanks to You—We Are on Our Way!



Join the AMA

www.ama-assn.org

What? The Aesthetic Society needed to regain our seat (voice) at the AMA House of Delegates, so we have input into the decisions that impact us and our patients.

When politicians debate legislation impacting the practice of medicine, they seek input from a trusted source—typically the AMA. Since we have regained our delegate representation, we now have a voice and will be present to advocate for our patients or specialty when legislation is being debated.

**THANK YOU FOR HELPING US
REGAIN OUR SEAT AT THE TABLE!**

These companies GO BEYOND with us...

The Aesthetic Society's Industry Partnership Program



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Aesthetics**
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Senté

SKINUVA®



Working together to advance the science, art, and safe practice of aesthetic plastic surgery and cosmetic medicine through education, research, and innovation while maintaining the highest standards of ethical conduct among qualified plastic surgeons.

Support our Industry Partners and consider using their products in your practice.



Meet the Staff:
Shelene Knisley

Timing is everything, right? So, this August, I jumped at the opportunity to join this incredible team! I've got to say, I owe this to the lovely Melinda Farina, who happened to mention the accolades of The Aesthetic Society and in doing so, opened my eyes to this prestigious organization.

I've worked extensively in the luxury skincare realm in research, marketing, and consulting pre/post op clients in wound healing strategies, along with setting them up for success with preventative skincare regimens to prolong that oh-so sought-after youthful glow. Seeing improved patient outcomes fueled my passion for skincare and I took it a step further by creating eBooks (*How To Shop for Sunscreen, How to Shop for Actives, How to Prevent & Treat Scars*, etc.). This allowed me to teach consumers globally how to avoid skincare marketing pitfalls (all topical hyaluronic acids are not created equal, sorry not sorry), and help bring to light, the quality ingredients and techniques that actually make an impact on aging gracefully.

As the Member Marketing Manager, I approach each project and interaction with the same enthusiastic drive and dedication to supporting the advancement of aesthetics. It is heartwarming to see this approach is a shared characteristic in every member of the organization as well!

In my spare time, you will find me...



I live in Los Angeles, CA, so don't be a stranger if you live locally or are in town to visit! I am here to help, always feel free to reach out and we can nerd out about the UV Index, kojic acid, and everything in between!

shelene@theaestheticsociety.org

Media Notes and Quotes

NEWBEAUTY

The Reconstructive Procedure that Helped This Breast Cancer Patient Feel Whole Again

Excerpt: *Eva Nedelka was already grappling with so much when she was faced with important decisions that would affect her future. Her battle with breast cancer was difficult enough, and in addition to facing that reality, she also had to contend with fears and doubts about her future. Having to undergo a double mastectomy, she also worried about losing part of her identity. "Some people might think that it's vanity, but for me, I didn't want to lose what makes me feel feminine. I know what makes a woman is her personality, that is who you are, but it's my body." After weighing her reconstruction options with her doctor, Eugene, OR plastic surgeon Kiya Movassaghi, MD, DMD, Eva decided to undergo a breast reconstruction with implants following her mastectomy to restore the form and shape of her breasts.*

Eva's story is not a unique one. According to the National Breast Cancer Foundation, 1 in 8 women will be diagnosed with breast cancer in her lifetime. A double mastectomy to remove both breasts is often performed to get rid of cancer or also to reduce breast cancer risk. Here, Brentwood, TN plastic surgeon and Communications Commissioner for The Aesthetic Society, Kye Higdon, MD discusses the latest options in breast reconstruction and how the procedure can change the lives of patients like Eva.

THE ZOE REPORT

'Peel Season' Is Upon Us—Here's The How To Find The Right One For Your Skin

Excerpt: *Why all the fuss over chemical peels, you ask? Well, as it happens, these skin-shedding treatments are especially buzzy due to their ability to do quite a bit of heavy lifting. In fact, the number of "skin treatments," including chemical peels, performed between 2020 and 2021 increased by 37% and remained the third most popular, non-surgical skin procedure category according to annual reporting by The*

Aesthetic Society. TikTok's #chemicalpeel hashtag has over 595 million views alone as videos showcasing snake skin-like peeling processes and enviable results regularly go viral.

AP NEWS

The Aesthetic Society and The Aesthetic Surgery Education and Research Foundation Unveils Findings from the Biospecimen Study on Breast Implant Illness (BII)

Excerpt: *"The bottom line is that we found that these patient's symptoms improve after implant removal and they may improve without a capsulectomy which is a less invasive, less risky, and less expensive procedure," says Patricia McGuire, MD, co-author of the study. "We have not found any consistent measurable differences between the breast implant illness subjects and the control groups that could be used to make a diagnosis. We can now have educated discussions with our patients to help them make informed surgical decisions when deciding to remove their implants."*

KTLA

Aesthetic One® App Developed by The Aesthetic Society Registers Over 22,000 Breast Implants

Excerpt: *The Aesthetic Society, a 2,600-member organization of board-certified plastic surgeons devoted to aesthetic plastic surgery, announced today that Aesthetic One, a free app developed through support from Allergan Aesthetics® and built by The Aesthetic Society's technology partner ANZU,® to inform and empower patients and plastic surgeons, has registered over 22,000 breast implants since launching in December 2021. The Aesthetic One app is the only implant registration platform that empowers patients with lifetime, on-demand access to their breast implant info and operative summary. The revolutionary HIPAA-compliant platform also features a paired app for patients allowing surgeons to share breast implant ID cards, operative summaries, photos, and more.*



The Aesthetic Society®

Premier Partners

The Aesthetic Society's partnership program provides industry with strategic benefits and opportunities to collaborate with Aesthetic Society members in support of our mission.

As a benefit, Premier and Alliance partners are given the opportunity to provide key updates and information on products, promotions, and discounts. The Aesthetic Society is driven to provide visibility and support for our partners.

Allergan Aesthetics

an AbbVie company

At Allergan Aesthetics, an AbbVie company, we develop, manufacture, and market a portfolio of leading aesthetics brands and products. Our aesthetics portfolio includes facial injectables, body contouring, plastics, skin care, and more. With our own research and development function focused on driving innovation in aesthetics, we're committed to providing the most comprehensive science-based product offering available. For more information, visit www.AllerganAesthetics.com.



BD is a global medical technology company that is advancing the world of health by improving medical discovery, diagnostics and the delivery of care. Our collection of GalaFLEX™ surgical scaffolds, constructed from the biologically derived P4HB™ polymer, provides BD with an innovative platform to transform soft tissue repair, reconstruction, and regeneration in plastic and reconstructive surgery procedures. All GalaFLEX scaffolds are indicated to repair and reinforce soft tissue in plastic and reconstructive surgery. Because no two patients are alike, the collection of GalaFLEX scaffolds now includes a lightweight, low-profile P4HB scaffold, adding more options to complement your technique and your patients. GalaFLEX LITE™ is designed to enhance anatomical compliance while providing predictable, restorative strength.

Visit www.GalateaSurgical.com for more information on Galatea scaffolds as well as indications for use, safety considerations and reference documents.



Endo Aesthetics is pushing the boundaries of aesthetic artistry by designing bold solutions that address unmet needs, starting with Qwo® (collagenase clostridium histolyticum-aaes) the first and only FDA-approved injectable for the treatment of moderate to severe cellulite in buttocks of adult women. Endo Aesthetics is a part of Endo International plc, a company grounded in over two decades of pharmaceutical and scientific excellence. Endo is headquartered in Malvern, PA. Learn more and sign up for updates at EndoAesthetics.com.

GALDERMA

EST. 1981

Galderma is the world's largest independent dermatology company, present in approximately 100 countries. Since our inception in 1981, we have been driven by a complete dedication to dermatology. We deliver an innovative, science-based portfolio of sophisticated brands and services across Aesthetics, Consumer Care and Prescription Medicine. Focused on the needs of consumers and patients, we work in partnership with healthcare professionals to ensure superior outcomes. Because we understand that the skin we're in shapes our life stories, we are advancing dermatology for every skin story. For more information: www.galderma.com/us



For more than 30 years, Mentor has been trusted and respected by surgeons and their patients, with over eight million women worldwide choosing Mentor® Breast Implants for their breast augmentation and breast reconstruction journeys. Introducing the latest innovation in the MENTOR® MemoryGel® Breast Implant Portfolio! MENTOR® MemoryGel BOOST™ Breast Implant provides the natural feel patients desire with increased form stability to shape the breast.



New Products to Check Out!

Special Offers for
Aesthetic Society Members

MERZ AESTHETICS™

Merz Aesthetics is a medical aesthetics business with a long history of empowering health care professionals, patients and employees to live every day with confidence. We aim to help people around the world look, feel and live like the best versions of themselves—however they define it. Clinically proven and category-leading, its product portfolio includes injectables, devices and skin care treatments designed to meet each patient's needs with high standards of safety and efficacy. Being family owned for more than 112 years, Merz Aesthetics is known for building unique connections with customers who feel like family. Merz Aesthetics' global headquarters is in Raleigh, N.C., USA, with a commercial presence in 36 countries worldwide. It is also a part of Merz Group, which was founded in 1908 and is based in Frankfurt, Germany. Learn more at merzaesthetics.com.



New Premier Partner

Establishment Labs is a global medical technology company dedicated to improving women's health through FemTech solutions, with an initial focus on breast health, reconstruction & wellness. The company offers a number of technologies marketed under its Motiva® brand. Over 2 million Motiva Implants® have been delivered to market in more than 80 countries since 2010. The company recently released two-year interim data from its Motiva Core pivotal study, an ongoing US clinical trial of investigational medical devices under an FDA-approved Investigational Device Exemption (IDE). While no conclusions should be drawn based on interim data, preliminary clinical results are encouraging.



MTF Biologics is a global nonprofit organization that saves and heals lives by honoring donated gifts, serving patients and advancing science. For over 30 years, we have been dedicated to advancing patient outcomes by focusing on innovative, biologic solutions that support and enhance tissue healing. Today, we offer a comprehensive portfolio of aesthetic medicine solutions for providers and patients worldwide including FlexHD Acellular Dermal Matrix, Renuva Allograft Adipose Matrix, LipoGraft Fat Transfer System, Profile Costal Cartilage and MESO BioMatrix Acellular Peritoneum Matrix. These represent surgical and nonsurgical solutions for soft tissue support, rhinoplasty, and volume restoration treatments for patients seeking a healthy and youthful lifestyle.

NEWBEAUTY®

NewBeauty is the authority on beauty and the trusted resource for the most affluent and influential beauty consumer. The only magazine dedicated 100% to beauty with more than 5x the beauty editorial of any other magazine, NewBeauty dives deep to provide valuable information, founded in research and vetted by experts, empowering women to make better beauty decisions.

With almost 20 years as the leaders in the aesthetics industry, NewBeauty provides board-certified plastic surgeons with the ability to reach their ideal, treatment-seeking patients through a proven 360-degree marketing platform of print, digital, social media and press opportunities. Visit newbeauty.com.

For information on the products and services offered by industry, please contact the companies directly, and let them know you are an Aesthetic Society member!

sientra.

Sientra offers leading transformative treatments and technologies focused on progressing the art of plastic surgery and making a difference in patients' lives. With unrivaled safety, state-of-the-art science and exceptional service; paired with unparalleled partnerships with plastic surgeons, the Sientra portfolio of proprietary innovations radically advances how plastic surgeons think, work and care for their patients. The company's core breast products segment includes its state-of-the-art Sientra breast implants and its ground-breaking dual-port breast tissue expander, AlloX2®. In addition, the Sientra portfolio also includes BIOCORNEUM® the #1 performing, preferred and recommended scar gel of plastic surgeons (data on file).

Thank you Industry Partners!

The Aesthetic Society thanks all of our industry partners for their ongoing support and collaboration.

The Aesthetic Society's partnership program provides industry with strategic benefits and opportunities to collaborate with Aesthetic Society members. Working together to support our mission to advance the science, art, and safe practice of aesthetic plastic surgery and cosmetic medicine through education, research, and innovation.

A special thank you to Founding Premier Partner, Sientra.



The Aesthetic Society®

Alliance Partners



A Medical Liability
Insurance Company

◆ Applied Medico-Legal Solutions Risk Retention Group, Inc (AMS RRG), a medical liability company, has recently been assigned a rating of A- (Excellent) by AM Best. AMS RRG's financial strength, operations, business profile and risk management all played significant roles in the rating. For more information about AMS RRG please contact Christopher Edge 609-737-1154 ext 301.



The CareCredit health, wellness and beauty credit card dedicated to helping millions of patients get the care they want or need by offering promotional financing options. Now accepted at more than 260,000 locations nationwide, the CareCredit credit card allows cardholders to make convenient monthly payments for aesthetic procedures that help them achieve the look they want. Once approved, patients can use their card again for additional procedures or skin care products you provide.* CareCredit also gives reconstructive patients a way to pay for deductibles, co-pays and other fees not covered by insurance. Learn more about CareCredit by visiting carecredit.com/asaps or call 855-860-9001.

*Subject to credit approval. Minimum monthly payments required.



◆ CosmetAssure is a proud Alliance Partner of the Aesthetic Society, and our coverage is an exclusive benefit to member surgeons. Developed in 2003, to help patients reduce or eliminate out-of-pocket medical expenses related to treating a complication following aesthetic surgery. Our coverage converts consults into clients and is an excellent way to distinguish your practice from competitors.

To learn more or become a participating surgeon, contact us today at 855.874.1230 or info@cosmetassure.com.

MYELLEVATE®
by CYNOSURE®

The MyEllevate® innovation is a minimally invasive facial rejuvenation solution that offers natural and long-lasting results. It can be used as a standalone procedure or combined with energy-based skin tightening technologies. The MyEllevate® technique utilizes the ICLED® Suturod®, the first and only patented light-guided technology for facial cosmetic procedures, to accurately place sutures without incisions. It takes approximately one hour to perform with a one-time use disposable system. The MyEllevate® solution offers fast recovery and restores a youthful appearance with long-lasting results. For more information, please visit www.cynosure.com/myellevate/.

PatientFi

New Alliance Partner

◆ PatientFi is the friendly way to pay over time for aesthetic procedures and treatments. By removing the cost barrier, patients can pay for procedures on a friendly monthly plan. PatientFi offers zero-interest promotional financing and fixed-rate options with APRs as low as 6.99%. As part of PatientFi's Alliance Partnership with The Aesthetic Society, we offer exclusive special pricing to all members—which means significant savings on financing fees for your practice and in turn, helps more patients afford the treatments they desire. To learn more visit patientfi.com or call 949-441-5484.

3M + KCI

◆ 3M is dedicated to leveraging our differentiated technologies into effective solutions that improve health care outcomes and economics for providers and patients.

3M is proud to showcase 3M™ Prevena™ Therapy, the FIRST medical device cleared to aid in reducing the incidence of seroma and superficial surgical site infections in Class I and Class II wounds for high-risk patients.*

We are pleased to offer you a complimentary e-book:
engage.3m.com/Spears_Breast_Surgery

**The effectiveness of Prevena Therapy in reducing the incidence of SSIs and seroma in all surgical procedures and populations has not been demonstrated. For limitations and safety information regarding Prevena Therapy, please refer to 3M.com.*

Abbott

Abbott Nutrition is making an everlasting impact on human health as one of the world's leading authorities in science-based nutrition nourishing every stage of life. As your lifelong nutrition partner and advocate, we invite you to learn more about Juven, our therapeutic nutritional powder for wound and surgical incision healing. Visit Juven.com to learn how Juven can help your patients. Juven.com provides product information, clinical research, delicious recipes and more. *Learn more about Juven and Abbott Nutrition today.*

For information on the products and services offered by industry, please contact the companies directly, and let them know you are an Aesthetic Society member!



Revance is a biotechnology company setting the new standard in healthcare with innovative aesthetic and therapeutic offerings that elevate patient and physician experiences. Revance's aesthetics portfolio of expertly created products and services, including DAXXIFY™ (DaxibotulinumtoxinA-lanm) for injection, the RHA® Collection of dermal fillers, and OPUL® the first-of-its-kind Relational Commerce platform for aesthetic practices, deliver a differentiated and exclusive offering for the company's elite practice partners and their consumers. Revance has also partnered with Viatrix Inc. to develop a biosimilar to BOTOX®, which will compete in the existing short-acting neuromodulator marketplace. Revance's therapeutics pipeline is currently focused on muscle movement disorders including evaluating DAXXIFY™ in two debilitating conditions, cervical dystonia and upper limb spasticity.

Senté

Senté announces the launch of *Cysteamine HSA Pigment & Tone Corrector* to safely and effectively target pigmentation in all skin tones.

This product brings together two powerful, proven technologies – Senté patented Heparan Sulfate Analog (HSA) to control inflammation that fuels hyperpigmentation, along with Cysteamine HCl, to restore a visibly even complexion to all skin tones without risk of excessive lightening. The hydroquinone-free formula is safe for long-term use and gentle enough for all skin types including dry or sensitive skin.

In a randomized, double-blind clinical trial of 35 subjects with moderate to severe hyperpigmentation, *Senté Cysteamine HSA Pigment & Tone Corrector* demonstrated a 71% overall reduction in dark spots¹, while 94% of subjects showed improvement in hyperpigmentation at 16 weeks.

For more information regarding this new innovation from Senté, or to become a Senté partner, contact us at info@sentelabs.com.

SKINUVA®

Skinuva is a physician developed, solutions driven, and clinically supported line of products that was developed to provide physicians the most advanced products for their patients. Skinuva products are currently sold in physician's offices *across the US and globally* and are recommended as their #1 scar product (*Skinuva Scar*) and skin brightening product (*Skinuva Brite*). Skinuva Scar's and Skinuva Brite's patented formulations use highly selective synthetic Growth Factor technology and are backed by several published clinical studies, providing our doctors and patients safe and effective products. The newest product in the Skinuva line, Skinuva Bruise, is a pharmaceutical grade, post recovery homeopathic supplement that helps reduce bruising, swelling, and pain from surgeries, cosmetic procedures, and injuries. For more information, please visit www.skinuva.com.



Since its creation by a plastic surgeon with an adjoining medical spa, Symplast EHR has focused on mobile technology that changes the way providers present their services and the way that patients manage their health care. Using cutting-edge cloud technology, Symplast's tools are available on computers, tablets, and smartphones, creating a necessary work-life balance for doctors as they access the clinical, financial, and operational data of their business at any time, from any place. We support clients by presenting them with their data, enabling their practice to make informed decisions and provide smarter care. Empowering both practice and patient to know, manage, and engage with one another, Symplast is disrupting the aesthetic industry and transforming the way healthcare is delivered. Our mission is to continue to provide intuitive and innovative tools and solutions that will adapt to meet the ever-changing landscape of healthcare and the needs of today's aesthetic patient. Symplast knows that your workflows become their patient experience.

Is Your Company
Ready to Fully
Engage with
The Aesthetic
Society?

Contact

Jackie Nunn at jackie@theaestheticsociety.org

for more information
about partnership
opportunities.

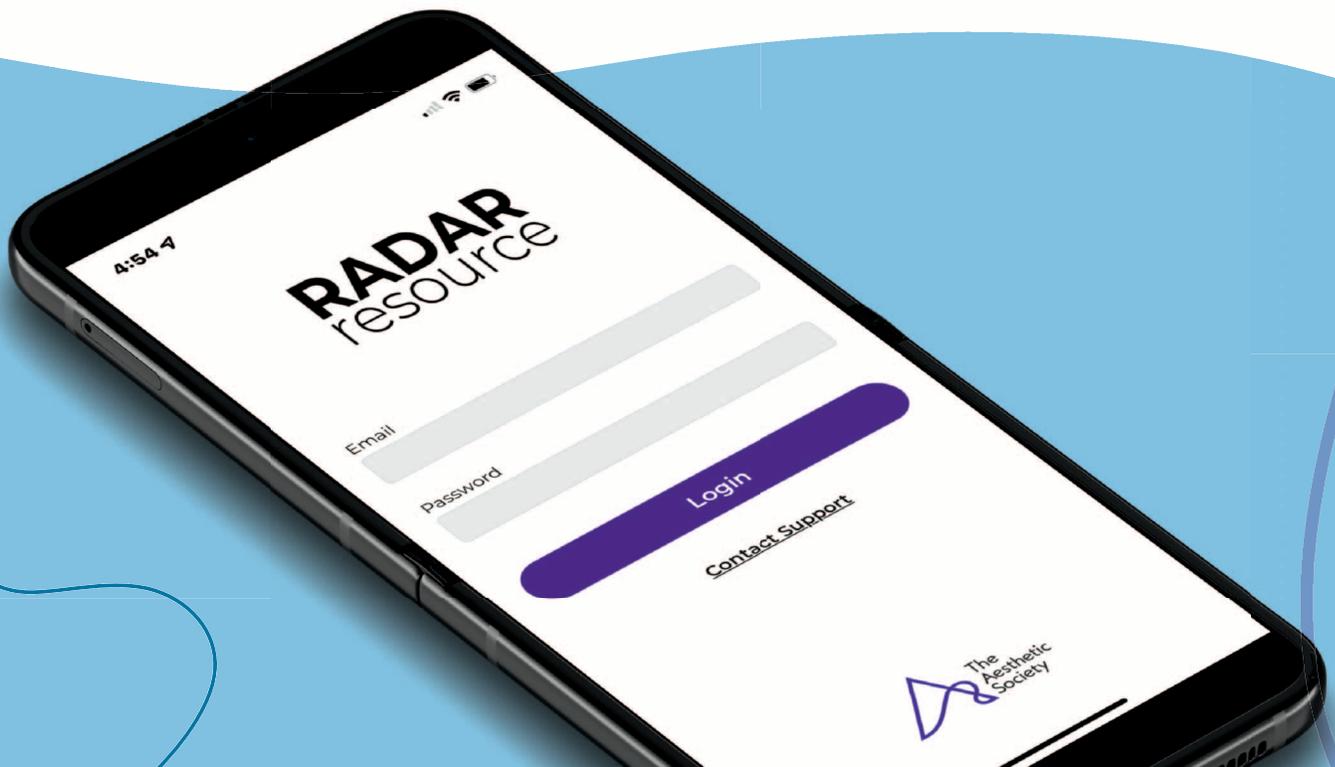
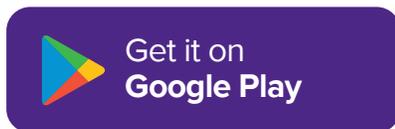
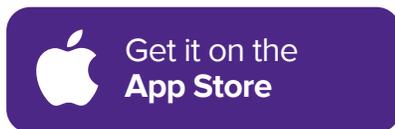


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Aesthetic Society Members

Introducing the **NEW RADAR**

We've taken RADAR to the next level with a new mobile app – offering all the content you love right at your fingertips. Enjoy a fresh design and enhanced features across all platforms! Access to your favorite content is just a few taps away.

Download the iOS or Android app(s) by searching “RADAR Resource” in the store.



Industry Partners Support The Aesthetic Society's Mission

The Aesthetic Society is pleased to partner with industry in support of The Society's mission to advance the science, art, and safe practice of aesthetic plastic surgery and aesthetic medicine among qualified plastic surgeons.

"The Aesthetic Society's ongoing partnership with industry is vital to the advancement of aesthetic plastic surgery. Industry support helps The Aesthetic Society unleash the power of science and education to advance outcomes and safety for our patients." —Dr. Tracy Pfeifer, Industry Relations Chair.

We'd like to thank and acknowledge Founding Premier Partner, Sientra and Alliance Industry Partners 3M, Applied Medico Legal Solutions (AMS), and CareCredit for their continued support.

The Aesthetic Society values our Industry Partners and we thank all our partners for their meaningful contributions.



Founding Premier Partner

sientra

UNRIVALED SAFETY, STATE-OF-THE-ART SCIENCE AND EXCEPTIONAL SERVICE

Founding Premier Partner, Sientra is a global medical aesthetics company headquartered in Santa Barbara, California. The Company offers leading transformative treatments and technologies focused on progressing the art of plastic surgery and making a difference in patients' lives. With unrivaled safety, state-of-the-art science and exceptional service, Sientra's portfolio of proprietary innovations radically advances how plastic surgeons care for their patients.

Sientra has developed a broad portfolio of products with technologically differentiated characteristics, supported by independent laboratory testing and strong clinical trial outcomes. The company's core breast products segment includes its state-of-the-art Sientra breast implants, featuring two high-strength cohesive gels, 6 projection levels and over 250 round implant options and over 90 shaped implant options. The company trusts in the safety and performance of their breast implants and offers the most comprehensive warranty program in the industry, with the longest length of coverage, most financial assistance, and the least amount of warranty restrictions.

In addition, the Sientra portfolio also features its ground-breaking dual-port breast tissue expander, AlloX2® and includes BIOCORNEUM® the #1 performing, preferred and recommended scar gel of plastic surgeons*

* Data on file

Learn more about Sientra and the Sientra portfolio at www.Sientra.com



3M + KCI

THE PLASTIC SURGERY BOOM DRIVES GROWTH IN OUTPATIENT SURGERIES

Patients are seeking more procedures in breast and abdominoplasty as they look to improve their overall well-being and health.

The demand for plastic surgery has increased since the beginning of the pandemic for a variety of reasons including a renewed focus on health, improving mental and physical well-being and the opportunity to recover at home. *According to The Aesthetic Society's Aesthetic Plastic Surgery National Databank Statistics for 2020-2021, "Following a year in which many practices closed temporarily and reduced hours, Aesthetic Plastic Surgery surged in 2021. Body procedures increased more than any other section (+ 63% vs. 2020), led by jumps in liposuction procedures (+66%) and*

abdominoplasties (+ 49%). There were 365,000 breast augmentations performed in 2021. In addition, 148,000 women had implants removed and replaced (+32% from 2020), and 71,000 had their implants removed and not replaced (+47%)."

Outpatient Surgery Magazine spoke to Tripp Holton, MD, a plastic surgeon in Annapolis, Maryland who is affiliated with Luminis Health Anne Arundel Medical Center to talk about the trends in plastic surgery today.

Q: What do you do to keep the patient safe from infection and complications?

The patient is paying the surgeon for two often competing goals: they want the best looking result and they expect to be kept out of harm's way. To accomplish these competing priorities, I rely heavily on experience, judgement and technology. In particular, I ask a lot of the dressings that I use in abdominoplasty and breast reduction surgeries. Specifically, I typically use closed incision negative pressure dressings because they do several critical things for me and by proxy my patient. These advanced dressings actively manage the incisions and the surrounding soft tissues: they off load tension across the incisions, reduce swelling within and below the skin, increase blood supply to the tissue and protect the incision from contamination by creating and maintaining a sealed and sterile environment after the surgery.

Q: For wound care, what do you see as the best practices?

While wound care is a critically important process, I strive for and focus on active incision management because the Holy Grail of cosmetic surgery is to manage incisions to prevent the development of wounds. I have personally enacted a zero-tolerance policy for wound development after cosmetic procedures. To help achieve this austere but important goal I mandate that all tummy tuck and breast lift patients are managed with an advanced incisional management dressing such as a 3M™ Prevena™ Dressing along the waistline closure after abdominoplasty and a 3M™ Prevena Restor™

BellaForm™ Dressing to cover the breast after a lift especially when an implant is placed at the same time.

Continued on Page 40

Industry Partners Support The Aesthetic Society's Mission

Continued from Page 39

Q: What do you see as the most important new trends in plastic surgery?

I have always believed that advancements in technology allow advancements in techniques. Recent trends in breast reconstruction for cancer provide an excellent example of how intelligent use of technology has informed our choice of surgeries. When I trained and when I was first in practice all of my implant-based breast reconstructions after mastectomy started with placement of a breast tissue expander beneath the patient's pectoralis major muscle. This was then followed by a series of visits for expansion and culminated in a second operation to replace the temporary device (tissue expander) and place a permanent implant into that pocket.

In 2016, I began to build all breast above the muscle since we finally had technologies that made that possible such as blood supply mapping, excellent tissue for implant support, higher quality breast prostheses and, importantly, dressings that protect the breast while improving the nascent blood supply. Shortly after switching to this new approach (pre-pectoral reconstruction) I learned that almost all of my patients could be accelerated to placement of an implant immediately rather than requiring an expander and the associated visits for expansion and final operation to exchange the expander for an implant. Now, technology had allowed the breast to be made in front of the muscle (far less pain) and with the immediate placement of the implant. With patients in far less pain we were suddenly able to safely and compassionately send patients home on that same day.

I see technology helping my cosmetic patients in much the same way. I, and now they, expect to be back to normal activity very soon after surgery.

For more information please go to 3M.com/PrevenaCentral.

Dr. Holton is a consultant and speaker for 3M due to the value that he places on the 3M products designed for management of incisions, tissue and wounds.



UNDERSTANDING MEDICINE, DOCTOR CENTRIC CLAIMS MANAGEMENT, AND FINANCIAL STRENGTH

Applied Medico-legal Solutions RRG, Inc. (AMS RRG) is expected to write approximately \$95 million in premium in 2022 which would place them among the largest multi-specialty medical professional liability carriers in the country. The keys to success have been understanding medicine, doctor centric claims management, financial strength and emphasis on unparalleled customer service. Since its inception AMS RRG's foundation was in medicine and healthcare delivery systems. Richard B. Welch and Steven Shapiro, MD created the vision that became AMS RRG while working together previously at a multi-hospital system located in South Florida. Their combined experience in every facet of healthcare cannot be understated.

In 2012 AMS RRG further expanded its medical liability product offerings with the introduction of Preferred Aesthetics," a program that carefully tailors coverage and premiums specific to Plastic and Aesthetic practices. Harry K. Moon, MD and J. Brian Boyd, MD were added to the Medical Advisory Panel to help shape and oversee this innovative program. AMS RRG's Medical Advisory Panels have been a core of AMS RRG's business practices utilizing the physician's experience in all areas; including underwriting, claims management and customer service.

Financial strength is another element that is central to the success of AMS RRG. Since its inception in 2003 AMS RRG has grown its surplus to more than \$87 million, as of year-end 2021. Consistent growth, over time has helped account for the positive operating margin and financial security of AMS RRG. AM Best has assigned a Financial Strength Rating of A- (Excellent) and a Long-Term Issuer Credit Rating of "a-" (Excellent) to AMS RRG. Demotech, Inc. has awarded AMS RRG with an A' (Unsurpassed) Financial Stability Rating (FSR). AMS RRG remains consistent in its initial vision, to work with doctors to help reduce medico-legal risk and provide medical

professional liability solutions to meet the individual practice's need. It is because of this, AMS RRG has been able to maintain its financial strength and offer premium savings to its insureds.

AMS RRG has been an Aesthetic Society Alliance Industry Partner since 2015.

For additional information please contact Christopher Edge at cedge@amsrrg.com



CARECREDIT OFFERS RESOURCES TO HELP YOUR PRACTICE THRIVE

CareCredit is a health, wellness and beauty credit card dedicated to helping millions of patients get the care they want by offering promotional financing options. Now accepted at more than 260,000 locations nationwide, the CareCredit credit card allows cardholders to make convenient monthly payments for aesthetic procedures that help them achieve the look they want. Patients have the ability to see if they prequalify for the CareCredit credit card with no impact to their credit bureau score.

"CareCredit is thrilled to announce its continued partnership with The Aesthetic Society as an Alliance Partner. CareCredit offers flexible payment options for out-of-pocket health and wellness expenses, allowing patients to move forward with the procedure they want at their convenience. CareCredit has over 35 years of experience with patient financing helping to remove the payment hurdle from the decision-making process," said Jill Behm, General Manager, CareCredit Specialty—Cosmetic and Spa.

CareCredit offers resources to help your practice thrive including custom reports that provide tailored insights to your practice, contactless payment through a custom link and QR code, digital tools and much more.

A simple and convenient solution that can help your patients schedule without delay.

Learn more about CareCredit by visiting carecredit.com/asn or call 855-860-9001.

*Subject to credit approval. Minimum monthly payments required. See carecredit.com for details.

Qwo[®]
collagenase clostridium
histolyticum - aaes injection
0.92mg

Together, we can help change the way you treat cellulite

Butt First, start talking to your patients about Qwo[®]

Get to know how the first and only FDA-approved injectable for moderate to severe cellulite in the buttocks of adult women could be a game changer for your practice.



Visit qwo-hcp.com to find out how to start helping your patients put their butts first.

ACTOR PORTRAYAL

INDICATION

Qwo[®] is indicated for the treatment of moderate to severe cellulite in the buttocks of adult women.

IMPORTANT SAFETY INFORMATION FOR QWO CONTRAINDICATIONS

QWO is contraindicated in patients with a history of hypersensitivity to collagenase or to any of the excipients or the presence of infection at the injection sites.

WARNINGS AND PRECAUTIONS

Hypersensitivity Reactions

Serious hypersensitivity reactions including anaphylaxis have been reported with the use of collagenase clostridium histolyticum. If such a reaction occurs, further injection of QWO should be discontinued and appropriate medical therapy immediately instituted. Advise patients to seek immediate medical attention if they experience any symptoms of serious hypersensitivity reactions.

Injection Site Bruising

In clinical trials, 84% of subjects treated with QWO experienced injection site bruising. Subjects with coagulation disorders or using anticoagulant or antiplatelet medications (except those taking ≤ 150 mg aspirin daily) were excluded from participating in Trials 1 and 2.

QWO should be used with caution in patients with bleeding abnormalities or who are currently being treated with antiplatelet (except those taking ≤ 150 mg aspirin daily) or anticoagulant therapy.

Substitution of Collagenase Products

QWO must not be substituted with other injectable collagenase products.
QWO is not intended for the treatment of Peyronie's Disease or Dupuytren's Contracture.

ADVERSE REACTIONS

In clinical trials, the most commonly reported adverse reactions in patients treated with QWO with an incidence $\geq 10\%$ were at the injection site: bruising, pain, nodule and pruritus.

Please see Brief Summary of Full Prescribing Information on the following page.

QWO™ (collagenase clostridium histolyticum-aes) for injection, for subcutaneous use

Brief Summary

For complete information, see the full Prescribing Information

INDICATIONS AND USAGE

QWO is indicated for the treatment of moderate to severe cellulite in the buttocks of adult women.

CONTRAINDICATIONS

QWO is contraindicated in:

- patients with a history of hypersensitivity to collagenase or to any of the excipients [see *Warnings and Precautions*].
- the presence of infection at the injection sites.

WARNINGS AND PRECAUTIONS

Hypersensitivity Reactions

Serious hypersensitivity reactions including anaphylaxis have been reported with the use of collagenase clostridium histolyticum. If such a reaction occurs, further injection of QWO should be discontinued and appropriate medical therapy immediately instituted.

Injection Site Bruising

In clinical trials, 84% of subjects treated with QWO experienced injection site bruising [see *Adverse Reactions*]. Subjects with coagulation disorders or using anticoagulant or antiplatelet medications (except those taking \leq 150 mg aspirin daily) were excluded from participating in Trials 1 and 2.

QWO should be used with caution in patients with bleeding abnormalities or who are currently being treated with antiplatelet (except those taking \leq 150 mg aspirin daily) or anticoagulant therapy.

Substitution of Collagenase Products

QWO must not be substituted with other injectable collagenase products. QWO is not intended for the treatment of Peyronie's Disease or Dupuytren's Contracture

ADVERSE REACTIONS

The following adverse reactions to QWO for injection are discussed in greater detail in other sections of the labeling:

- Hypersensitivity [see *Contraindications and Warnings and Precautions*].
- Injection Site Bruising [see *Warnings and Precautions*].

Clinical Trials Experience

Because clinical trials are conducted under widely varying conditions, the adverse reaction rates observed in the clinical trials of a drug cannot be directly compared to rates in the clinical trials of another drug and may not reflect the rates observed in clinical practice.

In two double-blind, placebo-controlled clinical trials (Trials 1 and 2) of identical design, 424 female subjects with cellulite in the buttocks received QWO and 419 female subjects with cellulite received placebo. Enrolled subjects were adults age 18 to 78 years with moderate to severe cellulite (graded as 3 or 4 on a 0 to 4 scale) and without excessive skin laxity. The majority were White (78%) or African American (18%). Subjects completed up to 3 treatment visits separated by 21 days and were followed for up to 6 months after the last treatment visit in a separate open-label extension trial (Trial 3).

The following table shows the incidence of adverse reactions that were reported in \geq 1% of subjects who received QWO-and at a frequency greater than subjects who received placebo in Trials 1 and 2 through Day 71. Generally, adverse reactions had a duration of less than 21 days.

Adverse Reactions Occurring in \geq 1% of Subjects in Trials 1 and 2 Through Day 71

Adverse Reactions at Injection Site	QWO N=424 %	Placebo N=419 %
Bruising	84	21
Pain	48	10
Nodule	33	1
Pruritus	15	1
Erythema	9	5
Discoloration	8	1
Swelling	8	1
Warmth	3	0

Pooled terms:

- Bruising - injection site bruising, injection site hematoma, and injection site hemorrhage (refers to verbatim term injection site ecchymosis)
- Pain - injection site pain, injection site discomfort, and injection site dysesthesia
- Swelling - injection site swelling, injection site edema, injection site induration
- Discoloration - injection site discoloration
- Nodule- injection site mass and injection site nodule

Four hundred seventy-nine (479) subjects from Trials 1 and 2 completed a 6-month observation phase in the ongoing open-label safety extension (Trial 3). No long-term safety signals have been identified.

Immunogenicity

As with all therapeutic proteins, there is potential for immunogenicity. The detection of antibody formation is highly dependent on the sensitivity and specificity of the assay. Additionally, the observed incidence of antibody (including neutralizing antibody) positivity in an assay may be influenced by several factors including assay methodology, sample handling, timing of sample collection, concomitant medications, and underlying disease. For these reasons, comparison of the incidence of antibodies in the studies described below with the incidence of antibodies in other studies or to other products, including other collagenase clostridium histolyticum products, may be misleading. By Day 22, approximately 53% (203/383) and 26% (101/383) of subjects who completed the first treatment visit of QWO at the recommended dose in Trials 1 and 2 developed anti-AUX-I and anti-AUX-II antibodies, respectively. The majority ($>$ 96%) of subjects developed antibodies for AUX-I and AUX-II after second and third treatment visits. Antibody titers suggested that antibodies were retained for up to 360 days after receiving the first recommended dose. By Day 71, approximately 68% and 83% of subjects developed antibodies to AUX-I and AUX-II which were classified as neutralizing, respectively.

Antibodies to AUX-I and AUX-II including those classified as neutralizing were not associated with changes in clinical response or adverse reactions at injection site.

Postmarketing Experience

Because adverse reactions are reported voluntarily from a population of uncertain size, it is not always possible to reliably estimate their frequency or establish a causal relationship to drug exposure. The following adverse reaction was reported during post approval use of a collagenase product:

Immune system disorders: serious hypersensitivity reactions including anaphylaxis [see *Warnings and Precautions*].

USE IN SPECIFIC POPULATIONS

Pregnancy

Risk Summary

There are no available data on collagenase clostridium histolyticum use in pregnant women to evaluate for a drug-associated risk of major birth defects, miscarriage or adverse maternal or fetal outcomes. Following subcutaneous injection, the systemic concentrations for QWO were below the bioanalytical assay limit of quantification [see *Clinical Pharmacology in the full Prescribing Information*].

In animal reproduction studies, intravenous administration of collagenase clostridium histolyticum to pregnant rats during organogenesis at doses up to 0.13 mg/rat (43 \times human equivalent dose [HED] on a mg/kg basis) revealed no evidence of harm to the fetus.

The estimated background risk of major birth defects and miscarriage for the indicated population is unknown. All pregnancies have a background risk of birth defect, loss, or other adverse outcomes. In the US general population, the estimated background risk of major birth defects and miscarriage in clinically recognized pregnancies is 2-4% and 15-20%, respectively.

Lactation

Risk Summary

There are no data on the presence of collagenase clostridium histolyticum in human milk, the effects of collagenase clostridium histolyticum on the breastfed child or on milk production. Following subcutaneous injection, the systemic concentrations for QWO were below the bioanalytical assay limit of quantification [see *Clinical Pharmacology in the full Prescribing Information*]. The developmental and health benefits of breastfeeding should be considered along with the mother's clinical need for collagenase clostridium histolyticum and any potential adverse effects on the breastfed child from collagenase clostridium histolyticum, or from the underlying maternal condition.

Pediatric Use

The safety and effectiveness of QWO have not been established in pediatric patients.

Geriatric Use

In two double-blind, placebo-controlled, clinical trials in subjects with cellulite (Trials 1 and 2), 24 (5.7%) of the 424 subjects who received QWO were 65 years of age or older. No overall differences in safety of QWO were observed between these patients and younger patients.

PATIENT COUNSELING INFORMATION

Advise the patient to read the FDA-approved patient labeling (Patient Information).

Hypersensitivity

Advise patients to seek immediate medical attention if they experience any symptoms of serious hypersensitivity reactions [see *Warnings and Precautions*].

Injection Site Bruising

Advise patients that injection site bruising may occur with administration of QWO [see *Warnings and Precautions*].

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Based on the Prescribing Information revised 07/2020.

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EA-QW-05002/August 2020



Apply for Active Membership

Application deadlines are
January 5 and July 1

Education

Expertise

Beauty

Artistry

Membership FAQs

What questions about The Aesthetic Society or membership do you have? What myths can we help dispel? If you have questions about anything related to our Society, simply email membership@theaestheticsociety.org and you'll get an answer to your question!

HOW MANY SPONSORS WILL I NEED?

You will need at least two (2) sponsors. U.S. and Canadian applicants must have one sponsor that is in your geographical location while the other can be any Aesthetic Society Active/Life Member that knows you well. Each sponsor will need to complete the sponsorship form on your behalf. International applicants must have one Aesthetic Society Active/International Active or Life Member sponsor, and the other must be a member in a national plastic surgery society acceptable to The Aesthetic Society, or from an ISAPS member in their country.

WHO MAY SPONSOR ME FOR MEMBERSHIP?

Any Active or Life Member of The Aesthetic Society, who is not a family member, an associate and/or partner in the same practice may sponsor you for Active membership. Sponsorship forms are included within the application.

WHAT ARE THE DEADLINES FOR SUBMITTING A MEMBERSHIP APPLICATION?

The two deadlines are January 5 and July 1.

HOW LONG WILL IT TAKE FOR MY APPLICATION TO BE REVIEWED?

Applicants who submit materials for the July 1 deadline are eligible for election at the end of the year. Applications submitted by the January 5 deadline are eligible for election in the Spring.

WHAT ARE THE FEES AND WHEN SHOULD THEY BE PAID?

There is a \$250 Application Fee that must be paid along with your completed application. Once voted in, you will be required to pay your annual membership dues:

- Membership dues for Active Members are \$1,275
- Membership dues for International Active Members are \$545

For information on the full application process, visit the Medical Professionals section of theaestheticsociety.org/membership.

For additional information/questions, please contact our Senior Membership Manager, Marissa Simpson via email membership@theaestheticsociety.org or at 562.799.2356.

DO I HAVE TO BE A MEMBER OF ASPS TO BE A MEMBER OF THE AESTHETIC SOCIETY?

No. Membership in ASPS is NOT required to be an Aesthetic Society member.

Membership Myth-Busters

Myth: One must attend an Aesthetic Society meeting to become a member.

Fact: This used to be the case. However, in order to streamline the application process, this requirement was recently removed!

Myth: One must be a member of ASPS to be a member of The Aesthetic Society.

Fact: Many Society leaders and members are not members of ASPS. The Aesthetic Society is the premier aesthetic society, dedicated solely to aesthetic education, and we don't require membership in any other organization in order to become an Aesthetic Society member. As long as you meet our requirements, you can apply for membership today!

Myth: One must document a minimum count of aesthetic cases to apply.

Fact: While applicants are asked to complete a case log questionnaire, there is no case minimum. Many applicants also perform reconstructive surgery. One's practice does not need to be 100% aesthetic to apply and be accepted into membership.

ONLINE APPLICATION

Complete your application from start to finish 100% online
theaestheticsociety.org/membership

ASERF Mission

Identify and pursue those issues relevant to **advancing** the **safety** & effectiveness of **aesthetic medicine** through **independent** unbiased, directed **research** and groundbreaking **education.**



Update on ASERF

By Bruce W. Van Natta, MD



The Aesthetic Surgery
Education and
Research Foundation

Like many of us do every January, I set personal goals and intentions for a bright and successful new year. As the President of ASERF, I, along with our Board, have outlined a number of goals for The Foundation with the intention to make this year ASERF's best yet. 2023 is especially important because ASERF is celebrating its 30th anniversary!

Founded in 1993, ASERF has grown and changed like any 30-year-old. Thus, ASERF is updating its logo and rolling out a new website, both of which will be unveiled at The Aesthetic Meeting 2023 in April. (ASERF will have a booth in Miami Beach in which visitors can toast its 30th anniversary while learning what we've been up to since last April. Details to come in the spring 2023 issue of *ASN*.)

With just 6 months left in the fiscal year, ASERF leadership has budgeted \$150,000 to support new physician-initiated research through the Interim Grant Application Program and expanded its well-received Externship Program. We have set a goal to increase the membership base to just over 1,400 in 2023, and we need your help to get there.

The success of these activities relies on the success of our fundraising efforts. I thank those who donated to ASERF through the Society dues process and ask that we all consider supporting ASERF in its 30th anniversary year.

Exciting times lie ahead for ASERF and our specialty, and I am thankful that together, we have contributed to its history and legacy.

Bruce W. Van Natta, MD is an aesthetic plastic surgeon practicing in Indianapolis, Indiana, and serves as President of ASERF.

ASERF ANNOUNCES FIRST COHORT OF EXTERNS

The Externship Program, an educational endeavor and scholarship opportunity designed by The Aesthetic Surgery Education and Research Foundation (ASERF), in conjunction with The Aesthetic Society, received 28 applications in its pilot phase.

"The Task Force was blown away by the number of applicants as well as the caliber of those who applied," said Camille Cash, MD, ASERF Externship Program Chair. "Truly, each student would benefit from the opportunity, but funding was limited to six positions this year. With such a successful launch, we expect interest and funding for the program to grow over time."

After more than a year of planning and development, ASERF is pleased to announce the 2022–2023 ASERF Externs: Cassandra Carrion (SUNY Downstate College of Medicine), Christian Reynalda Laurent (Medical College of Georgia at Augusta University), Chidi Martins (Howard University College of Medicine), Ashley Newman (Howard University College of Medicine) Kometh "Tony" Thawanyarat (Medical College of Georgia) and Bryan S. Torres (Tulane University School of Medicine).

The purpose of the Externship Program is to expose underrepresented minority students to the field of plastic surgery who are enrolled in medical schools without a plastic surgery program. ASERF's specific goal is to increase their chances of obtaining a residency position.

Externs will be matched with a member of The Aesthetic Society who will serve as their mentor. Over the course of the year, Externs will shadow their mentor in a week-long observership, attend The Aesthetic

Meeting, as well as build a relationship with someone who will provide a broad overview of plastic surgery, assist with networking, and guide them on their educational and professional journey.

"This Task Force has done an excellent job with creating a program. The overall interest is more than we expected for the program's first year," said ASERF President, Bruce Van Natta, MD.

In addition to Dr. Cash, The ASERF Externship Task Force includes Mark Albert, MD; Victory Eze, MD; Amanda Gosman, MD; Wilmina Landford, MD; Chris Lopez, MD; Chet Mays, MD; Ivona Percec, MD; Luis Rios, MD; and Bruce Van Natta, MD.

ASERF TO ROLL OUT "RAISE CASH FOR RESEARCH" IN MIAMI BEACH

Over the last few years, both Senté and enaltus participated in a pilot program called Raise Cash for Research, designed to increase booth traffic, and raise money for ASERF. Between the two organizations, more than \$15,000 was raised to support the mission.

This year in Miami Beach, ASERF's goal is to secure ten companies to participate in Raise Cash for Research. Participation is simple for companies:

- Select one of the four donation ceilings:
 - A: \$1,000, B: \$2,500, C: \$5,000, D: \$10,000
- Agree to donate \$100/scan for each qualified health care professional that visits their booth
- Agree to use meeting badge scanner

ASERF will promote the program to help drive attendees to participant company booths. Companies that do not meet their donation ceiling only pay for the number of badges scanned.

To find out more, visit: bit.ly/3Vqajxf

"The Task Force was blown away by the number of applicants as well as the caliber of those who applied," said Camille Cash, MD, ASERF Externship Program Chair. "Truly, each student would benefit from the opportunity, but funding was limited to six positions this year. With such a successful launch, we expect interest and funding for the program to grow over time."

Continued on Page 47



**Aesthetic
Research
Community**

**Do you
have a great research idea?**

SHARE. CONNECT. LAUNCH.

WHAT IS THE AESTHETIC RESEARCH COMMUNITY?

- A network of Aesthetic Surgeons willing to share ideas and collaborate on research
- A source for aesthetic surgery research guidance

WHO MAY PARTICIPATE?

- Aesthetic Society and ASERF Members, Associates and Residents

HOW DO I JOIN?

- Scan the QR Code
- Complete the brief form
- A member of the ARC Committee will contact you



ASERF.ORG

Update on ASERF

Continued from Page 45



SUPPORT YOUR PROFESSIONAL RESEARCH FOUNDATION—DONATE TO THE ASERF SILENT AUCTION

ASERF is asking members to donate to the silent auction - What 'cha got? We'll take it!

Planning has started for ASERF's 10th Annual Silent Auction which will take place in conjunction with The Aesthetic Meeting 2023 in Miami Beach. This popular fundraiser has been successful since it was first introduced, and chaired by Grant Stevens, MD, in 2012. In that time more than \$1,250,000 has been raised to support ASERF's mission.

Before anything can be sold in the auction, it must first be donated to ASERF. And it is these in-kind donations that set the tone and determine the overall success of the auction.

Through the years, The Foundation has received hundreds of amazing donations with the contributions averaging \$150,000 annually. From scalpels to capital

equipment, from gift certificates to a fly-fish tying course from baskets to ski trips, member art to Train with an Expert and everything in between.

Johnny Franco, MD will chair this year's fundraiser and soon will be calling upon industry for those big-ticket items the members secretly hope to win at a discount via the auction. Erika Ortiz-Ramos, Director of Exhibits, has started calling upon exhibitors seeking contributions. And now, The Foundation is requesting contributions from members to support their professional research foundation.

What 'cha got? We'll take it!



A week's free rental to your vacation home, mountain cabin, lake house or beach cottage that is sitting vacant—we'll take it!



One of your own masterpieces, be it watercolors, acrylics, or crayons—we'll take it.



Share your passion with your colleagues, offer a weekend of birding, a couple rounds of golf, or a hunting excursion—we'll take it.



Event tickets, sporting events, or Broadway shows—we'll take it.



Art, jewelry, antiques, or collectibles—we'll take it.



Offer to teach your peers a surgical technique, "Train with the Expert"—we'll take it.

Visit [The Aesthetic Meeting 2023 website](https://www.theaestheticsociety.org) to complete the required paperwork, or contact **Erika Ortiz-Ramos**, erika@theaestheticsociety.org

Help us reach the \$150,000 financial goal and donate now!

CELEBRATING 30 YEARS

Advancing Aesthetics Since 1993



ASERF CELEBRATES 30 YEARS

For 30 years, The Aesthetic Surgery Education and Research

Foundation (ASERF) has been laser-focused on its vision, become the preeminent research organization for aesthetic surgery. Three decades later, ASERF remains steadfast as evidenced in some of the groundbreaking studies it has supported through the years:

- In search of safety: Large Volume Liposuction (Dr. Jeffrey Kenkel)

- Retrospective study on Pulmonary Embolism (Dr. Geoffrey Keyes)
- Identification of Biomarkers in Breast Implant Associated Anaplastic Large Cell Lymphoma (Dr. Marshall Kadin)
- Correlating Technique with Proximity to Anatomic Danger Zones in Gluteal Fat Transfer: A Patient Safety Study (Dr. J. Peter Rubin)
- Systemic Symptoms: Biospecimen Analysis Study (Dr. Caroline Glicksman, Dr. Patricia McGuire et al.)
- Understanding Breast Implant Illness (Jill Newby PhD et al.)

ASERF has seen other successes too. Manuscripts from dozens of studies funded by ASERF have been printed in *ASJ*; the long running and ever-popular Premier Global Hot Topics; The Career Achievement Award which recognizes an individual who has made significant contributions to aesthetic surgery; and the organization's crown jewel, the Interim Research Grant Application Program.

To learn more about ASERF and its many accomplishments, stop by Booth 1230 in Miami Beach. We would enjoy sharing our 30-year history with you!

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– Daniel C. Mills, M.D., F.A.C.S. Past President of the American Society for Aesthetic Plastic Surgery



Contact: Christopher Edge, 609-737-1154 ext. 301

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New Findings from the Biospeciment Study on Breast Implant Illness (BII)

Study aims to understand the potential etiologies of the systemic symptoms self-reported by some breast implant patients known as Breast Implant Illness

The Aesthetic Society and The Aesthetic Surgery Education and Research Foundation (ASERF) released the findings from a study dedicated to researching the systemic symptoms self-reported by some breast implant patients, known as Breast Implant Illness. This study was funded entirely by an Aesthetic Surgery Education and Research Foundation (ASERF) grant awarded in 2019. There was no outside sponsor involvement in the research, data collection, data interpretation, data analysis, or writing of the manuscript. The full study is published in *Aesthetic Surgery Journal*.

Breast Implant Illness (BII) is a term used to describe a variety of symptoms by patients with breast implants for which there are no abnormal physical or laboratory findings to explain their symptoms. This is the first prospective, blinded study with control groups to evaluate women with breast implant illness both qualitatively with symptom surveys and quantitatively with bio specimens (blood and implant capsules). The authors sought to investigate measurable differences between the cohorts to help explain symptoms and point to potential causes.

KEY FINDINGS PUBLISHED FROM THE STUDY ARE:

- There are women with implants who experience a variety of symptoms that they attribute to their implants;
- They have real symptoms and are distressed that no diagnosis can be made;



Breast Implant Illness (BII) is a term used to describe a variety of symptoms by patients with breast implants for which there are no abnormal physical or laboratory findings to explain their symptoms. This is the first prospective, blinded study with control groups to evaluate women with breast implant illness both qualitatively with symptom surveys and quantitatively with bio specimens (blood and implant capsules).

- The ASERF study demonstrated 94% of patients showed improvement in systemic symptoms after removal of their breast implants;
- The symptom improvement is independent of the type of capsulectomy performed and there was no statistical difference in symptom improvement whether the entire capsule was removed or partially removed at the time of implant removal;
- The study found low measurable levels of some heavy metals in implant capsules as well as normal breast tissue never exposed to any implanted medical device. None of the groups had tissue levels that exceeded the International Conference on Harmonization level of acceptable internal exposure levels to heavy metals;
- There was no significant difference in the presence of bacteria on the implants or in the capsules, between the groups validated by analysis of the presence of bacterial DNA;
- Peripheral blood analysis showed very few statistical differences between the cohorts;
- Further prospective research is necessary to determine which patients might be at risk for developing systemic symptoms after getting breast implants and how best to treat these patients; and
- The one-year follow-up data will be published early in 2023.

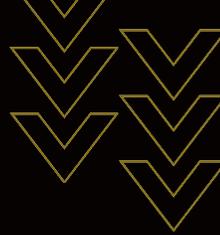
“The bottom line is that we found that these patient’s symptoms improve after implant removal and they may improve without a capsulectomy which is a less invasive, less risky, and less expensive procedure,” says Patricia McGuire, MD, co-author of the study. “We have not found any consistent measurable differences between the breast implant illness subjects and the control groups that could be used to make a diagnosis. We can now have educated discussions with our patients to

“The bottom line is that we found that these patient’s symptoms improve after implant removal and they may improve without a capsulectomy which is a less invasive, less risky, and less expensive procedure,” says Patricia McGuire, MD, co-author of the study.

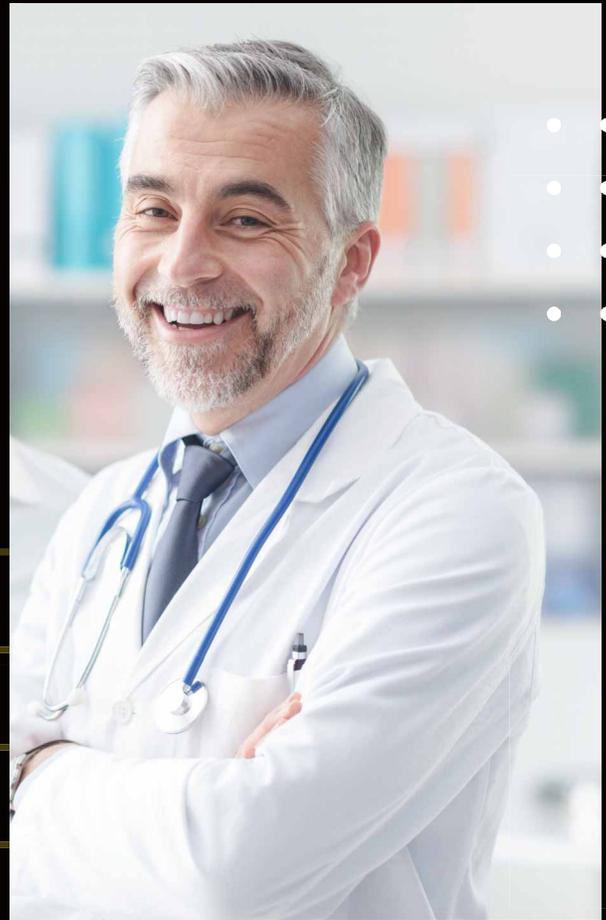
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Breast Implant Illness Study

Continued from Page 49

help them make informed surgical decisions when deciding to remove their implants.”

“There have been questions surrounding the safety of breast implants for as long as there have been breast implants. Breast Implant Illness is self-reported by a minority of women with breast implants and the symptoms being reported by these women needed to be looked at with a well-designed prospective scientific study,” explains Caroline Glicksman, MD, MSJ co-author. “Our goal was to design such a study and we utilized authoritative laboratories including Brown University and Johns Hopkins University to analyze the biospecimens.”

Part one of the biospecimen study “Impact of Capsulectomy Type on Post-Explantation Systemic Symptom Improvement: Findings From the ASERF Systemic Symptoms in Women—Biospecimen Analysis Study: Part 1” published July 2022 in *Aesthetic Surgery Journal* examined women describing medical symptoms that they attribute to their breast implants. Many groups on social media insist that an “en bloc” removal—the complete removal of the scar tissue surrounding a breast implant in one complete piece, must be done for a patient to have their symptoms resolve. The term “en bloc” refers to a procedure done for malignancy in which a layer of normal tissue is removed around a malignancy to ensure the tissue margins are clear of tumor. Thus, the term is improperly used for removal of an implant in the absence of malignancy. Removing the entire implant capsule requires a longer operative time, a longer incision, and may carry a higher risk of surgical complications, such as hematoma or a collapsed lung. Surgeons are advised to follow evidence-based medicine and use scientific data to discuss surgical options

with patients to ensure that they can make the best decision if they choose to remove their breast implants. The study demonstrated that the type of capsule removal did not affect the improvement in symptoms. Whether a partial or complete capsule removal was performed, the patients reported the same level of improvement.

Part two of the study “Heavy Metals in Breast Implant Capsules and Breast Tissue: Findings from the Systemic Symptoms in Women—Biospecimen Analysis Study: Part 2” addresses claims that breast implants may contain heavy metals which could also be contained in the implant capsule and may contribute to the patient’s symptoms. In this study, implant capsule specimens from both implant groups, those reporting systemic symptoms and those not reporting symptoms they attributed to their implants, and the breast tissue of subjects who never had any implanted medical device, were evaluated for 22 heavy metals. None of the subject’s tissue levels exceeded acceptable levels of safe exposure.

Part three of the study, “Microbes, Histology, Blood Analysis, Enterotoxins, and Cytokines: Findings from the ASERF Systemic Symptoms in Women—Biospecimen Analysis Study: Part 3” sought to determine if there are quantifiable laboratory findings that can be identified in the blood, capsule tissue pathology, or microbes that differentiate women with systemic symptoms they attribute to their implants from two control groups. On the day of surgery, blood was drawn and implant capsules (the scar tissue that forms around implants) were sent without the patient’s identify or any indication of which cohort the patient was in, to Eurofins, a lab that evaluates heavy metals, Microgen DX, which evaluated for bacterial and fungal DNA, Johns Hopkins Department of Allergy and Immunology for evaluation for

antibodies to bacterial toxins, and Brown University for microscopic evaluation. Peripheral blood was sent to evaluate for blood counts, inflammatory markers, thyroid function, and cytokines. The findings revealed that although there were a few markers that were statistically higher in the BII group, none were in a majority of subjects that could be used to make a diagnosis or point to a cause of symptoms. The study concluded there are few identifiable biomedical markers to explain the systemic symptoms self-reported by patients with BII.

With over 98% of the BII subjects followed at 6 months, the study concluded that women with symptoms they attribute to their implants do experience symptom improvement after removal of their implants. Ninety-four percent of subjects showed improvement of at least some of their symptoms with a 68% reduction in the number of symptoms reported. The symptom improvement was the same whether the patients had the entire capsule removed or partial removal.

The comprehensive research illustrated in this scientific study published in a peer reviewed journal is good news for patients who have breast implants. If a patient does choose to have her implants removed over health concerns, there is no definitive evidence for the need to have the entire implant capsule removed in the absence of other indications such as capsular contracture, a ruptured implant, or a textured implant. Patients may experience symptom improvement with a shorter, less complicated, less expensive procedure. Additionally, although there were measurable levels of some heavy metals around implants, the levels were below safe levels of exposure, and this should not be used as an indication for total capsulectomy in women considering implant removal for systemic symptoms. Patients considering implant removal for systemic symptoms should consult with a board-certified plastic surgeon to discuss her options. This study allows surgeons to discuss the surgical options using evidence-based data with their patients.

Additionally, although there were measurable levels of some heavy metals around implants, the levels were below safe levels of exposure, and this should not be used as an indication for total capsulectomy in women considering implant removal for systemic symptoms.

Mollenkopf Aesthetic Breast Reconstruction Fund

Now Available Nationwide!

The Aesthetic Surgery Education and Research Foundation (ASERF) is pleased to announce that the **Mollenkopf Aesthetic Breast Reconstruction Fund**, which aids breast cancer patients in completing their aesthetic breast reconstruction journey, is available to patients nationwide.

Made possible through generous restricted donations by Susan & Steve Mollenkopf and matched by the Qualcomm Foundation.



Grants of up to \$5,000

Assist underinsured or uninsured patients in completing a quality aesthetic breast reconstruction following breast cancer.

Ideal Candidates

Women who have had breast reconstruction with unacceptable results and who are deferring surgery due to financial issues.

Use of Funds

Ideally, doctors would donate their surgical skills and the grant money would help cover the patient's operating room fees, anesthesia, deductibles and other related expenses.

The Aesthetic Society and ASERF member surgeons who have patients eligible for a Mollenkopf Fund grant, please view all details and download the grant request form at aserf.org/Mollenkopf.

For Additional Information on the Fund, Please Contact Ivan Rodriguez at: **562.799.2356** or ivan@theaestheticsociety.org



The Aesthetic Surgery Education
and Research Foundation

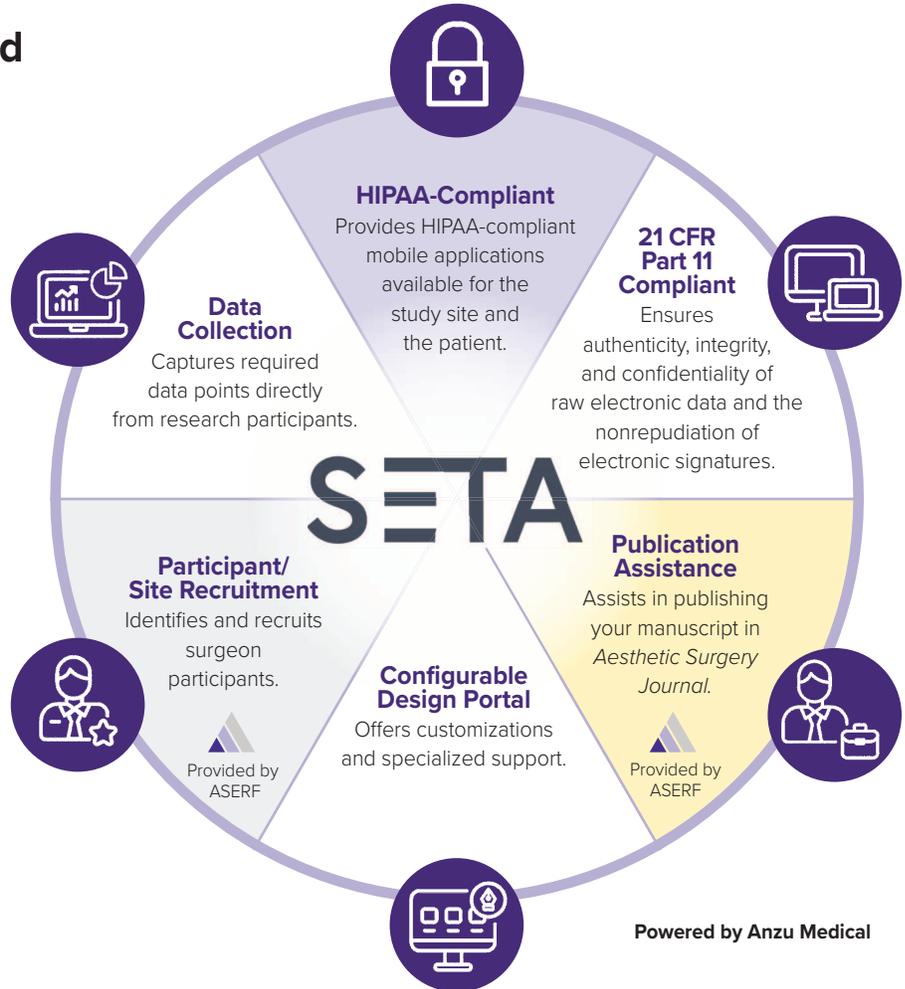
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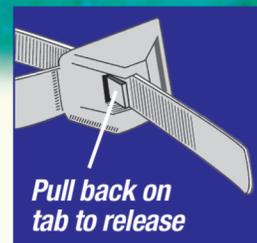


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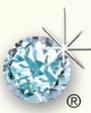
1. Wrap the Breast Reduction Compression Device around the base of the breast and put the band into a loop.
2. Tighten the breast by contracting the band.
3. Release the Breast Reduction Compression Device by pulling back the small plastic tab at the head.

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Douglas S. Steinbrech, MD The Newest member of ASERF's President's Circle

Douglas S. Steinbrech, MD, a 12-year member of The Aesthetic Society who practices in New York City, recently pledged \$50,000 to become the newest member of ASERF's President's Circle, an honor given to the Foundation's largest donors.

Dr. Steinbrech, known as a renowned expert in men's aesthetic surgery, has been an ardent supporter of ASERF since becoming a member in 2010. He recently served as Steering Committee Chair for 2022 ASERF Career Achievement Award recipient Dr. Sherrell J. Aston, helping raise over \$45,000 in donations made in honor of Dr. Aston.

His evolution from ASERF member to major donor came from seeing first-hand, the positive impact findings from ASERF-funded studies had on aesthetic plastic surgery. "I have personally seen, in both me and my patients, how real data from well-controlled ASERF-sponsored studies have improved results in my practice and with many others ASERF and Aesthetic Society members," said Dr. Steinbrech.

Specifically, Dr. Steinbrech cited recent studies on safety in gluteal fat grafting, "which truly made an incredible impact in maintaining the procedure to be allowed to be performed safely in this country," and breast implant studies that are helping "determine what is the real science behind what people are calling 'breast implant illness.'"

The importance of supporting aesthetic surgery research now and in the future, as well as following the example set from current and previous researchers, are priorities for Dr. Steinbrech, who noted, "ASERF's goals with regards to aesthetic surgery research are so important, primarily because we need to continue to be innovators and maintain our position as leaders in our specialty. I feel that it's our responsibility as surgeons who have benefited from the hard work and excellent studies from our great leaders in this specialty, that we give back."

Dr. Steinbrech has opted to pay his pledge in annual installments, one of many options ASERF makes available to its donors.

ASERF to Honor James M. Stuzin, MD and John B. Tebbetts, MD in Miami Beach



James M.
Stuzin, MD



John B.
Tebbetts, MD

The Foundation is proud to announce that not one, but two influential surgeons will be receiving the 2023 ASERF Career Achievement Award. Join us on April 22 in Miami Beach as we honor James M. Stuzin, MD in his hometown, and posthumously recognize John B. Tebbetts, MD, for their contributions to our specialty.

The Career Achievement Award is bestowed upon a plastic surgeon for their significant contributions and commitment to aesthetic plastic surgery. Drs. Stuzin and Tebbetts have dedicated themselves to the specialty and have significantly influenced all of our careers. It is privilege to include them both with the other esteemed Career Achievement Award honorees.

PREVIOUS HONOREES

- 2022 Sherrell J. Aston, MD
- 2019 Robert Singer, MD
- 2018 Scott Spear, MD (posthumous)
- 2017 Thomas Baker, MD and Simon Fredricks, MD
- 2016 Gilbert P. Gradinger, MD
- 2015 Foad Nahai, MD
- 2014 Luis O. Vasconez, MD
- 2013 Fritz E. Barton, Jr., MD
- 2010 Thomas D. Rees, MD



The Aesthetic Surgery
Education and
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Practical advice you can put
to use **today** to help **your**
practice run more efficiently.



What The World Needs Now is a Little More Kindness

By Wendy Lewis

As Harry Styles says:
 “Maybe we can
 Find a place to feel good
 And we can treat people with kindness
 Find a place to feel good...”

NOVEMBER 7–13 IS WORLD KINDNESS WEEK

2022 has been a tough year for many. There is uncertainty about the state of the economy, the war in Europe, fighting for freedom around the world, plus lingering fears of the next strain of Omicron.

The holidays are a great time to show your patients (staff and colleagues too) how much you care about them. Showing empathy and interest in the people around you help to form deep connections in meaningful ways. Let November through December serve as a timely reminder to thank those who have helped you to thrive throughout the year.

When I managed a plastic surgery practice on New York’s Park Avenue, for the holidays I ordered elegant cards to send to active patients and colleagues, including anesthesiologists, nurses, referring physicians, hospital staff, neighbors, doctors who took call, etc. We signed every card by hand and addressed them by hand. It was pricey and time-consuming, but it was always worth it. It was our way to say, ‘we care about you’ or ‘we’re thinking of you,’ and it paid for itself in Karma.

Although many plastic surgeons have regional and global practices, your bread-and-butter patients tend to live within a drivable radius.

HERE ARE 5 WAYS TO END THE YEAR BY SHOWING A LITTLE KINDNESS

1. Donate to a charity (or a few) that resonates with you and your patients. My choice is (CEW) Cosmetic Executive Women’s Cancer and Careers. I was the first editor of the site, and it holds a special place in my heart to have worked on something that helped so many women navigate their cancer experience.
2. Local toy drives are a great way to give back to your community. Hospitals often



Visit a local senior center, synagogue, or church to give a 30-minute talk on a topic of interest, like ‘Live Well, Feel Good.’ Bring festive gift bags with some skincare products to leave behind.

CHOOSE Kindness

3. Write a check to the hospital where you are an attending to support their overworked, underpaid and often underappreciated staff, or donate to a greater cause, like American Nurses Foundation or Project Hope.
4. Visit a local senior center, synagogue, or church to give a 30-minute talk on a topic of interest, like ‘Live Well, Feel Good’. Bring festive gift bags with some skincare products to leave behind.
5. Gift certificates are always welcome. Choose your top 25 or 50 or 100 patients; the biggest spenders, most loyal, or refer the most clients. Print a VIP gift card for a meaningful amount; \$100 is a good number. Deliver these in a personal way by email from the surgeon and/or practice manager. Designate what it can be applied to, such as treatments with no consumables, to keep your costs down.

It may be obvious, but these live events and donations are also good opportunities to generate content for your social channels but keep ‘kindness’ as your primary mission to keep it real.

Wendy Lewis is the Founder & President of Wendy Lewis & Co Ltd Global Aesthetics Consultancy since 1997, a marketing communications boutique in New York City specializing in beauty, wellness and aesthetics. Their clients include skincare, medical devices, start-ups, aesthetic practices and medspas. An award-winning writer, she serves on the Editorial Board of “Prime International Anti-Ageing Journal,” and regularly contributes to “Aesthetic Society News,” “Practical Dermatology,” “Modern Aesthetics,” and many other publications. Wendy is a frequent speaker, course instructor, and presenter at conferences and webinars in the US and globally. She is the founder of the LinkedIn group, Global Aesthetics Professionals, with over 5,000 members. Her first textbook, Aesthetic Clinic Marketing in the Digital Age (Taylor & Francis) will launch a second edition in 2023.



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Recession Ready or Not?

By Karen Zupko

“It sure doesn’t feel like a recession over here. We’re booked out for the next three months. The phone hasn’t stopped ringing.”

You may share the same sentiment. Perhaps 2023 looks quite bullish from your perspective. While it’s true your practice is busier now than prior to and during the pandemic, clouds are gathering on the horizon.” Many have a false sense of security. Why are we raining on your parade?

Already there are “canaries in the coal mine” signaling trouble. As the Fed raises interest rates, and portfolios shrink, wallets for luxury items and services are tightening. Patients are beginning to “postpone” their surgery, some are reluctant to book too far in the future, cancellations just before the pre-op are leaving holes in the surgery schedule.

After over 30 years consulting with plastic surgery practices, we’ve guided surgeons through every type of economy—including the current situation. Here are steps we strongly recommend you take immediately to sidestep a slowdown.

ACTION STEP: Give yourself more time to fill an opening. Move the pre-op out to 21 or 28 days.

This is especially critical for a 4-hour case. You need time to get another patient off the move up list and prepared for surgery.

ACTION STEP: Mine the list of previously seen patients.

Staff tell us they are reluctant to stay in touch with patients who didn’t schedule. *“If I follow up with patients and they want to book, I have no place to put them.”* Not if, but when your schedule thins out...where have all these prospective patients gone? Who will fill the cancellations mentioned above? Follow up passivity is now passe. It takes finesse to maintain relationships.

Book the follow up action with the patient before they leave the PCC’s office.



Follow up passivity is now passe. It takes finesse to maintain relationships. Book the follow up action with the patient before they leave the PCC’s office.

ACTION STEP: If you don’t charge for the consult when the appointment is made—start.

You can’t afford “no shows” in this environment. Free consultations also damage your brand by signaling there is no value to your time.

ACTION STEP: Don’t assume financing is just for middle class patients.

The Wall Street Journal and New York Times business sections report soaring interest rates are causing even those with six figure incomes, to rethink where and how they shop.

Don’t ignore the overall economic reality facing your potential and existing patients. If you Googled “credit card interest rates” on November 21st the answer was 19.14%. A friend with a pristine 800 credit rating has a Mastercard with a 22% interest rate. *This doesn’t matter if you pay off the bill at the end of the month—but that’s not the case for many patients.*

Resolve to be better informed about how financing can work for your practice. Be certain your PCC can capably explain financing to every patient. Make it possible for patients to schedule and for you to stay in the operating room.

ACTION STEP: Step up reminders about injections and med spa treatments.

Many practices stopped sending out injection reminders. We who weathered 2008 remember the economic freeze. Non-surgical solutions and insurance cases came to the rescue, keeping plastic surgery practices afloat.

BOTTOM LINE

Take action now. And if the “canaries” are wrong? You’ll be in better shape for even greater success. But if they are right, your bottom line is secure. John F. Kennedy said it best: **“The time to repair the roof is when the sun is shining.”**

And the forecast is cloudy.

Karen Zupko is a regular contributor to ASN who participates in the annual meeting regularly. Her firm KZA offers training for PCCs and other staff, as well as operational consultations.

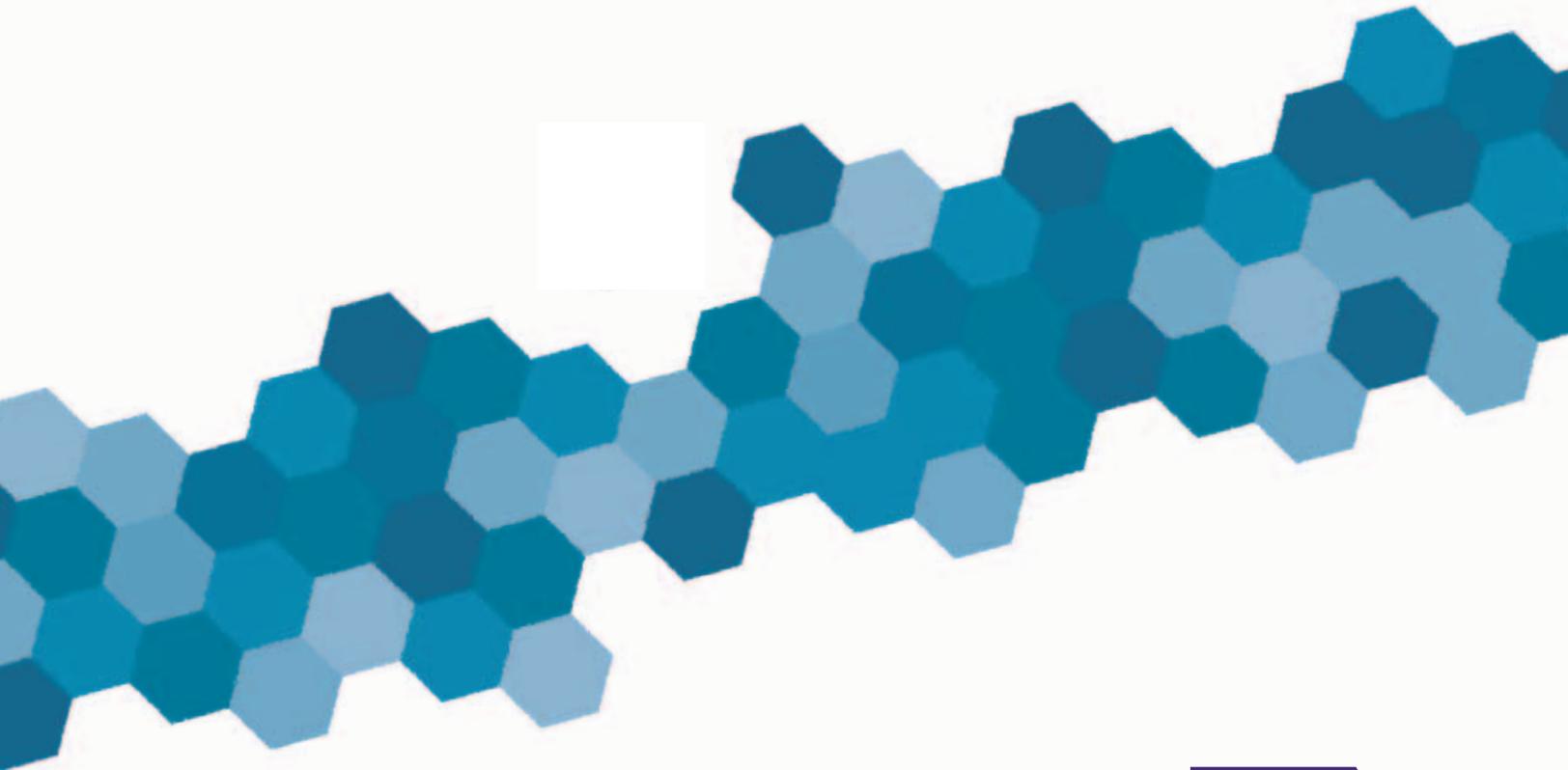
If you don’t charge for the consult when the appointment is made—start. You can’t afford “no shows” in this environment. Free consultations also damage your brand by signaling there is no value to your time.



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Leveraging Your Google Business Profile to Drive Revenue and Growth

By Peter Houtz, Vice President of Sales at Plastic Surgery Studios

Formerly known as Google My Business (GMB), Google Business Profile (GBP) is a vital and often underused marketing tool that can significantly help local businesses and practices just like yours gain better visibility on Google.

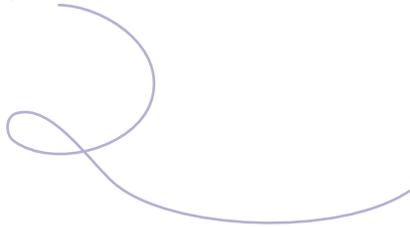
When maintained and optimized, your GBP can help you get to that all-important page one placement on Google searches for your area. And when this happens, you have a better chance of increasing both revenue and growth.

WHAT DOES A GBP DO?

A GBP is a Google tool that gives an overview of your business and provides important information, including the name of your practice, its location and hours, and how to contact you (phone, website, messaging, etc.).

In addition to being a place to highlight reviews, photos, posts, services, products, and answers to frequently asked questions, it also allows you to communicate directly with your potential customers. All of this information adds legitimacy to your business.

In these fast-paced times, consumers want things to be as easy as possible. They don't want to hassle with searching for the information they need. With a GBP, they have all the critical information they need at their fingertips, so they can easily choose what to do next.



Many businesses never claim their GBP. So if you claim yours, you will automatically be one step ahead of some of your direct competitors. However, you will be one step behind if you don't claim your GBP but your competitors claim theirs.

WHAT INFORMATION IS NEEDED FOR A GBP?

One of the best parts of a GBP is how easy it is to create. Simply put, a few pieces of standard information are all you need to complete the initial setup. After that, you just need to maintain and update your profile. To start, you will need to fill out your:

- Business name, location (address), phone number, website (URL), operating hours, description of your practice, category, and attributes.

Once you have created your profile, you will want to update it regularly to ensure it remains optimized. The best areas to update on your GBP include the following:

- Review responses: Everyone relies on reviews, which are essential for your GBP. Research studies have reported that over 80 percent of consumers trust online reviews as much as a recommendation from a friend or family member. What's even better is when you respond to those reviews. Your response to a review adds credibility and legitimacy to your brand.
- High-resolution images (Google does not allow nudity)
- Your latest posts (including specials)
- Any changes to your practice (including hours or contact information)

WHY SHOULD MY PRACTICE CLAIM OUR GOOGLE BUSINESS PROFILE?

Your GBP is FREE! There is absolutely no charge to create or maintain your GBP. So, essentially, claiming your profile equates to free advertising for your practice, advertising that could potentially lead to Google's 3-pack on page one.

These days that is hard to come by, especially on Google.

HOW ELSE CAN A GBP HELP MY PRACTICE?

Nearly 5.5 million Google searches are performed each day, and almost half have a local intent.

Many businesses never claim their GBP. So if you claim yours, you will automatically be one step ahead of some of your direct competitors. However, you will be one step behind if you don't claim your GBP but your competitors claim theirs. If you are not using your GBP, you may be missing out on many leads that could turn into significant revenue.

WHAT'S THE CONNECTION BETWEEN A GOOGLE BUSINESS PROFILE AND INCREASED REVENUE?

A well-optimized, enhanced GBP increases your visibility on Google. In fact, according to Google studies, consumers are 70 percent more likely to visit a business if they have a GBP.

This visibility has been linked to more traffic, leads, and sales. Luckily, Google is in the process of adding more features and post types. Additionally, they will show more local listings on the search engine results page (SERP) along with an enlarged map. This means that you have a better chance of getting your business included.

A GBP increases the ease for potential local consumers to contact you via your website, phone, email, social media, or even text messages (which is becoming increasingly more popular). It allows you to share appropriate and important information with them and answer their questions in real time.

It's simple: if you attract more local visitors, you have a much better chance of gaining influence, which can increase traffic and sales.

A GBP is free and can significantly increase visibility. But, you must put some effort into maintaining it and keeping it optimized. Make sure you are specific and clear regarding what services your practice offers, and update your GBP regularly with posts, images, and responses to reviews.

Peter Houtz is the Vice President of Sales for Plastic Surgery Studios, a full-service marketing agency serving the aesthetics industry since 1998. Peter is a frequent presenter at The Aesthetic Meeting and can be reached by phone at (909) 758-8320 or by email at peter.houtz@plasticsurgerystudios.com.

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7 Tips for Choosing an SEO Agency

By Keith C Humes, CEO Rosemont Media, LLC

As a plastic surgeon, you may already understand the importance of things like SEO and social media marketing, but you likely can't keep up with the latest trends and best practices. That's where a marketing agency can come in handy—however, it can be difficult to tell which one is the best choice for your practice. To help narrow your search, we've provided some helpful tips:

1. DETERMINE YOUR BUDGET

When it comes to marketing (much like plastic surgery), you get what you pay for. The cost of a website can certainly vary, but a solid website can do wonders for your marketing, so we recommend dedicating a decent portion of your budget to a new or redesigned website.

2. LOOK FOR AN AGENCY THAT SPECIALIZES IN PLASTIC SURGERY

Many marketing companies work with various business types simultaneously, so it can be extremely beneficial to find one that specializes in your industry. They'll know how to cater to your unique business model and apply the latest SEO techniques in a more effective way.

3. CHECK THEIR REVIEWS

Similar to how your patients research potential providers, customer reviews can help you familiarize yourself with what to expect. Take note of the things that are frequently highlighted in the reviews to get an idea of a typical client experience.

4. INSPECT THEIR WORK

In addition to reading reviews, we suggest looking through their portfolio and reviewing the work they've produced for other clients. If



Not every SEO firm is going to be a good fit, and vice versa, so it's a good idea to figure out what your marketing goals are and see if they match what is being offered. Furthermore, set realistic expectations: if your budget can't accommodate the types of services they recommend to reach the level of success of their other clients, you're unlikely to get the same results.

possible, find a few established clients in markets comparable to yours and see how they are ranking in search engine results.

5. ASSESS YOUR GOALS

Not every SEO firm is going to be a good fit, and vice versa, so it's a good idea to figure out what your marketing goals are and see if they match what is being offered. Furthermore, set realistic expectations: if your budget can't accommodate the types of services they recommend to reach the level of success of their other clients, you're unlikely to get the same results.

6. ASK QUESTIONS

Speak directly to whoever will be managing your account and ask for case studies and examples of a typical marketing plan. Ask if they provide custom or customizable websites, as well. This can mean all the difference: the end product will either be personalized or cookie-cutter.

7. WATCH OUT FOR RED FLAGS

Keep an eye out for any red flags, such as black hat tactics, a lack of transparency/communication, or lofty promises. Make sure you'll also be the owner of your own website, so you'll have more freedom and flexibility if you choose to work with another company later on.

Your online presence plays a large role in the success of your practice, so selecting the right marketing company is an important decision. Take your time, do your research, and make sure you feel comfortable working with the agency you ultimately choose.

To learn more about Rosemont Media and the work we do, please visit rosemontmedia.com or call (800) 491-8623.

Keith Humes is Founder/CEO of Rosemont Media, LLC, a San Diego-based digital marketing agency. As the founding Aesthetic Society Alliance Partner, the firm has helped numerous members successfully navigate the rapidly evolving digital marketing landscape with innovative and effective SEO strategies, social media optimization, and customized website development.

In addition to reading reviews, we suggest looking through their portfolio and reviewing the work they've produced for other clients. If possible, find a few established clients in markets comparable to yours and see how they are ranking in search engine results.



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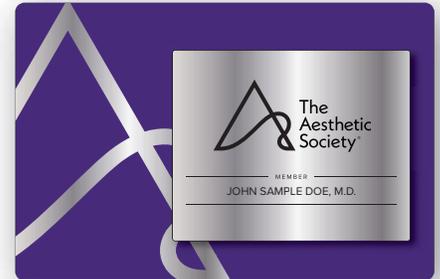
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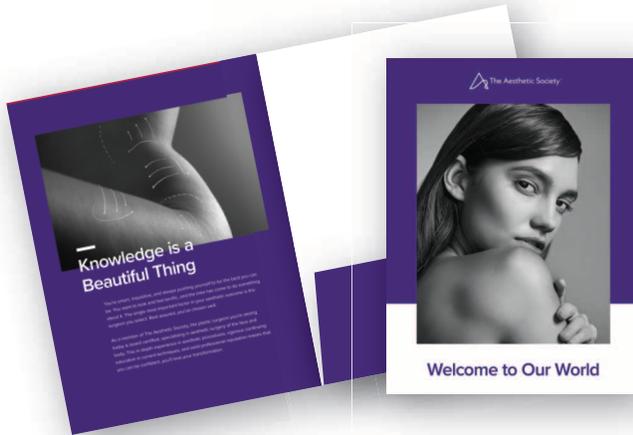
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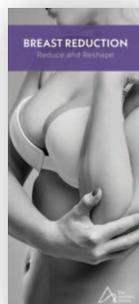


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How Do I Choose an Insurance Company and What Sort of Policy Should I Have?

By Harry K. Moon, MD, FACS

Many plastic surgeons going into practice do not realize that there is a fairly wide choice in malpractice insurance. When shopping around it will become clear that premiums can vary significantly from one company to another.

Most experienced physicians would recommend seeking a company that is professional, responsive and ready to alleviate the twin burdens of fear and guilt from the shoulders of their client. It is gratifying to be reassured that you are not alone, and that there are friendly, yet highly qualified, specialists waiting to defend you and allow you to go on practicing medicine. The best recommendations usually come from surgeons who have been defendants themselves!

Broadly speaking there are two types of insurance policy: *claims-made* and *occurrence*. The former provides insurance coverage for claims resulting from services

provided within the policy's period of coverage and that are reported during the period of continuous coverage. If the individual changes his or her insurance company, claims arising from services during the period of coverage yet reported *after* its termination are not covered. You can purchase this coverage from your next insurance company, or, to deal with this situation, the surgeon can purchase a *tail endorsement which enables a claim to be covered after termination of the professional liability policy*.

An *occurrence policy*, on the other hand, covers claims made not only during the period that the policy is in effect but also claims resulting from incidents that occurred in that period that are reported after the policy terminates. A tail endorsement is unnecessary here, but a *nose policy* may be required to cover incidents occurring during a previous *claims-made* policy period and reported after its termination. Generally, occurrence policies are more expensive than claims-made policies.

Whether a claims-made or occurrence policy best suits your practice the financial stability of your insurance is equally important. Your insurer cannot pay indemnity payments should it become insolvent. This is another important consideration for you while choosing your liability carrier. Be sure to ask for coverage and financial stability details when shopping for your next Medical Liability policy.

For more information, please visit our website at www.amsrrg.com/solutions/preferred-programs where you can click on the "Request A Quote" link or please contact Christopher Edge at news submission@amsrrg.com.

Christopher Edge is Vice President of Preferred Programs and New Business Development at AMS Management Group

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Don't be Blindsided by Staff..

By Catherine Maley, MBA

The biggest challenge you face in running your own practice is staff. Hands down.

That's because you are dealing with human beings full of beliefs, thoughts and feelings. Staff is a moving target that is always changing.

Their circumstances change. Their feelings about work change and it goes on and on.

This affects you big time when you are building a team you are proud of and can count on to have your back.

But here's what happens too often...

You have a staff person who simply no-shows, never to be heard from again.

Or your key employee hands in their resignation and will be leaving at the end of the week.

Or someone who was an excellent employee suddenly goes bad and you have no idea why.

But here's the thing... this should not be a surprise and you should not be blindsided.

Things don't just happen. There are always signs. But you are so busy and focused on running a practice that you often miss them so here's what you do:

Things don't just happen. There are always signs. But you are so busy and focused on running a practice that you often miss them so here's what you do: arrange a regular Coffee Coaching Session with each employee.



This coffee coaching session acts as a sounding board, so your staff feels heard and understood and that you care about them as an employee and as a person.

COFFEE COACHING SESSION

Hopefully, you have a manager who works with the staff, so have them take each staff person separately out for coffee and away from the office. A local Starbucks works well since that's a relaxing place.

You can do this twice per year to just check in or do it when you sense something is off with that staff person and you want to address it before it grows into something more serious.

This is not an annual review where the staff will expect a raise. This is a simple coffee coaching session where you are checking in with the staff person to see how things are going with them.

First, have them complete a simple skills self-assessment as they see it. Have them rate themselves 1-5 for skills such as punctuality, attitude, being a team player, quality of their work, customer service skills, willingness to chip in and so on.

Check their answers against yours and discuss the ones where you came up with widely different ratings to hear their point of view and they to hear yours. It's interesting and important to see how they perceive themselves vs. how others perceive them.

Now ask open-ended questions to get their feedback such as:

- What additional value have you brought to your position?
- What are you struggling with?
- What is our biggest potential for growth as you see it?
- How are you doing personally?

This is where you learn what is happening in the office that you might not know about and/or what is happening in their personal lives that is affecting their work.

This coffee coaching session acts as a sounding board, so your staff feels heard and understood and that you care about them as an employee and as a person.

That's how you mitigate the blindside.

Catherine Maley, MBA is a cosmetic practice consultant, speaker, trainer, blogger and podcaster. Her popular book, "Your Aesthetic Practice/What Your Patients Are Saying" is read and studied by plastic surgeons and their staff all over the world.

She and her team specialize in growing plastic surgery practices using creative patient attraction, conversion, follow up and retention strategies as well as staff training to turn team members into converting rock stars.

Visit Catherine for Free resources at www.CatherineMaley.com or Instagram @catherinemaleymba.

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Three Financial Actions to Take to in Uncertain Times

By David Mandell, JD, MBA and Adam Braunscheidel, CFP®

During a volatile market environment like we find ourselves in today, many investors, including plastic surgeons, feel a powerful drive to take action in response.

When markets are down sharply, there is a common temptation to sell stocks in an effort to reduce risk. While selling stock creates a sense of control that can make people feel better at the moment, it is often exactly the wrong thing to do during a market downturn.

For plastic surgeons who are long-term investors, trying to time market tops and bottoms is a fool's errand. The evidence overwhelmingly demonstrates that most investors diminish their long-term returns when trying to do so. They are more likely to chase the market up and down and get whipsawed, buying high and selling low. Market timing, while tempting, involves getting two nearly impossible decisions right: when to sell and when to get back in.

Even when following the advice to remain invested during a market downturn, an investor does not have to sit passively on the sidelines and do nothing. In this article, we suggest three actions investors can take to keep their financial goals on track during periods of market volatility.

KEEP A LONG-TERM PERSPECTIVE

One of the important benefits of working with an experienced advisor is that they can help you manage your financial situation in a holistic way, which will enable you to stay disciplined and true to your long-term investment strategies. This is true both for your existing investments as well as any new investments you plan to make over time. Rebounds can happen quickly and the cost of missing them is significant over time. Recognizing this, most advisors will try to help their clients remain invested and do so at a reasonable allocation level.

USE MARKET DECLINES AS AN OPPORTUNITY TO HARVEST TAX LOSSES

A downturn in prices isn't what we hope for when investing. But one way to make 'lemonade out of lemons' is to sell securities that are down from their purchase price. By



As one harvests losses, the proceeds from those sales are used to purchase investments in a similar category, so the portfolio allocation and opportunity to catch an upswing remain intact.

"harvesting" those realized losses they can be used to offset taxable realized gains. This tax-saving strategy can be helpful today and possibly for many years into the future since realized capital losses can be carried forward on your tax return. As one harvests losses, the proceeds from those sales are used to purchase investments in a similar category, so the portfolio allocation and opportunity to catch an upswing remain intact.

TAKE BREAKS FROM THE 24/7 NEWS CYCLE

Many plastic surgeons would do well to take time away from the financial media. The omnipresent news feed is focused on attracting attention, and benefits advertisers, not investors. It can be overwhelming to the viewer, which can lead to unnecessary stress and anxiety. It is important to stay both physically and mentally healthy so you can make the best decisions for your overall benefit.

CONCLUSION

For many plastic surgeons, watching investment values plummet leads to an emotional decision to do *something*, often leading to behaviors which can be detrimental to financial goals. In this article, we outlined three actions to take during a market downturn that can positively impact one's long-term wealth planning.

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David Mandell, JD, MBA, is an attorney and author of more than a dozen books for doctors, including "Wealth Planning for the Modern Physician." He is a partner in the wealth management firm OJM Group (www.ojmgrou.com), where Adam Braunscheidel, CFP® is a wealth advisor. They can be reached at 877-656-4362 or mandell@ojmgrou.com.

Disclosure:

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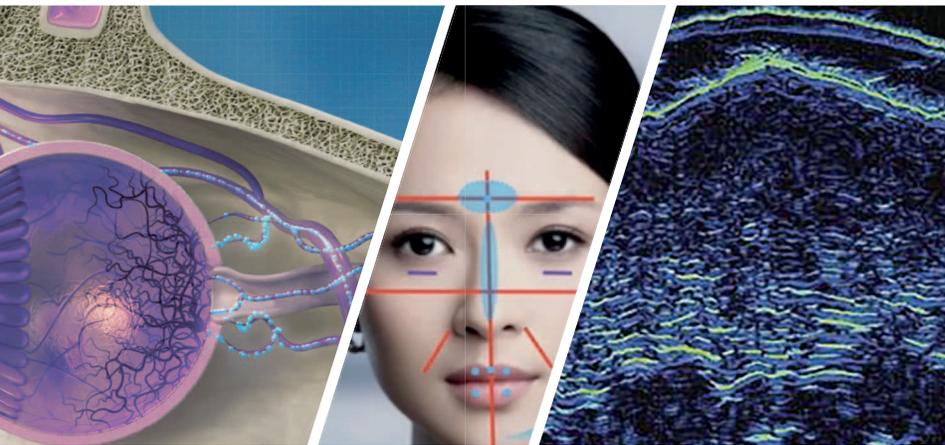
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Creating a Positive Team Culture

By Terri Ross, Terri Ross Consulting

Traveling around the country and speaking at virtually every plastic surgery and aesthetics conference, as well as reviewing all the surveys to come out of the aesthetic industry, four things have become very apparent in terms of what the industry needs and wants: leadership, culture, training and understanding their data.

Because employee turnover is so high, it's extremely important to establish a positive company culture that:

- Encourages positive attitudes
- Builds trust and confidence
- Creates shared values
- Establishes common goals
- Attains buy-in for team responsibility for overall revenue growth and excellent customer service

WHAT IS COMPANY CULTURE?

Company culture is defined as a set of shared core values and practices that define an organization, both internally for employees and externally as part of its public image.

The more clearly defined and consistent a company's culture is, the more likely they are to retain top talent, make work feel purposeful and have employees who feel motivated, passionate about their work, engaged, more productive and feel like they're a valued member of the team.

A strong company culture strengthens performance and recognizes and celebrates the quality of work employees produce. It also empowers employees to work independently and take pride in their work as well as to feel passion and purpose which is a strong motivator.

When you treat your employees like partners in your business, everyone becomes invested in the success of the practice. People want to feel heard and needed. When you nurture your employees and find opportunities for them to grow so they don't feel stagnant, they tend to stick around for the long haul.

CREATING A COMPANY CULTURE

Some of the first things you and your team should create together to establish your company culture are:

- A **Mission Statement** that communicates the purpose of your practice. Most practices have this, but the real question is, do your employees know what your mission statement is and are they able to express it to patients.
- A **Vision Statement** that provides insight into what the company hopes to achieve or become in the future.
- A **List of Core Values or Value Statement** that reflects the organization's core principles and ethics.
- A **Culture Handbook** that defines what it means to be part of your team and what you are asking them to commit to (for example getting to work on time, open lines of communication and communicating respectfully, maintaining healthy work relationships, doing your best in the moment based on the best knowledge you have, providing five-star customer service, using positive language that builds people up vs. tearing them down, leave gossip at the door, etc.).

BECOMING THE LEADER OF YOUR COMPANY CULTURE

Great leaders are not born. They are developed and cultivated. They should strive to always maintain a level of emotional intelligence and trust their intuition. As a leader, you need to show up and be your best self every day. As you grow as a leader, you must also continue to nurture, build, and maintain your company culture.

It is important that your entire team:

- Understands the vision and what is expected of them
- Commits to the vision
- Always maintains focus on the vision
- Is persistent in their drive toward excellence
- Takes action to reach established goals

As an effective practice leader, you need to be able to:

- Problem-solve
- Develop people
- Make quick decisions
- Communicate to connect
- Influence others
- Delegate effectively
- Give feedback
- Give praise
- Encourage diversity of thought
- Creates a culture of trust
- Foster leadership in others

I challenge you to look at your own internal company culture. Think about what you want to do differently as you move into 2023. Think about what changes and improvements you would like to make. Think about creating a culture handbook and going through and defining your vision, mission, focus and purpose, so your team can be in alignment.

I know it is easy to use the excuse you don't have time, or your team doesn't have time. Trust me. If you carve out the time, I promise it will be worth it. As always, my team and I are here to help. APX Platform's operations course take a deep dive into establishing your company culture. If you would like to learn more and schedule a discovery session, please visit apxplatform.com.

Terri Ross, an official partner and trainer for AmSpa, offers distinct programs to help you launch or grow your medical aesthetic or plastic surgery practice. She and her team bring a combined 30 years of experience achieving over 600% growth with clients in the most competitive markets in the world, in addition to launching over 40 new medical practices across the country.

When you treat your employees like partners in your business, everyone becomes invested in the success of the practice.

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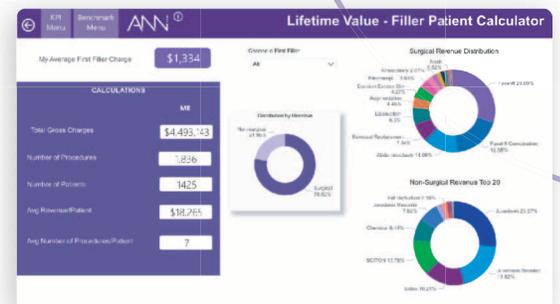
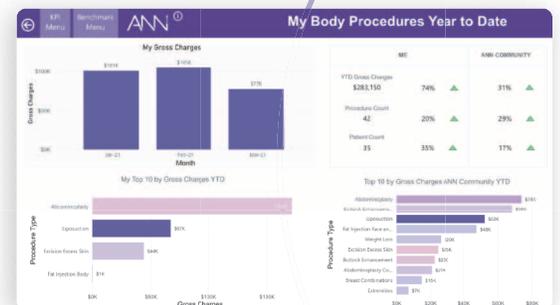
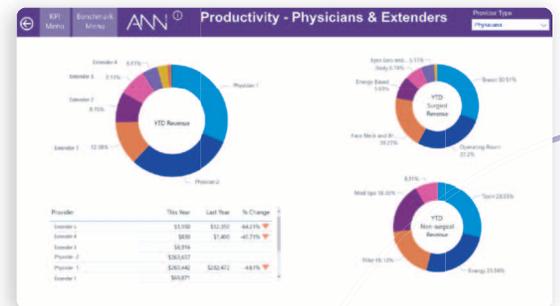
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The Straight & Narrow—Ethical Dilemmas: When Ads Don't Add Up & Dating Detriments

By Joe Gryskiewicz, MD

Editor's Note: This article is designed to keep The Aesthetic Society members aware of the real-world ethical quandaries that plastic surgeons commonly face.

The columnist, Joe Gryskiewicz, MD, FACS of Minneapolis, Minnesota, currently has over 35 years in practice and has written ethics columns for over a decade. He is past president of ASERF, and The Rhinoplasty Society, a Trustee of ASERF and sits on The Judicial Council for ASAPS. He is an adjunct professor at the University of Minnesota School of Dentistry Craniofacial Cleft Palate Clinics. Readers are encouraged to submit questions directly to "Dr. Joe" at drjoe@tcplasticsurgery.com. Names will be withheld, and the views expressed in this column are those of the author.

Question

A fellow plastic surgeon in my community is featuring a photo of a patient in an advertisement for special laser liposuction of the neck. There is no indication in the ad that the patient also had a facelift and chin implant—which is pretty obvious in the photos from a surgeon's perspective!! Is that OK?

Answer

This advertisement you describe sounds misleading. The Aesthetic Society Code of Ethics prohibits any ad that is a misrepresentation of fact, fails to state any material fact, or is likely to create false or unjustified expectations of favorable results. I would venture to say that a facelift and chin implant would qualify as material facts in this situation! The Code of Ethics further prohibits using images that falsely or deceptively portray the recovery from a condition and, as a result, creates unjustified expectations of favorable results.

I would hazard a guess that your colleague is probably highlighting the new laser he or she just purchased and is looking to drum up patients to offset its cost. This makes business sense, but it's not sensible. I would advise you to submit your summary—including a copy of the actual ad—to the Ethics Committee. Quote The Aesthetic Society Code of Ethics section to substantiate your case, which is: 3.01 Unethical Publishing (a) A member, whether personally or through affiliated intermediaries, and whether by act or omission, shall not publish, which term includes all activities and forms of communication, anything which is false, fraudulent, deceptive, or misleading, whether or not such publishing is for personal, commercial or practice-related purposes.

The Aesthetic Society Code of Ethics prohibits any ad that is a misrepresentation of fact, fails to state any material fact, or is likely to create false or unjustified expectations of favorable results. I would venture to say that a facelift and chin implant would qualify as material facts in this situation! The Code of Ethics further prohibits using images that falsely or deceptively portray the recovery from a condition and, as a result, creates unjustified expectations of favorable results.

Have an ethics question for Dr. Joe? Email ethics@theaestheticsociety.org

Question

I performed a breast augmentation on a woman a year ago. Low and behold, I bumped into her at the gym yesterday, and we started talking. She's really, really nice—and she looks great! My divorce was finalized last month, and I'm interested in asking her out. It's been a year since her procedure; is that long enough to keep it from raising ethics concerns?

Answer

There is an old bluegrass song titled "There's More Pretty Girls Than One!" Dating per se is not the problem, but another song title is perhaps more germane to potential problems: "Breaking Up is Hard to Do." I will play Devil's Advocate here as we both know that if the relationship heads south... your previous doctor-patient relationship could paint a huge target on your back. Therefore, you need to ask yourself two questions before heading down the path of no return:

Question 1: Is it ethical for you to date a former patient?

Question 2: Is it smart?

I think you can guess the answer to No. 2.

Regarding Question 1, technically you must discharge a patient before forming a first-time, one-to-one social relationship. How does her chart read? Does your last note state: "Patient discharged (from the practice)"? Or does it state: "RTO PRN?" The statement "RTO PRN" implies she's still your patient. This entry can be construed to mean your "doctor-patient" relationship still exists. N'est-ce pas?

Disclaimer: Dr. Joe's opinions aren't those of the Ethics Committee or the Judicial Council.



CULTURE OF SAFETY

Putting
Patient Safety
First Benefits
Everyone

The Aesthetic Society's
Patient Safety Committee
would like to remind you that
an **increased focus** on patient
safety leads to **enhanced**
surgical performance and
efficiency which ultimately
impact your **bottom line**.



Patient Safety in Chin Augmentation with Implants

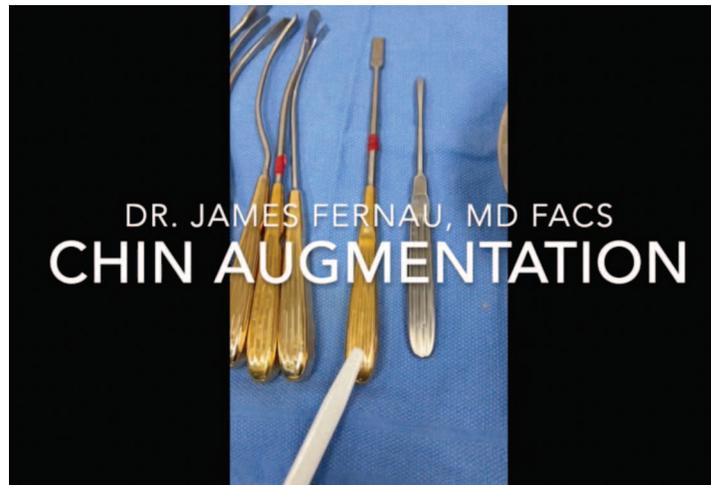
By James Fernau, MD, FACS



CULTURE
OF SAFETY



Scan the QR code
above to watch Dr.
Fernau's video on
chin augmentation.



A chin implant can be considered a permanent volumizer and/or the ultimate permanent filler. The most important patient safety consideration in this discussion will be release of the ligaments which are attached to the bilateral tubercles of the mandible. These ligaments must be released at the periosteal level to prevent the chin implant from angling towards the mental nerve foramen. It is essential the placement of the chin implant be at the lowest level of the mandible as possible. Silicone chin implants have a mild design flaw because the lateral most extent of the implant tends to angle in a superior direction; therefore, it is essential to release the ligaments at the tubercle of the mandible in the midline and keep the dissection low and parallel to the mandible and the lateral dissection must keep the pocket tight. Using sterile sizers is definitely recommended prior to placing the permanent silicone chin implant.

There are various types of chin implants.

The one discussed in this article is a silicone chin implant by the company Implantech. This implant is a soft flexible silicone elastomer and is the most common implant used worldwide. A second implant which can be used is made of calcium hydroxyapatite and is very hard and this is made by a company called Medpor. The third less commonly used implant is called a Gore-Tex implant and is made of polytetrafluoroethylene or ePTFE. Titanium implants are available and are generally not used for cosmetic purposes.

I educate my patients thoroughly on all the types of implants used and all of the various complications. They watch an animated instructional video before the consultation which is available on my website and during the consultation I have them watch a brief video of the actual surgery itself.

The most important patient safety consideration in this discussion will be release of the ligaments which are attached to the bilateral tubercles of the mandible. These ligaments must be released at the periosteal level to prevent the chin implant from angling towards the mental nerve foramen. It is essential the placement of the chin implant be at the lowest level of the mandible as possible.

Please note that prior to taking the patient to the operating room, I confirm the use of the enhanced recovery after surgery (ERAS) protocol and the decontamination protocol which I have written extensively about in this newsletter. I degrease the skin with alcohol and do a skin prep with chlorhexidine prior to the general preparation in the operating room. I also have the patient rinse orally with a mouthwash and Chlorhexidine gluconate 0.12% oral rinse.

After the patient is marked carefully with a mandibular sizer on the external skin of the chin, they are then taken to the operating room and placed in the supine position. Intravenous antibiotics are given 30 minutes prior to the incision. Additionally, I give 1 g of intravenous tranexamic acid slow intravenous push (to prevent hypotension). The tranexamic acid decreases bruising, swelling, inflammation, pain and redness.

Using specific equipment can help the safety of this operation. Implantech markets

three periosteal elevator's and the medium size is optimal to elevate the periosteum off of the mandible and to release the ligaments at the tubercle of the mandible. Using a back-and-forth motion (called the Waddle technique) on the bone and under the periosteum prevents tearing the periosteum. Additionally, an Aufricht retractor placed parallel to the lower most border of the mandible is quite helpful to dissect the pocket. Using at least 2.5 loupe magnification and brilliant headlight illumination makes the dissection safer with improved visualization. A bloodless field is helpful. Using 10 ml of 1% xylocaine with 1:100,000 epinephrine mixed with 10 ml of 1/4% marcaine with 1:200,000 epinephrine and 2 ml of tranexamic acid make an approximate 1% solution and waiting 10 to 15 minutes prior to infiltration creates a near bloodless field. Using hydrodissection infiltration under the mandibular periosteum makes the dissection much easier. Using neurosurgical pledges soaked in 3% tranexamic acid (approximately 10 ml of tranexamic acid mixed with 10 ml of sterile saline) also contributes to near perfect hemostasis.

Prior to implantation I soak the sizers, permanent implant and all sutures in half strength Betadine followed by triple antibiotic solution (Cefazolin 1 gram, Gentamicin 80 mg, Clindamycin 900 mg all mixed in a 250 ml bag of sterile saline). I use Phase One to irrigate the pocket to prevent infection.

Continued on Page 76

Patient Safety in Chin Augmentation with Implants

Continued from Page 75

A Chevron incision is made with a 15-blade knife with less than 1 cm limbs keeping the incision extremely small. After the mentalis muscle is divided with the Bovie cautery with a guarded Colorado tip the medium size Implantech elevator is used to release the strong ligaments off of the tubercle of the mandible. As you can see in the video linked on the previous page, I start on the patient's left side. The key to the entire operation is to carefully and meticulously and patiently release this very strong ligament off of the Mandibular tubercle. There is one on each side. In the video, I started on the patient's left side and released the mandibular tubercle ligament first on the left side and the dissection is then very easy to the region you have marked on the edge of the mandibular implant externally which is generally in the region of the mandibular jowl. After releasing the strong mandibular tubercle ligament, the Aufricht retractor can be inserted to complete the dissection staying parallel to the lowest portion of the mandible. Using neurosurgical pledgets 3% topical tranexamic acid can be placed after the pocket is dissected and left in place while you are dissecting the opposite side. Please remember topical 3% tranexamic acid works best when applied for at least five minutes. After the dissection is completed on both sides the sizer can be inserted and checked for size, shape, and symmetry. Please note that prior to placing the sizer I irrigate the pocket with 10 ML's Phase One on each side. The actual mandibular chin implant is then moved from the half strength sterile Betadine and rinsed with the triple antibiotic, and I again rinse each pocket with 10 ML of Phase One just prior to placement of the actual mandibular chin implant. The area of the chin implant and the neck are re-prepped with either Betadine or chlorhexidine just prior to implantation. The chin implant midline is marked on the patient and noted on the implant and using the Aufricht retractor and with the aid of hemostats and an assistant the



implant is easily placed into the pocket. It is important for the assistant to stabilize the implant near the midline while you are inserting the opposite wing of the implant. This avoids the implant "flipping out" of the pocket. If needed, the lateral wings of the implant can be trimmed with scissors.

Before securing the implant in the midline please dissect the subcutaneous tissue off of the mentalis muscle to allow for a meticulous layered closure. The implant is then secured in the midline with a permanent 4-0 white braided polyester suture (Mersilene). The suture is first placed through the periosteum and then through the implant on the left side of the implant and then back through the right side of the implant at the same level and then through the periosteum and tied securely. This prevents a rocker deformity of the implant and holds it securely in place. As an alternative one could use a self-tapping 7 mm screw. I have not found this necessary in over 100 successful chin augmentations. The 7 mm self-tapping screw is extremely useful and the lateral mandibular angle implant which I will discuss in another article.

The mentalis muscle is the meticulously closed with 4-0 PDS suture followed by a

dermal closure of the same suture making sure the skin edges divert and several medial sutures for optimal watertight closure. The final closure is with simple interrupted 6-0 nylon sutures which I believe does not impair the blood supply to the edges of the wound. This is followed by Steri-Strip closure forming a "cast effect" around the wound which you can visualize in the video. A final compression garment is placed for a minimum of four days and the patient will not remove this and never get the steri strips wet for the four days. As you will see in the video this patient also had extensive SAFE Liposuction of the neck with Renuvion radio frequency tightening of the fibroseptal network and is seeing the following day with no bruising, pain, inflammation, or redness.

Other considerations include sitting the patient in the upright position to check the side profile on both sides. The submental incision can be enlarged if modification of the platysma is required.

The extremely important points are summarized in the scissors on the seam on the last page of this article. Please note all information was obtained from my attendance at the Implantech facial implantation course and my own personal education, training and experience.

James Fernau MD, FACS is on his third term as Chairman of Patient Safety for The Aesthetic Society. He has a private practice in Pittsburgh Pennsylvania and is an Associate Professor of Plastic Surgery at the West Virginia University School of Medicine.

As you can see in the video linked on the previous page, I start on the patient's left side. The key to the entire operation is to carefully and meticulously and patiently release this very strong ligament off of the Mandibular tubercle.



CULTURE OF SAFETY

Scissors on the Seam!

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Scissors on the Seam!



Patient Safety in Chin Augmentation with Implants

Careful release of the ligaments of the mandibular tubercle

Hydrodissection of local anesthetic

Insertion of sizers and permanent implant at the lower mandibular border

Never overdissect the pocket too superior

Insert Aufrict retractor for optimal dissection

Medium size periosteal elevator used with subperiosteal back and forth dissection (Waddle technique)

Periosteal perfect pocket at lower border of mandible

Lateral wings of the implant can be trimmed and must not be placed superior

Antibiotic administration before incision and as a triple soak of the sizers and implant

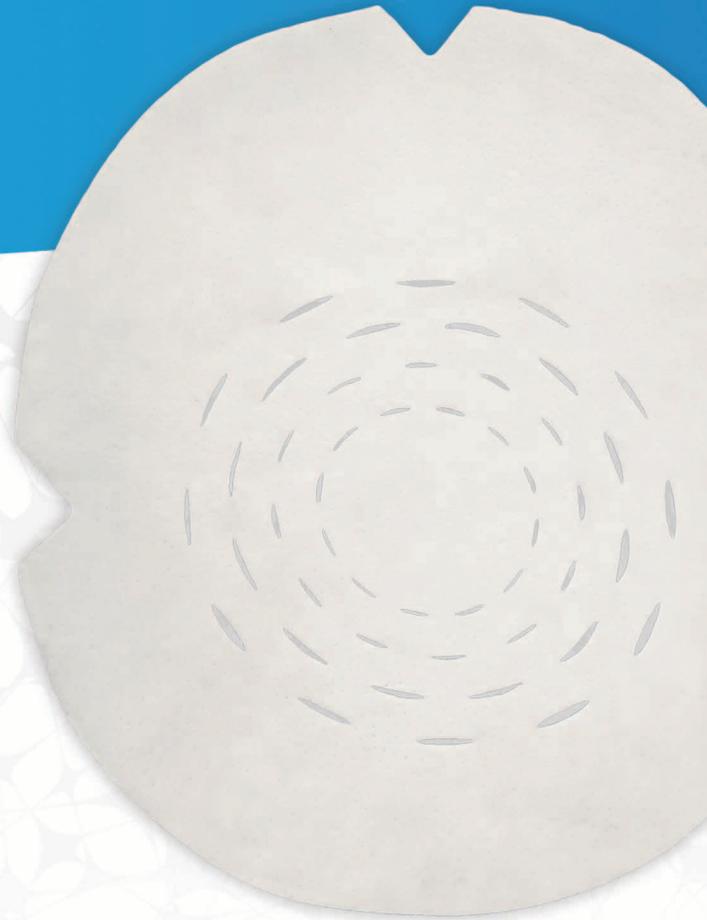
Need layered closure with 4-0 horizontal permanent mattress suture through the right periosteum first, then into right side of the implant, then into the left side of the implant and back through the left periosteum

Tranexamic acid used in the infiltration as a 1% solution and as a 3% topical solution applied for 5 minutes



*Disclaimer: the preceding methods and products are not required. They are recommendations from The Aesthetic Society Patient Safety Committee as of January 2023 and do not establish a standard of care. You may download this document and any updates at bit.ly/3vfwDP7 to tailor to your specific practice. ©2023 The Aesthetic Society. All rights reserved.

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WARNING:

- Breast implants are not considered lifetime devices. The longer people have them, the greater the chances are that they will develop complications, some of which will require more surgery.
- Breast implants have been associated with the development of a cancer of the immune system called breast implant-associated anaplastic large cell lymphoma (BIA-ALCL). This cancer occurs more commonly in patients with textured breast implants than smooth implants, although rates are not well defined. Some patients have died from BIA-ALCL.
- Patients receiving breast implants have reported a variety of systemic symptoms such as joint pain, muscle aches, confusion, chronic fatigue, autoimmune diseases and others. Individual patient risk for developing these symptoms has not been well established. Some patients report complete resolution of symptoms when the implants are removed without replacement.

The sale and distribution of Mentor Breast Implant Devices are restricted to users and/or user facilities that provide information to patients about the risks and benefits of the device prior to its use in the form and manner specified in approved labeling to be provided by Mentor Worldwide LLC.

Important Safety Information: MENTOR® MemoryGel® Breast Implants are indicated for breast augmentation in women at least 22 years old or for breast reconstruction. Breast implant surgery should not be performed in women with active infection anywhere in their body with existing cancer or pre-cancer of their breast who have not received adequate treatment for those conditions or are pregnant or nursing.

Breast implants are not lifetime devices and breast implantation is not necessarily a one-time surgery. The chance of developing complications increases over time. The most common complications with the MemoryGel® Breast Implants include reoperation, capsular contracture, asymmetry, and breast pain. A lower risk of complication is rupture. The health consequences of a ruptured silicone gel-filled breast implant have not been fully established. MRI screenings are recommended three years after initial implant surgery and then every two years after to detect silent rupture. Breast implants are also associated with the risk of breast implant-associated anaplastic large cell lymphoma (BIA-ALCL), an uncommon type of lymphoma. An individual's risk of developing BIA-ALCL with MENTOR® Breast Implants is low based on the incidence of worldwide cases.

Patients should receive a copy of Important Information for Augmentation Patients about MENTOR® MemoryGel® Silicone Gel-Filled Breast Implants or Important Information for Reconstruction Patients about MENTOR® MemoryGel® Silicone Gel-Filled Breast Implants. Your patient needs to read and understand the information regarding the risks and benefits of breast implants, with an opportunity to consult with you prior to deciding on surgery.

For detailed indications, contraindications, warning and precautions associated with the use of MemoryGel® Breast Implants. Please refer to the Instructions for Use (IFU) provided with each product, or online at www.mentorwwllc.com.

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