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SKIN DEEP

Seeking Self-Esteem Through Surgery

By CAMILLE SWEENEY

WHEN 18-year-old Kristen of River Edge, N.J., began to develop curves at 15, she was disappointed that breasts didn't follow. "They never grew," said Kristen. "I didn't feel like a woman."

And, in fact, at 15, Kristen wasn't yet a woman. But to someone raised in a culture of celebrity obsession and makeover TV shows — not to mention the fact that when Kristen was 16, her mother and older sister had received breast implants — she believed a shapely bust line was her due. So, last May, as a high school graduation gift from her parents, Kristen underwent breast augmentation surgery with saline implants, approved by the Food and Drug Administration for people 18 and older.

"I just wanted to look normal, and now I do," said Kristen, whose family members asked that their last name not be used.

To the rigors of teenage grooming — waxing, plucking, body training and skin care regimens that were once the province of adults — add cosmetic surgery, which is fast becoming a mainstream option among teenagers. But with this popularity, some experts are concerned that the underlying motivation for many of the young people seeking surgery — namely, self-esteem — is being disregarded in the drive to look, as Kristen puts it, "normal."

The latest figures from the American Society for Aesthetic Plastic Surgery show that the number of cosmetic surgical procedures performed on youths 18 or younger more than tripled over a 10-year period, to 205,119 in 2007 from 59,890 in 1997. This includes even more controversial procedures: liposuctions rose to 9,295 from 2,504, and breast augmentations increased nearly sixfold, to 7,882 from 1,326. (The latter two procedures have been associated with the deaths of two 18-year-olds: Amy Fledderman of Pennsylvania, who died in 2001 of fat embolism syndrome after undergoing liposuction, and Stephanie Kuleba of Florida, who died last spring from complications because of anesthesia used during a breast augmentation and inverted nipple surgery.)

At this point, the recession is apparently having little effect on teenage cosmetic surgery. While figures aren't available for 2008, reports from doctors suggest that parents are keeping their commitments for procedures that are covered by insurance only if considered reconstructive, and that can be costly if they aren't covered. The most frequent procedure, otoplasty, or ear reshaping, costs an average of \$3,000, while rhinoplasty costs \$4,500, according to the American Society for Aesthetic Plastic Surgery. These costs can be twice as much in the New York area.

"If parents have bought into the concept, if they're supportive of a procedure for their child, they seem to be going through with it despite the economy," said Dr. Alan Gold, a plastic surgeon in Great Neck, N.Y., and president of the society.

In fact, one of the most popular times for procedures for young patients is winter break, and several doctors said they noticed no drop in the number of adolescent patients last month.

Critics say that with plastic surgery becoming more common, parents are more likely to find themselves having to learn how to say no to a son or daughter with a tarnished self-image who is begging for the same quick surgical fix that the parents themselves may have had.

"Our children are barraged with images of ideal women and men that aren't even real, but computer composites," said Jean Kilbourne, co-author of "So Sexy, So Soon," a book on teenagers and pre-teenagers. "These girls and boys can't compete. The truth is, no one can. And it leaves teens feeling more inadequate than ever and a lot of parents unsure as to the right thing to do."

Dr. Frederick Lukash, a plastic surgeon in New York City and Long Island who specializes in treating adolescents, said: "Unlike adults who may elect cosmetic surgery for that 'wow' factor to stand out in a crowd, to be rejuvenated and get noticed, kids have a different mantra. They do it to fit in."

Still, some parents are at least as concerned about their children's discomfort with their appearance as their children are. Jill Marks, whose 11-year-old daughter Julia is a rhinoplasty patient of Dr. Lukash's, said that when Julia was 6 she started taking her to doctors, including ear, nose and throat specialists, to find out what could be done about her crooked nose. "I knew she was having a hard time with it physically, but also emotionally," Ms. Marks said. "I'd see her in the bathroom pushing her nose to make it straighter. Some kids would ask her, 'Why's your nose so crooked?' I didn't want her to have to go through that anymore."

A recent survey of more than 1,000 girls in the United States ages 8 to 17 sponsored by the Dove Self-Esteem Fund — which has a partnership with the <u>Girl Scouts</u> of the U.S.A. and is linked to Dove's Campaign for Real Beauty, a program aimed at changing narrow cultural definitions of beauty — showed that 7 in 10 girls surveyed believed that when it came to issues including beauty and body image they did not "measure up." Only 10 percent found themselves to be "pretty enough."

"It's clear there is an epidemic of low self-esteem among girls," said Ann Kearney-Cooke, director of the Cincinnati Psychotherapy Institute, adviser to Dove's study and author of the book "Change Your Mind, Change Your Body."

"I work with a lot of teens on body image," Dr. Kearney-Cooke said. "I have girls who say they want lipo when really what they need is to learn how to exercise and diet. If a girl thinks no waist, big breasts and chiseled features is the only definition of beautiful, I try and teach them to recognize the narrow view of what's considered acceptable appearance in our culture, and how to challenge that view."

Apart from the fact that what may be considered less than ideal at 15 or 16 may change over time — baby fat around a chin, say, or small breasts — experts say adolescents may not fully understand that the change

they're making is permanent.

"They may not be any happier with their new look, then what?" asks Diana Zuckerman, president of the National Research Center for Women and Families. "And even if all goes well at first with breast implant surgery, for example, it may require follow-up procedures. And we know how wrong breast implants can go with breast pain, ruptures, hardening, even a strange sloshing sound that sometimes occurs with saline implants."

But plastic surgeons say that as body parts develop at different rates in different people, the opportunity to transform a teenager with low self-esteem and a crooked nose into someone with self-confidence is often justified because a well-timed operation could prevent destructive behaviors, including eating disorders, bullying and self-mutilation.

"There are general guidelines we follow with regard to physical development, but we take each candidate on an individual basis," said Dr. Richard D'Amico, a plastic surgeon in Englewood, N.J. "Someone can develop at an accelerated or slowed-down rate. And, of course, levels of maturity vary."

Michael Laudisio, now 22, of Massapequa, N.Y., admits he might not have been mature enough to understand the full implications when his ears were pinned at age 10, but he said his family's decision to do it changed his life profoundly. "I had really big ears like no one else and was teased about it all the time," he said. "That surgery made me free."

But it can be a very fine line between corrective surgery and cosmetic, and even within a family there can be vastly differing opinions. "I've had mothers dragging their daughters in to have something done, and of course, if the teen is not on board, I'll suggest another appropriate course of action," said Dr. D'Amico, adding, "You don't get self-esteem from a scalpel."

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