COMMUNICATION

Ethics and Plastic Surgery/What is **Plastic Surgery?**

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Introduction

Cosmetic surgery is a surgical expertise that aims at correcting or improving body imperfections. These may be congenital, acquired, due to illness, or due to traumatic or para-physiological events such as aging. Cosmetic surgery also includes surgical procedures requested by patients to improve their appearance. In this regard, cosmetic surgery differs from reconstructive surgery, which deals with the treatment of morphological alterations that can be related to pathological conditions; in the specific nature of their respective areas, cosmetic surgery and reconstructive surgery both belong to plastic surgery. The aim of this discipline must be to keep the same aesthetic and scientific approach both in the resolution of body imperfections or in voluntary modifications to appearance [1]. If, on one hand, the aesthetic dimension cannot be ignored in reconstructive surgery, then on the other hand, reconstructive surgery is strictly required in any cosmetic surgery [2].

In the last few years we have witnessed the use of medical treatment and cosmetic surgery more and more frequently in line with the continuous evolution of modern society, where individuals' wellbeing also depends on the attractiveness of their physical appearance, according to the various standards imposed by society [3].

Plastic surgery and quality of life

Though the legality of reconstructive surgery has never been questioned, the boundaries and legitimacy of aesthetic surgery have been long discussed and debated. Due to the fact that cosmetic surgery may lack a therapeutic purpose, it has been considered as less significant with respect to other interventions with the intent to cure or rehabilitate. Over the years, cosmetic surgery has reached a substantial equivalence to other fields of medicine. This step has mainly occurred due to the affirmation of a wider notion of health, which also includes the psychological well-being of individuals, and therefore leads to the recognition of a therapeutic function for cosmetic surgery. The concept of health is enriched with a subjective dimension, which is related to individuals' perception and appreciation for their own bodies. The request for an intervention that aims at improving the physical and psychological well-being of the person, therefore, cannot be labeled as a heteronomous evaluation, but needs to be considered as an expression of the full and conscious self-determination of the person.

For this very reason, cosmetic surgery may also be regarded as "the surgery of the soul." It should be noted that the effects of plastic surgery are not simply the result of the search for external perfection, implemented through the correction of a physical defect, but have consequences on individuals in their entirety, that is, body and spirit. Change to the reflected image in the mirror modifies self-perception in relation to others. Plastic surgery as a discipline thus responds to a complex quest for complete psychophysical well-being. Therefore, it cannot be considered as mere reconstruction, but needs to be considered as an "improvement" in the outward appearance as it becomes essential for achieving success and well-being in professional, emotional, and social life. Surgical techniques allow, in fact, the adjustment of a healthy body to fit the standards of contemporary society. This imposes two major necessities: (1) a full understanding of the desires of the patient, who is aware and fully accepting of the risks related to the surgical procedure; (2) an understanding that every surgical procedure itself, although it may be modified, cannot be reversed, and in fact results in permanent physical alteration with enduring marks (scars that cannot be completely eliminated).

Beauty and truth

The evaluation of beauty has always been based on the pursuit of specific criteria dictated by society, which enforce the predominance of a beauty ideal that meets strict aesthetic standards for age, skin color, and body proportions. However, the ideal needs to be adapted and framed for the individual diversity that characterizes every person. Though plastic surgery has always sought out and valued natural beauty, what has changed in modern times is the very concept of simplicity, which is more and more dependent on the constraints imposed by the culture of fashion and media.

The patient's request and the role of the plastic surgeon

let us now look at the path that leads patients to question their own image. A subject with a positive self-perception, a satisfactory sense of self, and a greater feeling of self-esteem is not inclined to turn to a plastic surgeon. A subject with a negative self-perception, on the other hand, will identify one or more defects and will therefore try to correct them by resorting to plastic surgery. An objective evaluation of their image is always difficult for patients, as the mind has a conditioning effect on the perception of one's body.

Patients who experience discomfort perceive their suffering as dependent on negative factors. The absence of positive thinking, in this case, is influenced by their social reality and the environment surrounding patients.

The patient develops suffering through several stages: the perception of the image, the processing of distress, finding imperfections, and attempting to search for possible solutions by appealing to the doctor.

The doctor will take a parallel path with the patient, and through proper interpretation of the stages of the patient's suffering, the doctor will ultimately seek out the best solution to the problem. In this context, the evaluation of the patient's medical history may be considered as a study of the prior events that are explanatory for the disease in question; after an objective examination of the patient's discomfort, and the discovery of the missing diagnosis, which in most cases takes the form of a defect, the doctor proceeds with the development of a proper therapeutic strategy.

Based on these assumptions, the doctor's performance will fulfill a service to the patient and to society as a whole by taking care of people's sufferings.

The medical profession itself can be considered a calling equivalent to service that can be summarized in the value statement: my work is to serve you with my scientific knowledge and human values. Conversely, when the ethical values of the medical profession are lacking, the patient will consider only the commercial aspect of the plastic surgeon's work, and the value statement will be subverted: I work, and I need you, as a patient.

Thus it is fundamental to focus on both the approach and the surgical treatment, in purely aesthetic and reconstructive dimensions, while always considering carefully any psychological and physical suffering.

Research objectivity correlates with the diagnostic hypothesis and the valid experience of the patient by implementing, if necessary, a medical-surgical procedure that will reflect the epistemological framework of medicine as a science.

It is up to the doctor to develop a plan of action that discerns beauty from simple subjective liking, always trying to make clear to patients the idea that, in respect to their innermost truth, it will lead to a greater awareness of their choices.

Furthermore, the doctor's role is crucial in understanding the patient's wishes during the interview. If this approach results in the correction of a physical defect, such as following a surgical, oncological, or even traumatic event, the medical procedure will be oriented toward an intervention to be ascribed more properly to the sphere of reconstructive surgery. If the request is to transform physical appearance, surgery, if recommended, has a secondary role compared to the multidisciplinary action needed to correct the pathology in its complexity. The central point of our discussion is the request for an improvement in physical appearance. This condition requires a careful evaluation of psychological state in relation to a possible approach to aesthetic surgery. If the request is for an improvement in physical appearance, we can distinguish whether or not it has been made by a patient of sound mind. In this case, the role of the physician is critical in discerning whom we are dealing with. After clearly assessing the mental balance of the patient, the doctor will discuss the limitations and possibilities with the patient, as well as the cost-benefit ratio related to the surgery. In case of the patient's consent, the doctor will proceed with the surgical operation. A more difficult case is confronted when a patient has mental distress: the doctor will therefore try to understand if the psychological problems are the cause or the consequence of the subjective defect. If the mental distress is the cause of the defect, as in the case of an anorexic subject, the surgeon will suggest to the patient a different solution for the restoration of health. The surgeon will suggest that patients take an introspective journey to search for their own truth. When the psychological disorder is a result of the subjective defect instead, for example, with a child who is unable to participate with classmates due to prominent ears, plastic surgery is a possible course of action that can be decided on definitively after a careful assessment of the real psychological state of the patient.

Medical treatment that does not identify the truth of the patient's suffering will contribute to an increase of the patient's suffering; this includes all those procedures intended to satisfy ephemeral desires, fads, or the imitation of models and stereotypes without relying on scientific assumptions. We may call this the "surgery of desires." Requests like "breasts equal to those of that TV star," or "lips like that famous actress," or "pectorals sculpted like those of that famous sports player" are all expressions of surgery of desire, and the plastic surgeon should always recognize them and should avoid intervention, since the goal of medicine, ultimately, is to restore mental and physical balance and health, which, in terms of plastic surgery, means a happy coexistence between outer beauty and inner truth coming together to achieve an overall state of well-being.

The role of informed consent

A matter of great importance in terms of medical liability is the role given to informed consent and appropriate disclosure. In order for the patient to give valid consent, the doctor should disclose as clearly and as fully as possible all the risks, even rare ones, regarding cosmetic surgery, and should explain the expected and predictable result.

Failure, that is, an inaccurate or incomplete request for consent, will in fact directly affect the constitutional right to self-determination of the patients, since the choices relate to their own health and become as such a source of liability for damages. Italian national law states that any health service cannot be performed against the will of the patient, who must be capable of consent.

Conclusions

Plastic Surgery as a 'Psycho-Surgery'?

The relationship between a plastic surgeon and a patient is more intimate and profound than with other doctors [4]. At the same time, the key role of the body, which is fragmented and manipulated, implies the risk of objectification, both by the physician and by the patient. Patients may waver between body and soul when referring to their own experience, and may say that "his nose is too wide" or "my nose is too wide." Therefore, a plastic surgeon undergoes a deep experience with the mystery of human beings, who are always and in any case a body-soul entity. In this regard, if surgical intervention always deals with the body of the patient, in most cases it mainly impacts the psychological sphere [5]. For these reasons, plastic surgery widens the context in which medical surgery has always been conceived, leading from the external shell to the inner psychological life of human beings.

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