

August 16, 2007

Q: Who Is the Real Face of Plastic Surgery?

By NATASHA SINGER

IT was the pale green and pink striped bikini that did it.

When Sandra Cornier, a mother of two from Brooklyn, looked at a recent photo of herself taken at Manhattan Beach, N.Y., she didn't like what she saw. She had been nursing her son for 11 months, and now she could barely fill out the bathing suit top.

She made a decision: She would have breast implant surgery, and right away, because she wanted to be cozy in her favorite bikini by the end of the summer. She did not have the cash available, but she was willing to borrow.

"I just wanted to proportion myself out and look like I did before I had children, simple as that," said Ms. Cornier, 33, who is married and works for a government agency. She took a loan for \$10,800. "I did not want to wait two or three years to save up for surgery."

Cosmetic medicine used to be the province of the rich and celebrated who would pay cash or write a check up front for their tummy tucks and eyelid lifts. (Such procedures are not typically covered by health insurance.) But in the last five years, with the advent of reality shows like "Extreme Makeover" and the popularization of nonsurgical treatments like lasers and wrinkle injections, people with blue- or pink-collar incomes and Beverly Hills ideals are embracing vanity medicine.

Doctors around the country are noting a democratization of cosmetic medicine, a redefinition of it as a coveted yet attainable luxury purchase, on par with products like Louis Vuitton handbags or flat-screen televisions.

The medical industry has responded by marketing [plastic surgery](#) as if it were an appliance or other big-ticket consumer product: a commodity to be financed with credit cards and loans.

About a third of people considering plastic surgery reported average household incomes below \$30,000, according to a survey conducted in 2004 for the American Society of Plastic Surgeons. The poll of 644 people found that 13 percent of those seeking information on plastic surgery procedures reported an annual household income of more than \$90,000.

Dr. Paul A. Blair, a facial surgeon in Hurricane, W.Va., said his patients have included high-school teachers, truck drivers and school-bus drivers. Dr. L. Mike Nayak, a facial surgeon in St. Louis, said that his patients include blue-collar or lower-salary professionals — "teachers, retirees, psychologists, regular middle-class working folks."

"I have a couple of jail wardens," Dr. Nayak said.

Laurie L. Essig, who teaches sociology at Middlebury College in Vermont, said there is little mystery why

this is so: Middle-class Americans are buying into the idea of better living through surgery. Makeover shows, magazines and advertising campaigns have convinced people that flatter stomachs, inflated bosoms, smoother brows and whiter teeth will so improve their careers or their romantic lives that it is even worth going into debt, she said.

“In a bosom-obsessed society where you think you can earn \$20,000 more with bigger breasts, is it insane to consider taking out a loan to have surgery?” said Dr. Essig, who is writing a book on the economics behind plastic surgery. “The demographic is teachers, law enforcement officers and stay-at-home moms.”

One of the most vivid illustrations of this economic reality is the rise of finance companies offering middle-income patients easy access to credit to pay for their surgeries.

Patients throughout the country find brochures in their doctor’s office with slogans like “Get the Cosmetic Procedure You Want — Today!” from established financing companies like Capital One and CareCredit, a unit of GE Money. In Star magazine, among ads for weight-loss pills and slimming gels, an Internet-based financier called DoctorsSayYes.net advertises: “Absolutely no one will be turned down. Now you can finance your cosmetic procedure for as little as \$99 down and \$99 per month.”

Mike Testa, the president of CareCredit, said that Americans spent about \$14 billion last year on cosmetic medical procedures, from liposuction to laser skin treatments. Of that, \$1 billion is financed by companies like his, he said.

“It is certainly getting more patients to say yes today rather than delaying treatment,” Mr. Testa said. “If you had to pay cash for a car, how many cars would you buy in your lifetime?”

The car analogy came up frequently in interviews with more than 30 doctors and patients.

“One of my patients said: ‘I financed my car. Why shouldn’t I finance my face?’ ” said Dr. Lisa Cassileth, a plastic surgeon in Beverly Hills, Calif. “Plastic surgery has become just like any other high-ticket item you put on credit and pay for later.”

Cosmetic patients said financing — including home equity loans — allows them to proceed as soon as they are ready.

Ms. Cornier, the Brooklyn mother, was matched by the manager of the office of her Park Avenue plastic surgeon, Dr. David P. Rapaport, with Capital One health care finance for her \$10,800 loan. She received approval in minutes for the breast implant surgery, she said.

“Financing gives the average person like me the opportunity to do this without having to wait,” Ms. Cornier said.

For many patients, the plastic surgery loan is just another bill — a way to build up frequent-flier miles if they put it on a credit card, or another check to write once a month. Michelle Lee, 28, a saleswoman at a Mercedes-Benz dealership in Pleasanton, Calif., used a finance company to pay for \$6,000 in liposuction after her regular workouts failed to perfect her arms, stomach and inner thighs, she said.

“Those were problem areas for me and I needed results now,” she said. “It is all about instant gratification for me.”

She was charged a \$600 processing fee for the loan, but she made sure to pay off her balance before the 25 percent interest kicked in, she said.

Other patients face years of payments; there are no published statistics about bankruptcy or even default associated with plastic surgery loans.

Lani Guzman, 21, who works part-time jobs as an administrator at a law firm and at a carpet company in South Pasadena, Calif., had surgery in May to smooth a bump on her nose that had been bothering her for years, she said. She put \$5,000 on a credit card and took out a three-year loan with a financing firm for the other \$5,000.

“They charged dumb fees like \$650 to put the loan together, which is kind of a rip-off,” said Ms. Guzman, who also serves in the Army Reserve. She said she pays \$178.01 monthly to the finance company and does not know how long it will take her to pay off the debt on her credit card.

Dr. Robert Kotler, the facial surgeon in Beverly Hills who operated on Ms. Guzman, said that orthodontists invented the idea of paying in installments for elective medical procedures. Now a crooked nose is becoming the new overbite, he said. And, just as pay-as-you-go orthodontics turned the Hollywood smile into a rite of passage for the children of middle-class families, financing is widening the audience for plastic surgery from Mercedes S-Class drivers to subway riders.

“What does it cost to amortize a nose over the useful life of it?” Dr. Kotler said. “It costs 30 cents a day, cheaper than a can of soda, and unlike a car, you get the benefit of a nose for the rest of your life.”

But some doctors worry that some patients are spending on vanity care, even as they forgo health insurance because of its expense — a decision that is particularly risky should something go wrong or need to be corrected after the elective procedures.

“I have some 23-year-old women who are getting breast implants who think they are young and healthy and don’t need health insurance,” Dr. Rapaport said. “But they are used to paying for clothing and makeup, so there is no cognitive dissonance for them in paying for procedures to maintain their bodies.”

Doctors also worry that easy access to credit could induce people to sign up for (and perhaps regret) procedures they otherwise might not be able to afford. Every month, said Dr. Darrick E. Antell, a plastic surgeon in Manhattan, as they make their loan payment, they might question whether their surgery decision was worth it.

“In cases where funds are tight for the patients, they might be better off buying a new dress instead of a new chin,” Dr. Antell said.

As for Ms. Cornier, she was still happy two weeks after she had the breast implant operation, even though it is likely that, with interest, her procedure could ultimately cost \$16,440, about a 50 percent increase. She said the gratification of having a new silhouette more than compensated.

“I did not want to look like Pamela Anderson,” Ms. Cornier said. “I just wanted my bathing suit to fill out right.”

[Copyright 2007 The New York Times Company](#)

[Privacy Policy](#) | [Search](#) | [Corrections](#) | [RSS](#) | [First Look](#) | [Help](#) | [Contact Us](#) | [Work for Us](#) | [Site Map](#)
