

## ASPS MEDIA RESOURCE KIT - Feb 2022

### What is the Australian Society of Plastic Surgeons (ASPS)?

Founded in 1970, the Australian Society of Plastic Surgeons Inc (ASPS) is the peak body for Specialist Plastic Surgeons (both reconstructive and cosmetic). Our main role is to protect the integrity of plastic surgery as a specialty. Our mission is to provide the highest quality plastic surgery care to all Australians by:

- Facilitating government accredited surgical education and training for all Specialist Plastic Surgeons
- Upholding ethical and professional standards
- Promoting public education about reconstructive and cosmetic plastic surgery procedures

Membership criteria are stringent. All ASPS members hold a specialist qualification from the Royal Australasian College of Surgeons (RACS) which is the only College for specialist surgical training accredited by both Australian and New Zealand Governments through the Australian Medical Council (AMC) and New Zealand Medical Council (NZMC), respectively. Members of ASPS have undertaken a minimum of 12 years medical and surgical education, including at least 5 years of specialist postgraduate training, and are Fellows of the Royal Australasian College of Surgeons (FRACS).

### COSMETIC AND RECONSTRUCTIVE SURGERY – FACTS AND MYTHS

**FACT: In Australia it is not illegal for a doctor without formal surgical training to conduct cosmetic or plastic surgery if the patient agrees to the operation**

Currently it is not illegal for a medical practitioner (e.g. a GP) to perform surgery. Doctors with only a MBBS (Bachelor of Medicine and Bachelor of Surgery) degree are not trained for invasive surgical procedures.

ASPS members are Specialist Plastic Surgeons with extensive specialist training in all aspects of cosmetic and reconstructive surgery (12 years total medical and surgical education). Surgeons are also Fellows of the Royal Australasian College of Surgeons (FRACS) and have undergone extensive training to perform invasive surgical procedures. FRACS is the Australian Medical Council (AMC) accredited qualification to perform surgery in private and public hospitals.

The best way for prospective patients to reduce their risk is to make sure they consult a Specialist Plastic Surgeon that has received AMC accreditation to perform cosmetic and reconstructive surgery. This can be done by calling ASPS on 1300 367 446 or [www.plasticsurgery.org.au](http://www.plasticsurgery.org.au)

**MYTH: All plastic surgery procedures are performed in accredited facilities**

In Australia it is not illegal to conduct surgical procedures in an unaccredited facility such as an office space or day procedure centre. In these settings there is often no quality assurance and no way for authorities to monitor that the surgery is being performed safely and expertly. ASPS believes that Australian consumers need to be protected making it mandatory for all facilities undertaking invasive cosmetic surgery

procedures to meet the practice standards of the Australian Day Surgery Council and have compulsory registrations and accreditation to ensure:

- Anaesthesia used is safe
- Infection control, sterile supply and clinical waste management
- Minimum quality and audit requirements (e.g. medicines checked they have not reached their used by dates and are kept at the right temperatures)
- Credentialing of clinical staff
- Building and facility issues (e.g. the resuscitation equipment works)

ASPS member Specialist Plastic Surgeons perform surgeries only in accredited facilities.

**FACT: All surgery, cosmetic and reconstructive, whether performed under local or general anaesthetic, in day surgery or in hospitals, can carry serious risk**

With a substantial rise in the number of Australians undergoing cosmetic procedures in the last 10 years, cosmetic surgery has become 'normalised' and accepted as common place. It can't be underestimated that cosmetic surgery is not unlike any other kind of surgery in that it carries serious risk and therefore needs to be seriously considered. A patient can have an adverse reaction to the anaesthetic or be affected by postoperative complications. These problems can occur even when the surgery has been performed with the utmost skill. In addition, results cannot be guaranteed.

The best way to reduce risk is to consult a Specialist Plastic Surgeon that is fully trained and qualified.

**MYTH: Plastic surgeons only perform reconstructive surgery**

Plastic surgery encompasses both cosmetic *and* reconstructive surgery. ASPS members are Specialist Plastic Surgeons trained, experienced, and qualified to perform both cosmetic *and* reconstructive procedures.

Because many cosmetic procedures are rooted in reconstructive plastic surgery, ASPS member Specialist Plastic Surgeons are uniquely qualified to handle the demands and risks attached to various cosmetic surgery procedures.

**FACT: In Australia there is limited regulation or standardisation when it comes to the use of titles to describe qualifications in the area of cosmetic surgery**

As a result, prospective patients can become confused, and given the high level of trust Australians put in the medical profession, they are vulnerable and at risk from those operating outside of their skill and training level. Just because someone promotes themselves as an expert or a "cosmetic surgeon" does not mean they are a qualified Specialist Plastic Surgeon. ASPS supports the Australian Health Practitioner Regulation Agency (AHPRA) registration and use of titles. The Society promotes transparency of information for consumers about education, qualification and accreditation of premises.

**MYTH: That cosmetic surgery advertising is highly regulated**

While the ACCC has developed advertising guidelines for doctors, very little is being done to enforce them. As a result there is an increase in irresponsible advertising by medical practitioners who describe

themselves as surgeons or imply that they have formal surgical qualifications when they do not. Unethical advertising is often driven by commercial factors. There's a danger that unethical advertising inflates patient expectations while ignoring or trivialising the risks of surgical procedures. ASPS promotes transparency of information for consumers about education, qualification and accreditation of premises so that consumers are able to give informed consent. ASPS advocates the Medical Board of Australia's Guidelines for Advertising of Regulated Health Services, which is outlined in the Society's Code of Practice.

## FAQ's

### What's the difference between cosmetic and reconstructive surgery?

Plastic surgery has two branches, cosmetic surgery and reconstructive plastic surgery. Cosmetic surgery is a subspecialty of the broader field of plastic surgery and one which many plastic surgeons choose to specialise in. Cosmetic surgery is designed to improve a person's aesthetic appearance by altering or reshaping a bodily feature whereas plastic surgery encompasses both cosmetic surgery and reconstructive surgery. Reconstructive surgery is concerned with improving bodily function and performed on abnormal structures of the body caused by congenital defects, developmental abnormalities, trauma, infection, tumours or disease.

### What's the difference between a cosmetic doctor and a plastic surgeon?

In Australia Specialist Plastic Surgeons have studied specialist surgery for a minimum of five years and have at least 12 years of total medical and surgical education. Surgeons are also Fellows of the Royal Australasian College of Surgeons (FRACS) and have undergone extensive training to perform invasive surgical procedures. Doctors with only a MBBS (Bachelor of Medicine and Bachelor of Surgery) degree are not AMC accredited surgeons as they are not trained for invasive surgical procedures. However in Australia it is not illegal for a medical practitioner (e.g. GP) to perform surgery.

**ASPS members are Specialist Plastic Surgeons with extensive specialist training in all aspects of cosmetic and reconstructive surgery (12 years total medical and surgical education).**

### What are the most popular cosmetic surgery procedures undertaken in Australia?

No-one knows exactly how much cosmetic surgery is being performed in Australia, as national statistics for the industry are not collected at this time. This is partly due to the fact that most cosmetic surgery is elective and not covered by Medicare. The other contributing factor is that so many different practitioners perform cosmetic surgery, ranging from plastic surgeons to cosmetic doctors and dermatologists. For this reason statistics on individual procedures are also not available. However it is generally accepted that there has been a big rise in the past 10 years.

### How many breast augmentation procedures are performed in Australia every year?

While some doctors may collect statistics for their individual practices, there are no national statistics for plastic surgery available at this time.

### **How many men are undertaking plastic surgery and what are the most common procedures?**

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### **Is cosmetic surgery for brides currently on the rise?**

While figures are not officially collected, anecdotally from our members we know that all types of cosmetic surgery, including those sought out prior to weddings are on the rise.

It is not advisable to have any major procedure conducted prior to a big event, as every now and then complications arise from which there is insufficient time to recover. Surgical procedures should only be done many months before a wedding to ensure complete recovery, but injectable treatments can be done closer to time, although you've never had anything done before, be cautious.

### **Can you breastfeed after breast augmentation?**

Individual cases may vary but generally, mothers can breastfeed after having a breast augmentation. There is no evidence to suggest that the ability to breastfeed is adversely affected by the presence of breast implants, however, some women do experience reduced nipple sensation following breast augmentation surgery, and nipple sensation is an important part of the milk let down reflex.

### **Will a woman who's had breast reduction surgery be able to breastfeed?**

When conducting breast surgery reduction, the surgeon is always concerned with the preservations of breastfeeding potential in young women. Successful breastfeeding requires that part of the gland remains connected to the ducts and nipple after surgery and certainly some of these ducts are removed as part of the reduction. Many patients with macromastia (large breasts) are also overweight. It is known that the lowest rates of initiation and shortest duration of breastfeeding are associated with being overweight. However, research shows that when compared to a group of women of similar weight, breastfeeding rates are about the same (around 65%), either with breast reduction surgery or without it.

### **Is it safe to have Botox injections during pregnancy or while breastfeeding?**

There is a lack of controlled studies into the effects of Botox on pregnant and breastfeeding women, therefore, it is impossible to conclusively say either way whether it is safe. For caution, ASPS recommends avoiding the use of Botox in pregnant women or having treatments while breastfeeding.

### **Which procedures are most popular with Australians travelling overseas for cosmetic surgery and which countries do they travel to for these procedures?**

We don't know which procedures are most popular with Australians overseas as statistics are not collected at this time. However, we can assume a substantial number of breast surgeries are being performed as a recent survey of ASPS members found that breast surgery was the most common kind of surgery conducted overseas requiring corrective treatment. Some of the countries to which Australians commonly travel for cosmetic surgery include Thailand, Malaysia and South America.

### **Are all surgeons in other countries inferior to Australian surgeons?**

No, many surgeons operating in other countries are highly skilled, so not everyone who travels to another country for a procedure will experience complications. But to reduce the risk, ensure the post-operative care period is taken seriously and have a back-up plan in case things go wrong.

### **What advice do you have for Australians thinking about travelling overseas for cosmetic surgery?**

It's of the utmost importance that Australians who plan to undertake a form of cosmetic surgery overseas know who their surgeon is and research their qualifications. One of the best ways is to see if the surgeon is a member of the International Society of Aesthetic Plastic Surgery. Conducting research into the medical standards of care and quality control requirements and comparing them to those in Australia is another important way. You should also investigate the standard of devices and / or products to be used in your surgery and compare this with Australian standards, for example, an impact used in Australia must meet strict standards of safety and effectiveness, a process regulated by the TGA. Other countries may not have similar regulations. Lastly research the person promoting the surgery to see if they're medically trained and accept liability or provide any help if problems arise. If they're simply a travel agent or broker you should view this as high-risk and ask questions about how will be conducting the surgery once you're overseas.

### **Can cosmetic surgery be carried out on children?**

There are many situations where surgery for children is beneficial and clinically indicated for physical and psychological health reasons. A blanket ban on all cosmetic surgery for all children would be a blunt instrument and would not be in the best interests of some children. In Queensland there are restrictions in place when it comes to cosmetic surgery and children, requiring the surgeon to have regard to the best interests of the child, after balancing the risks with potential benefits. This includes a signed parental consent, at least two consultations and a three month cooling off period. In NSW, a 10 day cooling off period and parental approval apply. For any surgeon, the considerations include the best interests of the child, whether the parental consent is rational and informed, whether the child is sufficiently mature, the health of the child and the timing of the procedure – and whether it would be better to wait until adulthood. ASPS encourages member surgeons to be conservative in their approach when considering surgery in children.

## What is the Breast Implant Registry?

The Breast Implant Registry is a centralised and secure body of data linking patient, procedure and prosthesis to enable the collection, documentation and analysis of scientific data relating to breast implants. The Registry (ABDR) is run by Monash University.

Registration is voluntary. ASPS encourages patients to request that their details be recorded with the ABDR. Patients and health care practitioners looking for information on the ABDR may contact the coordinator on (03) 9903 0205 or [abdr@monash.edu](mailto:abdr@monash.edu) or visit the website for more information: <http://www.abdr.org.au>

The Breast Implant Registry (BIR) commenced in 1998. It has now been superseded by the ABDR.

As of 6 May 2015, the BIR ceased to register new patients. However, the Australian Society of Plastic Surgeons (ASPS) continues to maintain the BIR legacy data and to ensure all registered patients continue to have access to their unique data stored on the Registry. ASPS will continue to maintain policies and protocols to ensure privacy and security.

If you have questions about your participation in the BIR, please contact [bir@plasticsurgery.org.au](mailto:bir@plasticsurgery.org.au) or call ASPS on (02) 9437 9200.

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## FOR MORE INFORMATION

Please visit our website <https://plasticsurgery.org.au/procedures/>