

AHPRA Proposes watered-down standards for cosmetic surgery training

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Cosmetic surgery is real surgery. *Cosmetic surgery is real surgery.* This bears repeating because Australia's national medical regulator, AHPRA, still does not get the message. Why else would they be pursuing an agenda of having a watered-down set of standards for those conducting cosmetic surgery compared to all other surgeries?

All surgical procedures carry risks. The long and arduous training to become a specialist surgeon relates not only to being able to perform procedures, but knowing when not to operate, plus the after-care of surgical patients and the development of a mindset of lifelong learning. Communication skills and a solid ethical framework are other key components.

The Australian Medical Council (AMC) have a proud history of setting extremely rigorous standards for providers of specialist surgical training – the main one being the Royal Australasian College of Surgeons. The College has consistently respected this process and met these standards. However, now AHPRA is actively advocating for a [different set of standards](#) for providers of cosmetic surgery training. The fact that this set of draft standards is 17 pages long compared to the 31 pages of the Specialist standards speaks volumes in itself.

The proposed standards for providers of cosmetic surgery training have fewer obligations in terms of governance and diluted requirements for prioritising education of trainees. The standards in curriculum content are vague and lacking in detail. Examinations are virtually unmentioned, in contrast to the details in the AMC's standards for Specialists. Although, technically, it is the AMC, not AHPRA, that has drafted this document and supposedly the two bodies are independent, the Medical Council has been firmly asked by AHPRA to provide a set of standards against which to endorse. This is what the Medical Council are trying to produce, without seeming to have any control over how it will be used, or to whom it may be applied. The nature of the relationship between the bodies is unclear, but what is clear is that AHPRA is driving this.

Why is it that a young woman undergoing insertion of breast implants is less deserving of a high standard of training for her procedure than someone having a gall stone operation or surgery for knee problem? When a patient is cut open, regardless of the purpose, there is the same risk of bleeding and infection, or other potentially devastating complications that require specialist skills to manage, so surely the same standards should apply.

Minister Mark Butler and the other Health Ministers of Australia all recently [agreed](#) that only doctors holding an AMC accredited Surgical Specialist qualification could call themselves a "surgeon". Logically, one would think that this would have been an ideal time for AHPRA to drop its utterly flawed concept of a standards-based "endorsement" for cosmetic surgery?

The decision to protect the title “surgeon” was made after extensive public consultation, and the sentiment of the public is clearly that surgery should only be performed by surgeons. If AHPRA succeeds in persuading the Medical Council to finalise these cosmetic surgery training standards, we will be in a farcical situation where the medical regulator will be aiding and abetting doctors who are not allowed to call themselves surgeons to perform cosmetic surgery. This is akin to saying that someone with a standard of training below that of a pilot can fly you to your destination but not call themselves a pilot.

Why is AHPRA so determined to facilitate the ongoing practice of non-surgeons performing cosmetic surgery, when the public are clearly against it? Maybe they feel it is important not to restrict competition, or that it is simply too difficult to stop non-surgeons from performing surgery. It’s hard to know, but the magnitude of the harm being caused to members of the public warrants bigger picture thinking and genuine cooperation with government to change legislation, if that is what is needed. Minister Butler has successfully taken a lead on protecting the public in this arena so far and there appears to be bipartisan support for significant change. If there need to be a politically led change to the structure of AHPRA, so that what doctors can *do*, rather than just what doctors can *call themselves* is regulated, at least in the field of cosmetic surgery, the time for politicians to effect this is now.

There is no doubt the role of the medical regulator is vital for society. The Code of Practice for Medical Practitioners is a noble one. The first line in the section on professionalism is *“Doctors have a duty to make the care of patients their first concern and to practise medicine safely and effectively. They must be honest, ethical and trustworthy.”* For Australian society to maintain trust in their doctors, it is crucial that both the Australian Medical Board and AHPRA be the embodiment of their own code and champion it above all else. Working to bake-in and legitimize lower standards for training in cosmetic surgery, compared to other surgery should not be a focus.

AHPRA have made some positive steps, in terms of their cosmetic surgery hotline and tightening advertising standards. However, if AHPRA and the Medical Board truly want to prioritise protection of the public in cosmetic surgery, they should work with the government to ban non-surgeons from performing cosmetic surgery. As Martin Fletcher, [CEO of AHPRA openly conceded](#), when questioned by Senator Ruston, their “endorsement” scheme will not achieve this, and it should be abandoned.