

Why the title ‘surgeon’ matters

The Australian Society of Plastic Surgeons is working with the Royal Australasian College of Surgeons (RACS) to protect the use of the title of ‘surgeon’. While some may dismiss this as a turf war between plastic surgeons and cosmetic practitioners who use the title, this initiative is regrettably necessary because of an important public health issue that directly impacts patient safety.

Unfortunately, in recent years there have been a disturbing number of surgical patients who have suffered major complications at the hands of doctors with no formal Australian Medical Council (AMC)-accredited specialist surgical training. Yet they advertise themselves as fully trained ‘cosmetic surgeons’. Many of their patients mistakenly believed the person performing their procedure was a fully trained and accredited surgeon. The consequences of this have been significant – in some cases devastating.

Some of these commercial operators are propelled by social media and aggressive marketing, and their techniques make it difficult for consumers to discriminate between providers, which is increasingly compromised by the lack of protection around the use of the title ‘surgeon’.

Too often, people, insecure about their appearance, are persuaded that a surgical procedure will resolve their discomfort without fully understanding the associated risks. When confronted with advertising or websites promoting ‘cosmetic surgeons’ most, not unreasonably, assume that the title refers to the appropriate level of officially sanctioned training and assessment typically associated with those called a ‘surgeon’. In other words, it is assumed that these practitioners have the same

skills as a specialist bearing the letters ‘FRACS’ after their name.

The decision to undergo cosmetic surgery, and the research into the risks and techniques employed, tends to be undertaken on the internet and through social media. General practitioners or other appropriately skilled medical advisers are rarely involved in the patient’s decision to seek and undergo cosmetic surgery. Frequently, patients research surgeons and the operations in isolation, and believe what they read on the internet. Many of the cosmetic surgeon websites and social media posts are deliberately confusing. They falsely augment the level and complexity of the individual’s surgical training, and are designed to mirror official AMC-accredited training bodies in their language, the use of titles, and through the use of letters after the practitioner’s name. In many cases it is impossible to differentiate between the official AMC-accredited body and the imitation.

We believe this ability of practitioners with no AMC-accredited training in surgical practice to call themselves ‘cosmetic surgeons’ is a dangerous loophole in our health regulation that all too frequently leads to serious misjudgements by vulnerable members of our society. This needs to change.

The term ‘cosmetic surgeon’ is not a recognised title within the Australian Health Practitioner Regulation Agency (AHPRA) and despite AHPRA legislating that “it is important that the use of a title does not lead a consumer to believe the practitioner holds specialist registration or an endorsement they do not hold”, there is no restriction on the title ‘cosmetic surgeon’: any doctor can use it,

irrespective of their level of training.

The New South Wales Parliamentary Report into Cosmetic Surgery recommended banning the use of the title ‘cosmetic surgeon’ to eliminate consumer confusion. Australian state and territory governments are now considering restricting the use of the title ‘surgeon’ to only those with an AMC accredited surgical training qualification, such as FRACS.

This would provide transparency about the level of training that a particular medical practitioner has undertaken and would enable a patient unfamiliar with medical terminology or AMC processes to accurately assess their proposed surgeon’s qualifications and training.

We believe that it is not unreasonable for a patient to expect that the person operating on them and calling themselves a ‘surgeon’ is, in fact, a surgeon, in the same way that their brain surgeon is a neurosurgeon, their heart surgeon is a cardiothoracic surgeon, or their hip is being replaced by an orthopaedic surgeon. In each of these examples the surgeon is AMC accredited, and their level of training is clear, transparent and able to be objectively benchmarked against a predetermined government standard. ■



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