The Malibu Times

Malibu's Community Paper Since 1946

ne www.malibutimes.com

February 1, 2007

25 Cents | LLVI

teens and cosmetic surgery

Local doctors talk about the misconceptions about self-image that lead teens to seek cosmetic procedures and surgery, and the dangers of going under the knife too young.

By Melonie Magruder Special to The Malibu Times

More than 326,000 procedures, including rhinoplasty (reconstruction of the nose), otoplasty (pinning back of the ears), liposuction, breast augmentation, cheek and chin implants, male breast reduction and something called "buccal fat extraction" for perceived chubby cheeks, were performed in 2005— not on adults, but on American children aged 18 and younger, according to the American Society for Plastic

Surgery.

"Cosmetic surgery and 'makeovers' for teens are something now featured on the Disney Channel," said Dr. Annie Thiel, a family therapist who has practiced in Malibu for more than 30 years. "This is no 'Ozzie and Harrier' generation."

and Harriet' generation."

The numbers don't include the youths who head to their local dermatologist for chemical peels, micro-dermabrasion and Botox injections.

Why are America's children seeking to reinvent themselves

so prodigiously?

"They've been swept up by this media frenzy that says we can make ourselves perfect," Thiel said. "We live in a world where, culturally, kids feel they need to look like the skinny actresses on "The O.C." or they are not valuable."

The teen years are notoriously difficult to navigate and parents under pressure to be perfect themselves only re-enforce their children's low self-image when they support or encourage a change in appearance through the knife, Thiel said.

"It is important to distinguish between reconstructive See Cosmetic surgery, page A16 **A16** The Malibu Times February 1, 2007

Cosmetic surgery

From page A1

surgery done on a child who has suffered a disfiguring burn or has serious dental misalignment, and a procedure that is purely cosmetic surgery," Thiel said. "Adolescents are rarely happy with their appearance anyway, but some kids become so obsessed that they develop a serious mental illness: body dysmorphic disorder."

This disorder is characterized by an obsessive preoccupation with a perceived body flaw that can lead to eating disorders and self-mutilation. So, a quick trip to a plastic surgeon is frequently the solution of choice—and some surgeons are accepting under-age patients as status quo

"If you are not willing to operate on a teen, the guy next door will do it," said Dr. Alexander Rivkin, a surgeon trained in facial plastic surgery who practices in Malibu. "But a parent who gives his daughter breast enhancement surgery as a graduation present is reprehensible."

One purely physical problem with resorting to plastic surgery, according to both Thiel and Rivkin, is that children under age 18 usually have not finished growing.

"You have a kid who feels like his nose is too big and bugs his parents to have it reduced," Rivkin said. "But the kid will probably grow into his nose with time. I've had to correct surgeries on kids who had nose jobs and, within a few years, they can't breathe because their noses have changed. Even though there is always full disclosure, kids and parents must realize that some of the side effects of plastic surgery can be very serious."

Adolescents themselves are divided about the perils and advantages of cosmetic surgery. Eje Iyam, a student at Malibu High, recently wrote about the subject for the school newspaper, *The Current*. Her peers'

"... A parent who gives his daughter breast enhancement surgery as a graduation present is reprehensible."

DR. ALEXANDER RIVKIN

opinions on surgical enhancement ran from, "It's super cool if they want to do it" to "It's disgusting and those people obviously have worthless and pathetic lives."

One student whom Iyam interviewed, who had a surgical procedure said, "I felt I wasn't pretty enough and I wanted to look more like my mom. So I waited until the minimum age, 16, and got it done."

Thiel counseled a more measured approach: "Teens need to know cosmetic surgery will not make them a different person

or make people like them. High school isn't forever."

Rivkin said he would not treat a minor without parents being fully on board, and then he would suggest noninvasive procedures to smooth a bump on a nose.

"There is no way a permanent cosmetic procedure should be done on anyone under 21," he said. "There is great risk involved."

Before any work is ever done, Thiel advises a deeper examination of the teen's dissatisfaction with his or her appearance.

"We, as a society, need to find out what the underlying problem is," she said. She said children pick up

She said children pick up more messages about self-perception from their parents than even from television. "The parent must be a role model. Don't talk negatively about your body," she said. "Do you practice healthy lifestyles with eating and exercise? Do you obsess about your appearance?"

Thiel said it is important that parents be prepared to discuss issues that help their children sort out fantasy from reality because "reality is not that boys like super skinny girls. They prefer normal girls. The fantasy is that stars wake up looking like they do in the magazines ... after hours of airbrushing."

Body dysmorphic disorder: Symptoms of risk

Per Dr. Annie Thiel

- Your child excessively compares her appearance with others, i.e. "Her stomach is flatter than mine."
- Can't walk past a mirror without checking himself out.
- Camouflages perceive flaws with makeup, hats, loose clothes.
- Talks about cosmetic surgery.
- · Questions or fishes for compli-

ments.

- Gets angry if you do not see and agree with his or her "flaw."
- · Grooms excessively.
- Avoids exposing a perceived body flaw, even to the point of refusing to leave the house where she would show herself.
- Picks at skin or hair.
- Constantly measures body
 parts
- parts.

 Diets or exercises excessively.