Australia’s cosmetic treatment industry is worth $1 billion a year, yet it remains virtually unregulated. So what happens when things go wrong, and why is the government doing so little about the “cowboy” practitioners and dodgy clinics? Stephanie Osfield reports

Like thousands of Australian women, Ellie Browne is no stranger to the odd injection of dermal filler. The Sydney beauty therapy trainer has had shots to plump up her lips no fewer than five times with no problem. “The result usually lasted nine months to a year,” says Ellie. “I loved having fuller, more pouty lips. It made me feel far more confident about my appearance.”

Although increasingly mainstream, such treatments are expensive: the nurse who previously injected Ellie at a specialist clinic charged $620 per session. So in February, when a friend referred her to a “registered nurse” named Tracey *, who offered injections of the popular filler for $400, Ellie jumped at the deal.

However, within hours of leaving Tracey’s salon in suburban Sydney, she was mortified to find her cheeks and eyes swelling enormously, along with her lips, which looked like two inflated balloons. “I looked like a distorted cartoon character!” recalls Ellie, 24. The shock and pain left her “a complete sobbing mess” and although her husband begged her to go to hospital, she was too embarrassed. The next day, weeping blisters erupted all over Ellie’s engorged lips. “I worried about what Tracey had used and when I called her, she admitted it was some product she’d bought in Sweden,” says Ellie, who then raced to see her GP. He said she was suffering an infection and put her on strong antibiotics. But Ellie feared Tracey had poisoned her and thought she might die.

In agony and horrified at her disfigurement, Ellie lay on the couch and cried for days. “When I finally returned to work a week later, my lips had gone down a little, but they still looked conspicuously big,” she recalls. “I felt so self-conscious, ugly and ashamed. Everyone was shocked by my appearance and I was in constant pain. It hurt whenever I moved my mouth to speak.”

Two weeks later, Ellie was stunned to discover that Tracey wasn’t a nurse. The “nursing” certificates on her wall were, in fact, for dermal therapy and even they weren’t in Tracey’s name. Ellie suspects Tracey has done little more than a weekend training course in dermal fillers and isn’t even a qualified beauty therapist.

Alarmingly, Ellie’s story is an increasingly common one in Australia. In an era when cosmetic treatments have become so routine that many women view Botox, laser treatments, fillers – and even surgery like liposuction and breast augmentation – as no more serious than getting a pedicure, few realise there’s a dangerous lack of regulation across the industry.
Consumers might reasonably expect that the people jabbing them with needles in a beauty salon, or operating on them with scalpels, have been properly trained – but you can’t count on it. Unlike plastic surgery, which requires years of additional training, “cosmetic surgery” isn’t recognised as a separate area of medicine in Australia. This means that anyone with a medical degree can call themselves a cosmetic surgeon – even though they may have no specialist surgical training, or even comprehensive training in the procedures they’re performing.

Lured by the opportunity to make a lot of money, some medics are ditching careers in dental surgery and dermatology to set up as cosmetic surgeons. Some are bleming up on their lucrative new field by reading books or watching videos that offer a quick “how-to” in procedures like liposuction, brow lifts and tummy tucks.

The burgeoning nonsurgical area of chemical peels, laser treatment, dermal fillers and Botox is even more worrying: anyone at all can blithely start injecting or zapping unsuspecting customers. It’s this area that’s currently generating the majority of complaints – which doubled between 2008 and 2012 – to NSW’s Health Care Complaints Commission.

Many of these cosmetic clinics don’t need accreditation, so there’s no official body to ensure equipment is sterilised, hygienic operating procedures are in place, or if there’s sufficient backup equipment to revive a client should they suffer an allergic reaction to sedation.

The reality is that Australia’s cosmetic treatment industry has become...something of a Wild West, where cut-price operators pidy fast and loose, and clients can be leftiao or disfigured with little or no recourse.

“Tt is shameful that any cowboy can hang up their shingle in Australia and call themselves a cosmetic surgeon, and the consumer is often completely unaware that no government body has stepped in to ensure they are in qualified hands,” Greens Senator Dr Richard Di Natale tells marie claire. “Far more stringent regulation is long overdue: all practitioners who are causing concern. Breast implant recipient Talia Ryan, 24, was the victim of one such doctor who, although a GPy had no serious surgical training in any area of medicine. “I chose him because he was $2000 cheaper than everyone else – now I know why,” says the Sydney secretary.

Months after her surgery, Talia’s implants are still sinking towards her stomach, creating a pressure that’s led to the patient’s severe pains when she moves. Sydney plastic surgeon Dr Kourosh Tavakoli has been booked to perform corrective surgery on her. “About 20 per cent of his patients are women who need to have their breast augmentations corrected. As well as implants ‘bottoming out’ and travelling in the abdomen like Talia’s, other issues include incorrectly sized or shaped implants shift sideways below the armpits, or move to the middle of the chest to create a kind of mono-boob,” says Dr Tavakoli. “Correcting these issues become more mainstream, procedures that renovate the skin, cleavage or facial features are increasingly regarded as standard beauty maintenance. And yet they involve invasive procedures such as incisions, injections and removal of skin and tissue. ‘Cosmetic surgery is not like having your nails done,” says Dr Mark Magunsson, president of the Queensland chapter of the Australian Society of Plastic Surgeons. “Even if correctly done, complications may occur and may include infection, blood clots, permanent nerve damage and all the risks of having a general or local anaesthetic.”

Unlike cosmetic surgeons, plastic surgeons undertake an additional five to seven years of training on top of their medical degree. Then they jump through accreditation hoops under close supervision by bodies like the AMC and the Australian Health Practitioner Regulation Agency, which also approves their fitness to use the title of plastic surgeon.

This doesn’t mean that doctors who aren’t plastic surgeons are the Keystone Cops of the sector. Recognising the erratic nature of the industry, the Royal Australian College of Cosmetic Surgery (ACCS) has set up its own facility, which accredits cosmetic surgeons. “To recognise a cosmetic surgeon on her CV is a step in the right direction,” says Dr Flynn. “But the ACCS doctors need to have undergone appropriate training, plus specific procedural training and they must also have demonstrated substantial clinical experience,” says Dr John Flynn, a spokesperson for the college. “The ACCS welcomes its new fellows are participating in continuing education and, where needed, recertification.”

The problem is that it’s a voluntary scheme, so it fails to weed out the shonky doctors and operators dragging standards down – particularly in the area of...
laser treatment and injectables. “I worked at a Botox clinic back in 2011 where I was told to double dip into a vial of Botox with new patients, but I refused,” says Rachel Tate, a Melbourne nurse. “The owner was a doctor, but he acted like a used car salesman. I suspect he was re-using needles to save money, putting clients at risk of contracting diseases like Hep C and HIV. I was horrified, so I left.”

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Some unscrupulous operators are also importing dodgy, untested versions of Botox and collagen, even though their safety hasn’t been approved by the TGA. The ACCS is taking one such complaint on behalf of Mary Phillips, a 49-year-old teacher’s assistant who discovered that her doctor had been buying cheap product – which cost a paltry $20 for five vials – from China.

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