

WARREN'S VIEW



THEY SAID IT



"Without JobKeeper, employment would have fallen by twice as much as it did."

A Reserve Bank of Australia report finds the Morrison government's program saved 700,000 Australians from the dole queue

"I reckon Annastacia Palaszczuk's doing a great job. No one wants to see restrictions in place but restrictions have made Queenslanders safe."

Anthony Albanese backs the Queensland Premier's border closures to NSW

Knowledge and the knife

Patients should have a better way of knowing what they're getting into this cosmetic surgery season

The 12 weeks between Melbourne Cup and Australia Day is the busiest time of the year for those seeking cosmetic procedures in preparation for summer.

Unless managed carefully, the country faces a new health threat brought on by the emergence of underground, unsafe and poorly qualified cosmetic entrepreneurs.

As many as 150,000 Australians are expected to splurge on cosmetic medical procedures in coming weeks as they emerge from COVID-induced lockdown with heightened disposable income. New ways of working from home have led people to become increasingly focused on their on-line screen appearance, in addition to their physical shape.

It is estimated that Australians spend more than \$1 billion on up to 500,000 separate cosmetic procedures annually, excluding the 'underground' black market, making Australia one of the 'cosmetic surgical capitals' of the world. The country now spends more per capita in this area than the United States.

In recent months, the industry has already witnessed a 50 per cent increase in demand for procedures such as breast augmentation, facelifts, liposuction, tummy tucks, gynaecomastia (man boobs) and blepharoplasty (eye lid surgery).

With international borders closed, access to overseas 'budget' cosmetic surgery which can be unregulated and dangerous, is now denied. Patients can now only seek cosmetic surgery inside Australia.



PATRICK TANSLEY

own regulatory system is worrisome.

Currently, there is no nationally accredited and easily recognisable system for patients to know whether or not they are in safe hands, or even if the doctor has any training in cosmetic surgery, as any Australian medical practitioner may call themselves a "cosmetic surgeon".

Only Australian Medical Council (AMC) accredited specialist plastic surgeons can call themselves a "plastic surgeon". Alarmingly, it turns out such plastic surgical training alone offers no protection to patients undergoing cosmetic surgical procedures.

In 2018, the AMC reported that plastic surgeons trained in Australia by the Royal Australasian College of Surgeons have a "deficit" in their experience of cosmetic surgery and qualify with a "gap in this area of practice". Other government regulators across the western world have highlighted similar issues. In 2017, the United Kingdom General Medical Council recognised qualifications in any given speciality does not imply expertise in cosmetic surgery.

Therefore, selecting an appropriately qualified surgeon for cosmetic surgery can be a complete lottery for patients.

Tragically, numerous examples already exist demonstrating the dangers of the current system.

Lauren James, a 26-year-old Victorian liposuction patient, lost her life in 2007 following complications.

According to the coroner, Ms James's death was avoidable, but her surgeon delivered a "wholly inadequate clinical response" when complications developed. The Medical Board subsequently required him to undergo further education.

Ten years later, up to 1000 women

mission by the NSW Supreme Court to launch a class action against The Cosmetic Institute. The case was brought after two women, aged 21 and 22, suffered life-threatening complications on the operating table at the company's Parramatta and Bondi Junction clinics.

Separately, another doctor had his registration cancelled under the Health Practitioner Regulation National Law by the NSW Civil and Administrative Tribunal. He was not a plastic surgeon but promoted himself as a "cosmetic surgeon". He was in fact a registered medical practitioner without any cosmetic surgery qualifications.

And in Victoria, a patient recently

had his leg amputated after botched calf-implant surgery at the hands of another plastic surgeon.

Given the AMC does not accredit any doctor as a specialist in cosmetic surgery, it is easy to understand why patients find it difficult to distinguish for example, between a Fellow of the Australasian College of Cosmetic Surgery who has undergone a minimum of 12 years of training including two years of dedicated cosmetic surgery training and medical practitioners who do not have appropriate knowledge, training and skills to undertake and deliver high-quality cosmetic surgical outcomes.

The good news is that there is a way to protect Australian patients.

Only doctors who are trained and have reached a recognised competency standard in cosmetic surgery should be allowed to call themselves a "cosmetic surgeon" in the same way that only those trained and accredited in neurosurgery may call themselves a neurosurgeon.

Regulators should lead the way by introducing a competency-based national accreditation system for all medically qualified providers of cosmetic surgical procedures, irrespective of medical background and including AMC accredited plastic surgeons. Such an objective benchmark would protect patients by allowing them to identify easily appropriately trained and skilled surgeons.

Already described as a "no-brainer" by senior health officials, for the sake of patient safety, Australians should not have to wait any longer. What matters is competency. Acceptance of competency-based accreditation is fundamental to provide a better standard in cosmetic surgery and safer care for patients.

Dr Patrick Tansley is the President of the Australasian

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However, a close look at our

have recently been granted per-

winning news

College of Cosmetic Surgery <https://www.accs.org.au>

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