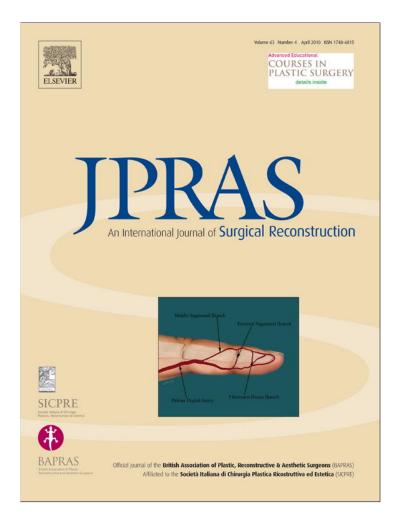
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KEYWORDS

Knowledge; Nigerians;

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Knowledge and perceptions of facial plastic surgery among a selected group of professionals in Lagos, Nigeria *

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Summary This was a questionnaire-based study among a selected group of professionals in Lagos, Nigeria to assess their knowledge, attitude and perceptions to facial plastic surgery. A well-structured questionnaire was administered to a group of professionals in the banking industry and the civil service. The respondents were asked if they had heard of 'facial plastic surgery' before and if they were familiar with some selected facial plastic surgery procedures. They were also asked if they had ever considered undergoing facial plastic surgery for any real/ perceived facial abnormalities; if they knew any close relatives/friends who had undergone facial plastic surgery and if they considered the result satisfactory or not. A total of 130 respondents participated in the study; of these, 102 (78.5%) respondents had some knowledge of 'facial plastic surgery' while 28 (21.5%) respondents had no prior knowledge of facial plastic surgery. Fifty-five of the 102 respondents had some knowledge of liposuction of the face and neck. Nineteen of the 130 respondents expressed willingness to undergo facial plastic surgery for removal of facial wrinkles and excess fat on the cheeks and neck. Only 17 (13%) of the respondents had ever thought of undergoing facial plastic surgery; of these 17 respondents, nine claimed that their facial appearance was the main reason. Respondents with perceived facial abnormalities were more likely to undergo plastic surgery than those without perceived abnormalities (P = 0.000). Twenty-four (18.5%) of the 130 respondents knew of a friend/close relative who had undergone facial plastic surgery before, and the majority (19 of the 24) considered the result of the surgery satisfactory. We conclude that most of the study participants had some knowledge of facial plastic surgery; however, only a few expressed willingness to undergo facial plastic surgery for removal of facial wrinkles and folds/fat on the cheeks and

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Knowledge and perceptions of facial plastic surgery

neck. The fact that only a few of the respondents knew someone who had undergone facial surgery may reflect the low level of availability of facial plastic surgery procedures in Nigeria. © 2009 British Association of Plastic, Reconstructive and Aesthetic Surgeons. Published by Elsevier Ltd. All rights reserved.

Cosmetic surgery was not embraced until the early 20th Century when Charles Conrad Miller wrote the first book dedicated to cosmetic surgery, in 1907.¹ Shortly thereafter, Fredrick Kolle published a text on plastic and cosmetic surgery in which he detailed the value of preoperative eyelid-skin marking to determine the proper amount to be excised during surgery.²

Facial plastic surgery has received significant attention over the past several decades due to increasing patient demand for youthful appearance.³ The goal and function of facial plastic surgery is to address all components of ageing and to correct anatomical changes to the face and neck that have occurred as a result of the normal ageing process, leaving the patient with a younger-appearing face and a long-lasting result.³

Essentially, the facial aesthetic unit consists of the forehead and brow, the periorbital region, the cheeks; nose, the perioral region and chin and the neck.⁴ This aesthetic unit undergoes age-related changes. The two main age-related changes of the upper-third of the face are brow ptosis and hyperdynamic facial lines. The eyelids often show the earliest signs of ageing: skin laxity (dermatochalasis), orbicularis muscle hypertrophy and pseudo-herniation of the orbital fat through the orbital septum.⁴ Deepening of the nasolabial crease and accentuation of the nasolabial fold are also changes associated with ageing. Ageing of the skin is the combined result of both intrinsic (genetic) factors and extrinsic influences from the environment (smoking, chemical, gravity and ultraviolet exposure).⁵

In Europe and America, both men and women are becoming increasingly concerned about their physical appearance and are seeking cosmetic enhancement, and most studies report that people are generally happy with the outcome of cosmetic procedures.⁶ It is reported that the role played by facial plastic surgery is one of initiating a positive cycle by changing the patient's self-perception rather than one of direct social impact from the changed features.⁷ Anecdotal evidence suggests that Nigerians, especially female models and those in the social upper class, are increasingly seeking plastic surgery for the correction of real/perceived facial abnormalities. Little is known about the public perception of facial plastic surgery in Nigeria. In an era of managed health care and social reform, public perception, or misconception, may ultimately have a significant impact on this specialty.⁸

Therefore, this study aimed to assess the knowledge, attitude and perceptions regarding facial plastic surgery among a selected group of professionals in Lagos, Nigeria.

Materials and methods

This was a self-administered-questionnaire-based study among Nigerian professionals. A well-structured questionnaire

was administered to a group of professionals in the banking industry and the civil service. Information sought in the questionnaire included: age and sex of the respondents, as well as educational and professional status. The respondents were asked if they had heard of 'plastic facial surgery' before and if they were familiar with some selected facial plastic surgery procedures; if they were willing to undergo facial plastic surgery for removal of facial wrinkles and excess facial fat; if they perceived any abnormalities on the face, nose, cheek, eyelids or forehead; if they had ever thought of undergoing facial for any real/perceived facial abnormalities; if they have previously undergone facial plastic surgery; or if they knew any close relatives/friends who had undergone facial plastic surgery and if they considered the result satisfactory or not. The facial plastic surgery procedures were translated into simple English to aid understanding (e.g., blepharoplasty - eye-lid plastic surgery; mid-facial rejuvenation/lifting – plastic surgery of middle face).

Data analysis

Data were analysed using the SPSS for Windows (version 12.0; SPSS Inc., Chicago, IL, USA) statistical software package and was presented both in descriptive and tabular formats. The test of significance was used as appropriate, and *P* value was set at ≤ 0.05 .

Results

A total of 130 respondents participated in the study. This included 68 males and 62 females; with mean $\pm\,\text{SD}$ age of 32.3 ± 18.1 years (age range: 18-55 years). All participants had received post-secondary education. Of the total, 102 (78.5%) respondents had some knowledge of 'facial plastic surgery' while 28 (21.5%) respondents had no prior knowledge of facial plastic surgery. Of the 102 respondents with some knowledge of facial plastic surgery; 51 (50%), 33 (32.3%) and 25 (24.5%) had heard of the face-lift procedure, blepharoplasty and mid-face rejuvenation, respectively. Fifty-five of the 102 respondents had some knowledge of liposuction of the face and neck (Table 1). None of the respondents had undergone plastic surgery before, and only a few (19 of the 130) of the respondents expressed willingness to undergo facial plastic surgery for removal of evelid and forehead wrinkles, cheek folds or excess fat on the cheeks and neck. Table 2 depicts the response of participants to any perceived abnormalities in the facial region. Only 17 (13%) of the respondents had ever thought of undergoing facial plastic surgery; and all of them reported perceived facial abnormalities. Of these 17 respondents, nine claimed that their facial appearance was the main reason, followed by nasal deformity (Table 3). Twenty-four (18.5%) of the 130 respondents knew of a friend/close relative who had undergone facial plastic
 Table 1
 Knowledge of 102 respondents regarding specific

 facial plastic procedures
 Fractional specific

Procedure	Number of respondents	
	Yes	No
Blepharoplasty	33	69
Mid-facial rejuvenation	25	77
Face lift procedure	51	51
Periorbital rejuvenation	25	77
Liposuction of the face and neck	55	47
Laser facial resurfacing	38	64
Rhytidectomy	45	57
Rhinoplasty	48	54
Otoplasty	22	80

surgery earlier; and the majority (19 of the 24) considered the result of the surgery satisfactory.

No significant difference was observed between male and female respondents with regards to knowledge of facial plastic surgery (P = 0.06), willingness to undergo facial plastic surgery (P = 0.6), having ever thought of undergoing facial plastic surgery due to perceived facial abnormalities (P = 0.3) and having seen a friend/close relative who had undergone facial plastic surgery (P = 0.25). Table 4 shows gender variation with regards to some studied variables. A significant association was found between perceived facial abnormalities by respondents and the thought of undergoing facial plastic surgery (P = 0.00; Table 5).

Discussion

Most of the respondents in the present study had some knowledge of facial plastic surgery. Few of those who volunteered the source of their knowledge claimed that most information available to them with regards to facial plastic surgery was derived from television. Plastic-surgery reality television has been reported to play a significant role in patient perceptions and decision making with regards to cosmetic surgery. Patients who regularly watched one or more reality-television shows reported a greater influence from television and media to pursue cosmetic surgery, felt more knowledgeable about cosmetic surgery in general and felt that plastic-surgery reality television was more similar to real life than did low-intensity viewers.⁹

Table 2	Participants'	response	to	perceived	abnormali-
ties in the	facial region				

	Number of respondents		
	Yes	No	
Facial abnormality	7	123	
Nose abnormality	14	116	
Cheek abnormalities	10	120	
Eyelids	10	120	
Forehead	5	125	

The increased demand for plastic surgery procedures among young patients is due partially to increased media exposure to the available procedures offered by plastic surgeons.^{10,11}

Only a few (14.6%) of the respondents expressed a willingness to undergo facial plastic surgery for the removal of facial wrinkles and folds. This may be due to the fear of surgery, the low level of social acceptance of cosmetic surgery and a low level of awareness of the success achievable with facial plastic surgery in the environment studied. Pearl and Weston¹¹ reported that those who desired aesthetic surgery described people who have cosmetic procedures as 'motivated', whereas those who would not choose this option believed individuals who do so are 'vain'. It has been established that self-esteem, social acceptance of cosmetic surgery and body image are the strongest predictors of motivation to pursue cosmetic surgery.¹²

Adolescent patients are seeking plastic surgery to correct deformities or perceived deformities in increasing numbers.¹⁰ It is essential for the physician to understand the influence of perceived body-image irregularity that motivates patients of all ages to request plastic surgery. A successful aesthetic procedure can have a positive influence on a mature, well-motivated patient, while surgery on a psychologically unstable adolescent can be damaging to the patient.¹⁰ Although few respondents in the this study reported perceived facial abnormality; all of them had considered undergoing facial plastic surgery for the correction of the perceived abnormality. Therefore, the availability of facilities for facial plastic surgery is imperative. This involves the training of facial plastic surgeons as well as the provision of surgical facilities. Anecdotal evidence suggests that an appreciable number of individuals in Nigeria seek to undergo cosmetic surgery abroad.

In the present series, no significant gender difference was found with regards to willingness to undergo facial plastic surgery and having ever considered undergoing facial plastic surgery due to perceived facial abnormalities. Although most patients seeking facial plastic surgery are females, reports have shown that an increasing number of men are contemplating having plastic surgery performed.¹³ The upward trend for men parallels an overall trend for increased media exposure afforded to plastic surgery in reality- and dramatic-television series and cinema which serves to boost the public awareness of the life-enhancing properties of plastic surgery, which in turn increases the likelihood of greater male participation in the emerging 'looking your best' culture.¹³ An evaluation of member survey data from the American Academy of Facial Plastic and Reconstructive Surgery (AAFPRS) and the American Society for Aesthetic Plastic Surgery (ASAPS) showed a general trend towards decreased surgical but increased non-surgical facial enhancement procedures in both males and females.¹³ On a case-per-physician basis, AAFPRS physicians performed significantly more procedures for both males and females for every procedure and every year evaluated.¹³ Male motivation for undergoing facial plastic surgery usually centres on wanting to look younger as well as a desire to remain competitive in the work force.¹³

None of the respondents had undergone plastic surgery earlier, and only a few (18.5%) knew a friend/close relative

Table 5

Knowledge and perceptions of facial plastic surgery

 Table 3
 Reasons for having thought of undergoing facial plastic surgery

	Number of respondents ^a
Because of facial appearance	9
Because of nose deformity	7
Because of sagging cheek	4
Because of eyelids	5
Because of wrinkles on the face	2
Because of drooping cheek	3
^a Some respondents have more than o	ne reason.

who had undergone facial plastic surgery. This contrasts the finding of a survey where two-thirds of the respondents knew someone who had undergone cosmetic surgery.¹¹ This difference may reflect the low level of availability of facial plastic surgery procedures in Nigeria. Most (79%) of the respondents in the present series who knew a friend/close relative who had undergone facial plastic surgery considered the results satisfactory. The science and art of facial plastic surgery has been refined over the last few decades, and over 80% of patients have reported satisfaction with treatment following aesthetic surgery.^{14,15} The most important measures of outcome in facial cosmetic surgery are quality of life and patient satisfaction - in contrast to other, more objective measures such as complications or mortality rates.¹⁶ In facial plastic surgery, particularly cosmetic facial plastic surgery, the overwhelming majority

Table 4Gendervariationvariables	regarding	some	studied
Variable (Number of	Sex		P value
respondents)	M	F	
Have you heard			
of facial plastic			
surgery before?			
Yes (102)	49	53	0.06
No (28)	19	9	
Are you willing			
to undergo facial			
plastic surgery for facial			
wrinkles and folds?			
Yes (19)	11	8	0.6
No (111)	57	54	
Have you ever			
thought of undergoing			
facial plastic surgery			
for any perceived abnormalitie	s?		
Yes (17)	7	10	0.32
No (113)	61	52	
Do you know			
of any close			
friend/relative who has underg	gone		
facial plastic surgery before?			
Yes (24)	10	14	0.25
No (106)	58	48	

Perceived facial abnormalities of:	Thought of undergoing plastic surgery		P value	
	Yes	No		
Face				
Yes (7)	5	2	0.00	
No (123)	12	111		
Nose				
Yes (14)	12	2	0.00	
No (116)	5	111		
Cheek				
Yes (10)	9	1	0.00	
No (120)	8	112		
Eyelids				
Yes (10)	8	2	0.00	
No (120)	9	111		
Forehead				
Yes (5)	4	1	0.00	
No (125)	13	112		

Relationship between perceived facial abnor-

of results are subjective in nature, be they patient related or based upon the surgeon's own personal assessment of outcome. For this reason, the use of validated instruments to quantify and measure these results is of particular importance in facial plastic surgery compared with other fields of medicine where many outcomes are objectively determined, such as mortality.¹⁷

In the present study, a significant association was found between perceived facial abnormalities by respondents and the thought of undergoing facial plastic surgery. This may not be unexpected because of the fact that facial deformities have a significantly adverse functional consequence.¹⁸ It is reported that facial deformities have a significantly negative effect on perceptions of social functionality, including employability.¹⁸

As long as our perceptions of youth and beauty continue to be admired, so will the demand for facial aesthetic surgery. Although most of the studied participants had some knowledge of facial plastic surgery, only a few expressed willingness to undergo facial plastic surgery for removal of facial wrinkles and folds/fat on the cheeks and neck. A significant association was also found between perceived facial abnormalities by respondents and the thought of undergoing facial plastic surgery. The fact that only a few of the respondents knew someone who had undergone facial surgery may reflect the low level of availability of facial plastic surgery procedures in Nigeria. Therefore, the availability of facilities for facial plastic surgery is imperative. This involves the training of facial plastic surgeons as well as the provision of surgical facilities.

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