

Should all advertising of cosmetic surgery be banned?

After the recent breast implant debacle, the Department of Health is reviewing cosmetic procedures in the UK, including advertising.

Fazel Fatah says it preys on patients' vulnerability and should be banned, but **Sally Taber** thinks regulation can give sufficient protection



Banned under existing rules

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This week's poll asks "Should all cosmetic surgery advertising be banned?"

- Cast your vote on bmj.com
- News: England's health secretary orders three new inquiries into safety of cosmetic surgery and devices (*BMJ* 2012;344:e388)
- News: Surgeons' leaders call for ban on cosmetic surgery advertising (*BMJ* 2012;344:e627)

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YES Advertising prescription drugs to the public is banned in the United Kingdom, but advertising is allowed to promote invasive surgical procedures that may not be clinically necessary and pose risks of harm and complications. Arguably, the criteria for operating on patients who are not physically ill or deformed should be more stringent than those for curing illness or correcting deformities. A minimum requirement should be a complete ban on encouraging and recruiting people to undergo such treatments—and advertising for cosmetic surgery does just that.

The World Health Organization's definition of health, "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity," has been argued about by many, but it emphasises the mental wellbeing of the individual.¹⁻⁴ Cosmetic surgery is practised to try to improve this aspect of health: it treats symptoms of self consciousness, a state of mind when a self perceived abnormality of body image affects the wellbeing of the patient.

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NO Cosmetic surgery in the United Kingdom is a growing market and behaves like the market for any other consumer good. A growth in demand (fuelled by celebrity coverage in the media) leads to a competitive increase in supply, leading in turn to lower prices. What was once the preserve of the rich few is now affordable to many.

Every consumer magazine from *Woman's Own* to *Hello!* gives advice on how to improve one's appearance and stay young. Direct advertising of cosmetic surgery is a tiny, albeit important, aspect of this culture, and it is misguided to think that banning it will reduce demand.

The functions of advertising in this, as in any free market, are to inform and persuade. Restriction of information can lead to monopolies that deform the market, acting against the public interest. It would be regressive to back an advertising ban in this multimillion pound industry.

The Independent Healthcare Advisory Services (IHAS) is a trade body of which all major independent acute healthcare providers in the UK are members. IHAS believes that advertising of members' services is a legitimate and reasonable business practice and that a general restriction would

From talking to the thousands of cosmetic surgery patients whom I have treated in the past 20 years, I know that many live with their feelings for years before they seek help. It is within this context of vulnerability that these patients are assessed and advised about invasive surgery to deal with complaints that are not caused by disease. This has led some to question the morality of cosmetic surgery and to consider it peripheral to medicine.⁵ Advertising of cosmetic surgery aims to stimulate demand and encourage patients to take risk. This cannot be in the best interests of these vulnerable people. As the ethicists Franklin G Miller and colleagues said, "By promoting *dis-ease* and thus stimulating demand for cosmetic surgery, such advertisements clearly violate the internal morality of medicine."⁵ Such patients must not be taken outside the practice of medicine and the doctor-patient relationship, to be treated instead as clients of a "cosmetic industry," where a different morality governs the relationship.

The report of the All Party Parliamentary Group on Body Image found that 60% of adults feel ashamed of the way they look.⁶ The report refers to many studies, including a survey by Girl Guide UK in 2010 of more than 1200

not be in the public interest. However, advertising in healthcare, as in any other sector, must not lead to public harm. Some invasive procedures included in our members' repertoires contain such inherent risk to a patient that restraint must be applied in advertising them. This is why IHAS members have established and follow a code of practice for the advertising of their services that is designed to avoid harm to the public.

Cosmetic surgery and injectible procedures are not clinically indicated and have risks attached. The UK government holds that it has no place in regulating activities such as these, which are undertaken entirely at the volition of the consumer. It expects the industry to regulate itself, acting within the general framework of existing laws, such as the Medicines Act (to control use of prescription-only drugs) and the Health and Safety at Work Act (to ensure that the environment is clinically acceptable).

Advertising copy should not aim to persuade a patient to opt for multiple procedures if they would not otherwise do so. In particular, advertisements should not offer discounts or any financial inducement for multiple procedures. IHAS, representing the responsible element of independent healthcare, thinks that such practices overstep the mark of fully informed consent. IHAS guidelines therefore ban them outright.^{1 2}

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participants of different ages. In all, 70% of women and 40% of men reported that they have felt pressure from television and magazines to have a perfect body, and between one third and half of all young girls fear becoming fat and engage in dieting or binge eating. Cosmetic surgery advertisements prey on these feelings and vulnerabilities to offer a quick fix.⁷

"The ads are deliberately designed to convince people who might previously have thought that their appearance was acceptable that they are in fact seriously inadequate unless they seek a surgical correction for their newly discovered 'problem,'" according to Miller and colleagues.⁵ A study by the American Society of Plastic Surgeons found that up to 25% of its members violated their code for advertising.⁸

The all party parliamentary group concluded that a new separate code of advertising for cosmetic surgery is needed to protect the public, an acknowledgment of the failure of existing guidelines. The British Association of Aesthetic Plastic Surgeons (BAAPS) says that an outright ban is in the

best interest of patients but has proposed minimum safeguards for patients.⁹

Adverts that would have fallen foul of the new code include one for the "bikini body transformation package," which promises a perfect beach body and promises savings of up to £2000 on holidays,¹⁰ and a "feel good package," that targeted newly divorced women and new mothers for breast enhancement, liposuction, teeth whitening, and Botox. We've also seen adverts for gift vouchers for cosmetic surgery; cosmetic surgery procedures as lottery prizes; and promotions for half price surgery.¹¹ These advertisements were clearly not designed to inform and help patients. BAAPS has issued many statements condemning these marketing ploys as unethical. Clearly a voluntary code for advertising cosmetic surgery is not enough to stop exploitation that plays on patients' vulnerability.

To keep the practice of cosmetic surgery ethically sound it is essential to reverse its commoditisation. It should begin with a total ban on advertising because, as Miller and colleagues state, "the consumer-oriented, business context of cosmetic surgery risks compromising professional integrity, particularly insofar as it makes use of demand-stimulating marketing."⁵

The underlying principle of advertising in this sector is that providers should act responsibly towards patients by giving them balanced and factual information, giving them adequate time to reflect, and making sure that they understand that not all advertised treatments may be suitable for them. The IHAS has three relevant codes to which all members accede.¹⁻³

IHAS works in conjunction with the Advertising Standards Authority committee on advertising practice and the authority's code. This, like the IHAS advertising code, is voluntary, but is backed by sanctions if transgressed. Although the credibility of voluntary codes may be criticised because of problems with policing and enforcement, some cases illustrate the effectiveness of the IHAS codes. For example, Botox providers used an online company called Groupon to advertise at a reduced price to a small number of consumers within a limited timeframe.⁴ This breached the Medicines Act of 1973, which forbids direct advertising of a prescription-only drug to consumers. IHAS also found concerns with a cosmetic surgery provider using Groupon to advertise breast augmentation, with an advert that provided too little information about the procedure, no opportunity for prior consultation, and no time to reflect.⁵ It raised these concerns with the ASA, which told Groupon to remove

these advertisements. An investigation by the Office of Fair Trading found "widespread" examples of breaches of consumer protection rules by Groupon.⁴ Another company, Wowcher, advertised cosmetic treatments in the *Metro* newspaper with discounts for a fast sign-up. IHAS advised Wowcher of its transgression, which has not been repeated.⁶ Of course, not all advertisements that offend ethics can be handled by IHAS.

Our members, intense rivals in the marketplace, sometimes unintentionally overstep the mark with their advertisements. On detection, all transgressors have agreed to remove the offending article and to be more careful to comply. Should a member not comply, it would probably be evicted from membership, as was the member that used Groupon to advertise breast augmentation, and the transgression repudiated publicly on behalf of complying members.

The substantial demand for, and profits from, cosmetic injectable treatments has led to many new providers entering the market. Many of these providers are inappropriately trained and use products of uncertain provenance in unhygienic surroundings. The public dangers of this uncontrolled incursion into what should be medical territory are substantial. At government request, IHAS established an industry reference group that has assembled industry standards of

Physicians have traditionally abstained from advertising for ethical reasons.¹² The doctor-patient relationship and the professional duty of care a physician has for patients is not similar to business relationships, where advertising plays an important role in bringing customers and providers together.

France has outlawed advertising for aesthetic surgery as well as defining who can do cosmetic surgery in order to protect patients.¹³ In the UK, the Department of Health has ordered a review of cosmetic practices, due to be published in April 2013. One remit is to look at the advertising of cosmetic surgery to the public.¹⁴ The review should be concerned only with patients' safety. Advertising for cosmetic surgery may be legal but it is not necessarily ethical. Sir Bruce Keogh, who is leading the inquiry, will be remembered for the action he takes.

Competing interests: FF is immediate past president of BAAPS. During his presidency the council adopted the list of restrictions quoted in this article for a new code of advertising for cosmetic surgery that was submitted to the Committee of Advertising Practice.

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Advertisements should not offer discounts or any financial inducement for multiple procedures

best practice. It then set up a quality assurance mark and a publicly accessible register of professionals and clinics that meet the standards (www.treatmentsyoucantrust.org.uk). Providers that do not comply will be starved out of the market. This is the only means in the UK for consumers to assure themselves that their cosmetic injectable treatment will be safe.

The register will work only if patients know about it. Unfortunately, many doctors who use injectable cosmetic substances refrain from joining the register, lessening its impact, confusing the public, and leaving the door open to rogues. The British Association of Aesthetic Plastic Surgeons would do better to put its weight behind this quality assurance initiative, and the IHAS codes for good practice in promoting cosmetic surgery, than to seek a ban on advertising, which will merely leave a confused public prey to dangerous exploitation.

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