

## NEWS

## Surgeons condemn UK's lack of action on regulating cosmetic treatments

Cosmetic surgery regulation criticised, Zosia Kmietowicz

BMJ

Surgeons have condemned the UK government for “wasting an opportunity to ensure patient safety” after it rejected advice to introduce tighter controls on the people and companies involved in cosmetic treatments.

The British Association of Aesthetic Plastic Surgeons, which represents most plastic surgeons involved in private practice, said it feared that the government’s inaction meant “business as usual” in the “Wild West” of the cosmetic surgery industry.

Last April the NHS’s medical director, Bruce Keogh, published his final review into the cosmetic treatment industry.<sup>1</sup> This called for dermal fillers, which are currently regulated in the same way as toothbrushes and electric plugs, to be made prescription-only products that are regulated as medical devices. The review followed a scandal involving the French company Poly Implant Prothèse, which had been making breast implants using non-medical grade silicone.<sup>2</sup>

It also recommended that people who administer non-surgical interventions should have accredited qualifications, that they should be registered, and that their work should be overseen by a qualified medical practitioner.

In its response to the review the government said that it had accepted “the principles of the Keogh review and the overwhelming majority of its recommendations,” but it did not commit to legislative action on any of these recommendations.<sup>3</sup>

The Royal College of Surgeons will ensure standards for cosmetic surgery for surgeons, but there is no such oversight for other medical and non-medical practitioners who are involved in many non-surgical treatments, such as injections of dermal fillers and Botox.

Commenting on the government’s response Rajiv Grover, a consultant plastic surgeon and president of the British Association of Aesthetic Plastic Surgeons, said, “Frankly, we are no less than appalled at the lack of action taken—this review represents yet another thoroughly wasted opportunity to ensure patient safety. With all the evidence provided by the clinical community, choosing not to reclassify fillers as medicines with immediate effect or setting up any kind of compulsory register beggars belief. Legislators have clearly been paying only lip service to the sector’s dire warnings that dermal fillers are a crisis waiting to happen.

“Most shockingly of all, the fact that there is no requirement for the actual surgeon involved to provide consent for the procedure makes a mockery of the entire process. It’s business

as usual in the Wild West and the message from the government is clear: roll up and feel free to have a stab.”

The British Association of Dermatologists was also concerned at the lack of any enforceable action, particularly with regard to registering practitioners.

Last December the presidents of the British Association of Dermatologists, the British Association of Aesthetic Plastic Surgeons, and the British Association of Plastic, Reconstructive and Aesthetic Surgeons warned, “Without a compulsory specialist register, that includes all practitioners in this field—both medical and non-medical—the public will be prey to a two tier system; good practice by well qualified professionals on one level, a level that will almost certainly cost the consumer more, and a cut price, budget approach provided by untrained practitioners with little consideration of risk and redress for complications on the other, lower, level.”

The Keogh review also recommended that the parliamentary and health service ombudsman should be extended to cover the whole of private healthcare, which the government said it was exploring.

And although the government accepted that all doctors should have indemnity insurance to compensate patients if procedures go wrong, it did not address the recommendation that all people who carry out cosmetic treatments should be insured.

Action Against Medical Accidents, a patient safety charity, called the government’s response “too little, too late.”

The charity’s chief executive, Peter Walsh, said, “We welcome this response as far as it goes. It signals that government is at least taking these problems with the cosmetic treatment industry seriously at last. However, we have seen too many people harmed by rogues in this industry already. We are disappointed not to see all providers of cosmetic treatment having to register and be regulated by the Care Quality Commission, or a proper compensation scheme created for victims of the industry. We need to see action not words now.”

1 Torjesen I. Cosmetic interventions need tighter controls to protect patients, review concludes. *BMJ* 2013;346:f2631.

2 O’Dowd A. UK recommends PIP breast implants should not be removed. *BMJ* 2011;343:d8313.

3 Department of Health. Government response to the review of the regulation of cosmetic interventions. Feb 2014. [www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/279431/Government\\_response\\_to\\_the\\_review\\_of\\_the\\_regulation\\_of\\_cosmetic\\_interventions.pdf](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/279431/Government_response_to_the_review_of_the_regulation_of_cosmetic_interventions.pdf).

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## Figure

