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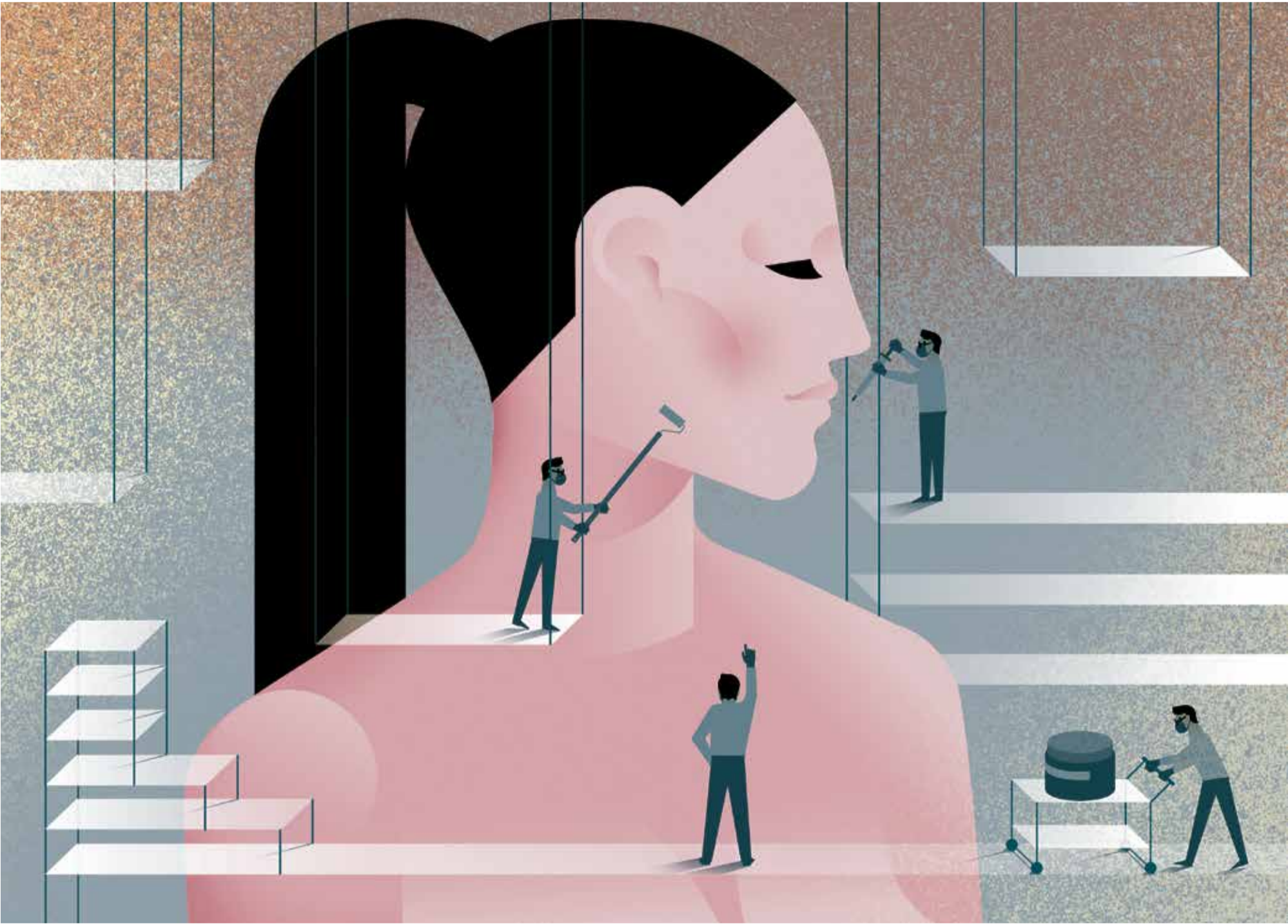
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# Gunning for the cosm

In 2013 the government published the findings of its investigation into procedures market, but what has changed three years on from the *Keogh*

OVERVIEW  
VICKY ELDRIDGE

Despite continuing to grow year on year, the cosmetic procedures market, encompassing cosmetic surgery and non-surgical aesthetic procedures, has been constantly rocked by negative headlines of unscrupulous practice and treatments gone wrong.

Often described as a regularity minefield, the terms “cosmetic cowboy”, “botched” and “bogus” are used with alarming regularity when referring to both surgical and non-surgical treatments.

It may seem ironic then that recent statistics have shown exponential growth in the sector. The global facial aesthetics market is expected to exceed £3.8 billion by 2020, according to a report by Technavio, while the British Association of Aesthetic Plastic Surgeons (BAAPS) reported a record number of Brits (51,140) underwent surgery in 2015, a double-digit rise.

But why has the trend for cosmetic enhancement continued to boom despite the negative press and lack of regulation? The truth is that the headlines only reflect a snapshot of an industry that is, for the most part, operating to high ethical standards.

So, what is the current situation when it comes to regulation in the UK? Following the PIP breast implant scandal in 2011, the government commissioned Professor Sir Bruce Keogh, national medical director at NHS England, to spearhead a review into cosmetic interventions in England in a bid to tighten up standards.

The *Keogh Review* highlighted a number of areas of concern, including unethical marketing practices, widespread use of misleading advertising, lack of training and unsafe practices, and made a number of recommendations to improve clinical practice and safety. Patient safety, it said, must be a priority.

However, despite the report’s recommendations, the government decided against statutory regulation and the industry was left to police itself.

Three years on and reports about botched procedures don’t seem to have slowed down. The #SafetyInBeauty campaign reported a record year of complaints in 2015 and BAAPS said two out of three surgeons had seen patients suffering complications from dermal fillers. However, it’s not all doom and gloom. While critics would have us



believe that nothing has changed since the *Keogh Review*, in reality some positive steps are being taken to safeguard patients.

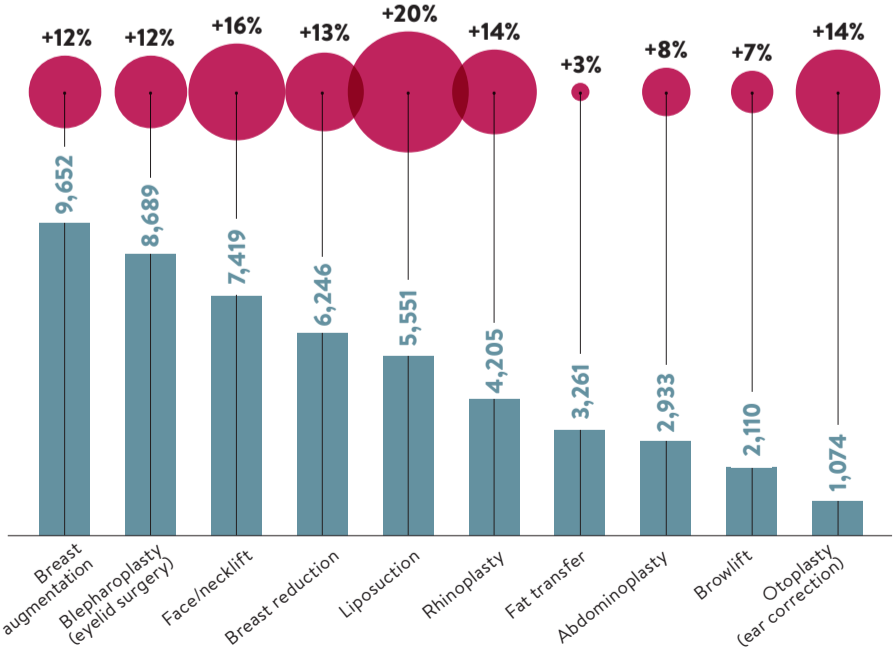
This year saw the first statutory regulation in the UK come into force in Scotland. From April 2016, all practitioners carrying out non-surgical cosmetic interventions, such as botulinum toxin, dermal fillers and teeth whitening, are subject to checks by government-approved body Healthcare Improvement Scotland. Those not

conforming could face consequences from as early as 2017.

In England the situation is somewhat different, however, and a number of different steps are being taken in a bid to take control of the situation.

One of the areas highlighted by Keogh was training and Health Education England (HEE) was commissioned to examine standards, publishing its recommendations for a framework of formal education for those providing aesthetic treatments earlier this year. While this is not a le-

NUMBER OF UK SURGICAL PROCEDURES IN 2015



Source: BAAPS 2016

# etic cowboys

the lack of regulation in the cosmetic  
Review?



Jonathan Knowles/Getty Images

“  
Initiatives have  
been established  
with the  
ultimate goal of  
safeguarding the  
public from rogue  
practitioners

The Royal College of Surgeons has also published its own set of professional standards, specifically for cosmetic surgery, which will supplement the GMC’s guidance and later this year will launch a new certification scheme, allowing patients to search more easily for a surgeon who has the necessary skills and experience to perform the procedure they are considering.

In addition, the GMC has published a guide for patients considering cosmetic procedures, which gives advice and information on things to take into account and the questions they should ask their doctor.

June also saw the introduction of a new Cosmetic Redress Scheme, designed to resolve complaints made by consumers against traders in the cosmetic, aesthetic and beauty sectors. This came as a result of new legislation introduced in October 2015 that requires all traders to signpost consumers to a government-authorised consumer redress scheme.

In July, Save Face, a commercially funded register established in 2014, was accredited by the Professional Standards Authority for Health and Social Care (PSA). The register is voluntary and practitioners who sign up can display a logo to show they have complied with certain criteria. However, it is not a government-backed regulator and concerns have been raised over it being a for-profit organisation.

Treatments You Can Trust offers a register of injectable cosmetic providers and is accredited by the PSA.

All these initiatives have been established with the ultimate goal of safeguarding the public from rogue practitioners. But while the industry does its part those seeking treatment also have a role to play.

The challenge now is public education and making sure those wanting cosmetic procedures are seeking them from the right people and making well-informed, safe choices.

gal requirement, it may go some way towards clarifying the levels of qualifications those providing non-surgical treatments should have.

A Joint Council for Cosmetic Practitioners (JCCP) and Clinical Standards Authority for Non-Surgical Cosmetic Interventions (CSA) have also been established. The CSA has been tasked with delivering a definitive set of clinical and practice standards based on a review of current practice and the work previously undertaken by the HEE. The JCCP, which aims to launch in April 2017, sees five key industry bodies – the British Association of Cosmetic Nurses, the British College of Aesthetic Medicine, the British Association of Dermatologists, the British Association of Plastic Reconstructive and Aesthetic Surgeons and BAAPS – working together to take these initiatives forward.

Another positive move came in June when the General Medical Council (GMC) introduced new standards for doctors carrying out cosmetic procedures. The guidance says doctors must advertise and market services responsibly; give patients time for reflection; seek a patient’s consent themselves, not delegate it; provide continuity of care and support patient safety by making full and accurate records of consultations and contributing to programmes to monitor quality and outcomes, including registers for devices such as breast implants. It also warns against the use of promotional tactics, such as “two-for-one” offers and bans the practice of offering procedures as prizes.

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# THE EYES HAVE IT

*Introducing Radara – the latest non-surgical skincare innovation for fine lines and wrinkles*



Eyes are the windows to the soul, so the saying goes. Yet this delicate area is often the first to show the wear and tear of daily life. The tell-tale signs of ageing such as fine lines, wrinkles, dryness and loss of elasticity can sometimes make us appear older or more tired than we feel.

So what can we do about it? Many anti-ageing treatments now include hyaluronic acid or HA. More than just a beauty buzzword, HA is nature’s own plumping molecule, which can deplete in skin over time, leading to a loss of support, hydration and luminosity. What’s more, the skin’s natural barrier function means that most creams and serums simply sit on the surface, leaving the HA unable to penetrate deeply enough to make a difference.

This is where Radara is unique: this new innovation in advanced skin rejuvenation uses patented micro-channelling technology to carry HA deep into the skin. The thin, flexible Radara patches are coated in thousands of tiny plastic “pins” which painlessly create micro-channels in the skin, allowing the specially formulated HA serum to penetrate deeply to where it is most needed.

Designed to fit seamlessly with your existing skincare regime and other aesthetic treatments, Radara takes just five minutes to apply each night for the one-month treatment period. Clinical trials showed that in just four weeks, Radara delivers smoother, firmer skin and reduced lines and wrinkles – with no pain, redness or downtime.

The unique micro-channelling patches allow the pure HA serum to penetrate deeper into the skin, doubling the efficacy compared to serum alone. Visible results can be seen as early as two weeks, with skin benefits continuing even after treatment completion. Tests showed skin quality improvements and wrinkle reduction continued for at least four weeks post-treatment.



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**01 Repair:** Radara’s unique micro-channelling patch technology encourages new collagen production and allows deeper penetration of the HA serum.

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**03 Replenish:** Skin quality is boosted by restored elasticity, hydration and support, with a radiant, refreshed and luminous appearance.

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Ref: Clinical Data: Innature Ltd, Dermatest data on file

“  
A faster, cleaner, more efficient way of turning back the clock around your eyes – infinitely preferable to an eye cream... Vogue

AS SEEN IN  
VOGUE



SAFE PROCEDURES  
WENDY LEWIS

The cosmetic surgery boom is being fuelled by our insatiable appetite for looking good and staying youthful, as well as the proliferation of technological advancements and less invasive alternatives to full cosmetic surgery. Just check out the images of Kim Kardashian’s vampire facial, Kylie Jenner’s lip fillers, Brazilian butt lifts or breast enhancements on Instagram and Snapchat if you want to know what’s trending.

According to the latest figures from IMCAS, the International Master Course on Ageing Skin, Europe’s cosmetic market is growing at a rate of 6 per cent a year across all segments. By comparison, the United States shows 7 per cent annual growth, Latin America is almost 9 per cent and the Asia-Pacific region has the highest growth of more than 13 per cent.

The European market is worth €1.7 billion (£1.4 billion) in 2016 and should reach €2.2 billion (£1.8 billion) in 2020. The two segments with the highest market share were injectables (botulinum toxin, fillers, fat, platelet-rich plasma) at 39 per cent and energy-based devices (lasers, radio frequency, ultrasound, cryolipolysis) at 29 per cent. Body contouring systems were noted to have the highest growth rate in the latter category of 13.6 per cent a year.

Similarly, the International Society of Aesthetic Plastic Surgery released statistics in July on the top five non-surgical procedures around the world to be botulinum toxins, hyaluronic acid fillers, hair removal, photo rejuvenation and non-surgical fat reduction. Whereas surgical procedures, such as facelifts, rhinoplasty or breast augmentation, are performed by licensed surgeons who have proper training, when it comes to anything less than surgery, such as injectables, intense pulsed light and skin tightening devices, the rules are far more lax. In the UK, for example, non-medically trained individuals may perform some of these procedures in beauty clinics and spas.

So is it really any wonder that consumer confusion abounds on how to choose the right practitioner and the right procedure?

“The cosmetic sector has seen a 300 per cent rise in popularity over the last decade with one in ten procedures being non-surgical. This is a result of improvements in safety, efficacy and reduction in downtimes, and is further fuelled by heightened media exposure and celebrity endorsements which have removed some of the stigma attached to ‘having work done’. But this rapid growth has undoubtedly exceeded the improvements in regulation of the industry which should go hand in hand,” warns Rajiv Grover, London plastic surgeon and former president of the British Association of Aesthetic Plastic Surgeons.

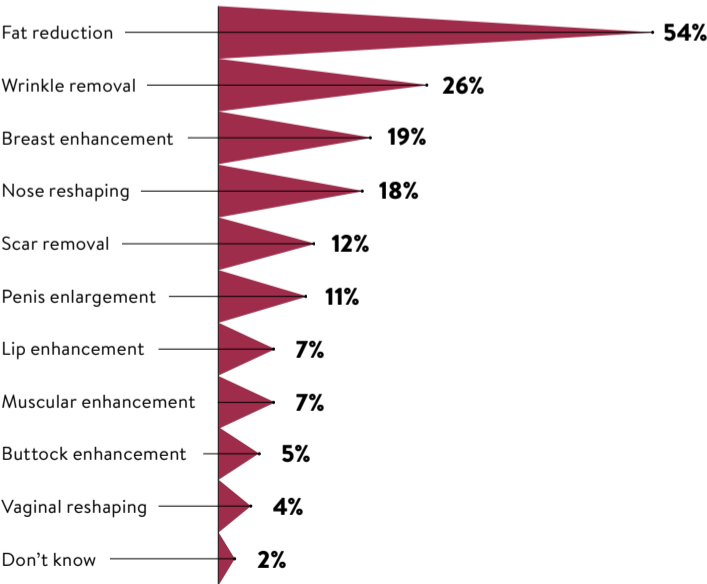


Hero Images/Getty Images

# Staying safe despite the cosmetic hype

Improvements in safety, efficacy and reductions in downtime have resulted in a rapid growth in the cosmetic procedures sector, but there remains a need for caution

WHAT COSMETIC SURGERY WOULD YOU LIKE TO HAVE?  
QUESTION ASKED OF PEOPLE WHO WOULD WANT COSMETIC SURGERY, IF MONEY WAS NO OBJECT



Source: YouGov 2015

“The PIP breast implant crisis in 2012 and subsequent *Keogh Review* in 2013 shone a light on the sector underlining what it called, some ‘grubby’ practices. To address these concerns the Department of Health has committed to establishing a national breast implant register by

2017, allowing accurate tracking of implants and providing an early warning system of problems.”

Injectable fillers and botulinum toxins are another category where there is cause for concern. “The *Keogh Review* also emphasised that injectable fillers were a ‘crisis waiting

to happen’. The recommendation here was that fillers be reclassified so that they became prescription-only. This would allow better licensing of products as they would be tested like a medicine rather than just a medical device,” says Mr Grover. As he points out, this benefit could only be legislated after Europe-wide approval by all 28 European Union member states and Brexit now provides a means for the UK to set its own regulations for the cosmetic sector.

Current EU legislation does not classify fillers as a medicine or drug, but as a medical device, so the scrutiny is less intense. EU medical device regulations only require products to carry a CE or European conformity marking. These disturbingly minimal regulations place the onus on consumers to rely on claims from distributors and manufacturers about the safety and performance of their products, which can be risky. Therefore, choosing a qualified practitioner who can be trusted to offer rock-solid recommendations and operates a professional and fully registered clinic is essential.

The problem of products being launched before physicians have had sufficient opportunity to eval-



Source: ISAPS 2016

“Brexit now provides a means for the UK to set its own regulations for the cosmetic sector

uate them is certainly not unique to the UK. New treatments promising permanent results and painless miracle cures with no downtime are promoted constantly in the media both here and in the United States.

As tempting as they may sound, consumers should not be afraid to ask a slew of hard questions about how it works, what it treats, how much it hurts, is it safe for their skin type and what the alternatives may be. Before signing up, it is also prudent to inquire how many people have been treated and if there are any published clinical studies available, and to request to see real patient photographs to judge whether the results live up to the promises.

According to Dr Constantino G. Mendieta, chairman of the Media Committee of the American Society for Aesthetic Plastic Surgeons: “It’s about time we started demanding more of claims made by industry. The marketing machine behind new treatments and products is driving consumers to ask surgeons to offer many procedures that have not been proven or may not have enough research behind them to substantiate claims.

“Surgeons are often driven by this demand fearing they may miss the next greatest things since sliced bread, forcing them to jump into technology that may not be proven only to realise the results don’t accomplish what was claimed. We welcome setting standards and having more research prior to mass marketing.”

Many cosmetic surgeons have become increasingly cynical about newly launched aesthetic treatments and tend to take a wait-and-see approach. “We have seen many companies come and go in aesthetic medicine, but the brands and products that have stood the test of time have invested heavily in clinical data, physician and staff training, and good outcomes. I do not bring a device into my clinic unless I am convinced first and foremost that it is safe, and secondly that it is effective and delivers results,” says New York facial plastic surgeon Dr Samieh Rizk.

Mr Grover concludes: “It is important to remember that these are medical procedures and they have risks as well as benefits. *Caveat emptor* [buyer beware] should be applied when considering some of the non-surgical treatments reported in the press. If something sounds too good to be true, then it probably is.”

## COMMERCIAL FEATURE

# WHAT WOMEN WANT

*In today's beauty-conscious world women are moving away from "anti-ageing" and towards an era of ageing well – looking and feeling like the best version of themselves*



Our faces are our calling cards – an outward projection of who we are – and in today's social media-savvy society, they are shared and scrutinised more than ever.

Whether through photography filters, make-up or aesthetic procedures, investing in beauty is a way to take control of your image. Women across the globe are using their outer beauty to express their inner self and one of the keys to this is natural-looking results. As aesthetic treatments become more accessible and acceptable, the trend has moved towards not changing who you are, but enhancing what you have.

Allergan, the makers of JUVÉDERM® facial fillers, are passionate about understanding how women want to look and feel and why, and are innovating and evolving by broadening their understanding of women's beauty goals and motivations.

As part of its ongoing research, the company recently produced a global report, *The Changing Faces of Beauty*, which gave insight into how women around the world feel about ageing and what beauty truly means to them.

The research project, carried out by Insight Engineers, was one of the largest of its kind, surveying 7,700 aesthetically aware women from 16 countries.<sup>1</sup>

While some interesting trends were apparent, one strong universal truth emerged: 74 per cent said they were making the effort to look good for themselves and embracing aesthetic treatments, not for social acceptance, but because it makes them feel confident and strong.<sup>1</sup>

## INSIDE AND OUT

Globally, women said general beautification or looking beautiful (63 per cent) is seen as a bigger motivator for considering treatment than addressing the signs of ageing (50 per cent).<sup>1</sup>

So what is driving this change in attitudes? In an age where mindfulness and wellness are developing trends, the inner self seems to be coming more to the forefront and beauty is no longer just about what you see in the mirror. In fact, 42 per cent of women said a desire to boost self-confidence was why they would seek an aesthetic treatment, making it equally as important as improving the look of sagging skin (42 per cent).<sup>1</sup>

However, age and nationality played a part in whether inner or outer beauty was considered more important with women aged over 44 increasingly choosing inner beauty as the most important defining factor, while younger women favoured outer beauty.<sup>2</sup>

Dr Jonquille Chantrey, a leading UK cosmetic surgeon involved with the report, says: "Globally, there has been an attitudinal change and women don't simply ask about looking younger any more.

"What women do want is to look their best and make the most of what nature has given them. For most, this means healthy, hydrated and radiant skin. For some women it might mean subtle enhancement of their natural features – a kind of 'beautification'."

## SKIN QUALITY: THE NEW BEAUTY IDEAL

In a world where high-definition and the selfie rule, our skin is now under the spotlight more than ever. It is no surprise then that one of the key trends identified in the report was the significance of skin quality when identifying beauty.



When asked to rate what elements contribute most to a woman's outer beauty, complexion and skin quality (56 per cent) were ranked as equally important as body shape and figure.<sup>3</sup>

Dr Chantrey says: "In this age of digital documentation, women are adept at analysing how their 'close-up' will appear on screen and skin plays a big part in this. Wrinkles used to be the major concern, but they can actually be a positive thing on a photo with smiling, animated faces. Blotchy or uneven skin is more obvious in close-up shots, so having healthy, plump and radiant skin is higher on their agenda."

With this focus on skin, it's no surprise that 81 per cent of women globally are committed to a regular facial skincare routine.<sup>3</sup> But what about injectable treatments?



As women take control of their appearance, there has been a shift in the role facial fillers play in helping them to look and feel like the best version of themselves

## CHANGING PERCEPTIONS: FACIAL FILLERS

As women take control of their appearance, there has been a shift in the role facial fillers play in helping them to look and feel like the best version of themselves. Some 65 per cent agreed that facial fillers are more socially acceptable than they were five years ago<sup>1</sup> and 57 per cent believed that cosmetic injectables could look natural.<sup>2</sup>

The evolution of the aesthetic market means women are now faced with a wider range of options when it comes to achieving the look they want. This cascade of innovation has given women the confidence to explore the available solutions without feeling judged. In fact, demand for treatment with injectables is set to grow 10 per cent in 2016.<sup>2</sup>

While there are many facial filler products available on the market, not all are created equally. One of the reasons JUVÉDERM® has become a trusted facial filler brand around the world stems not only from Allergan's dedication to understanding women's beauty goals, but also from its commitment to achieving natural-looking results through training its aesthetic practitioners and the development of effective, clinically researched products that are as safe as possible.

The JUVÉDERM® VYCROSS range is designed to provide lifting, filling, volumisation and skin hydration. The products are temporary, lasting up to 18 months depending on the product, and are made from hyaluronic acid, a naturally occurring substance found on the skin, considered to be the gold standard in facial-filler ingredients.

The addition of lidocaine also means there is now little pain or discomfort with treatment and you can return to daily life immediately. These innovations in making fillers more accessible, natural looking and comfortable than ever means that with JUVÉDERM® facial fillers your beauty goals no longer need to be purely aspirational, they can be a reality.

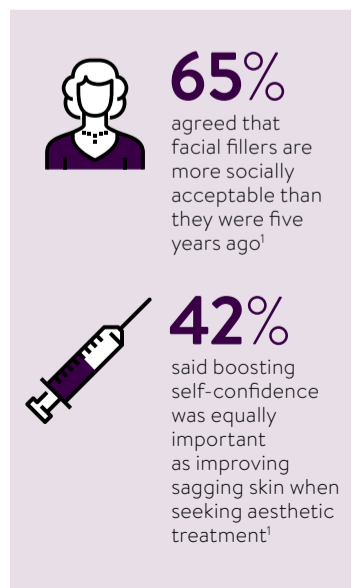
Do your research before booking any treatment and go for a full consultation with a qualified medical practitioner who will be able to assess your face and advise you on what treatment may be appropriate for you.

To find a JUVÉDERM® clinic near you visit [www.this-is-me.com](http://www.this-is-me.com)

<sup>1</sup> Allergan Global Beauty Data on File 01 2016 (INT/0381/2016)

<sup>2</sup> Allergan Global Beauty Data on File 02 2016 (INT/0393/2016)

<sup>3</sup> Allergan Global Beauty Data on File 04 2016 (INT/0399/2016)



# After all these years, is beauty

Leading plastic surgeons believe a mathematical ratio, dating back 2,500 years, is the solution to creating facial beauty

## FACIAL AESTHETICS

LEAH HARDY

“Wherever there is number, there is beauty.” So wrote the Greek philosopher Proclus. But can an ancient mathematical formula really help make today’s faces more attractive? A number of doctors insist it can. So how can phi – the golden ratio – play a role in contemporary aesthetic medicine?

What makes a face beautiful? Doe eyes? Perfect skin? A winning smile? Certainly, all of these play a role, but for some doctors the answer is something simpler.

Dr Tatiana Lapa, medical director of The Studio Clinic in London’s Harley Street, says a specific mathematical ratio can explain why some people are considered attractive and others are not. The magic number? 1.618.

The ancient Greeks discovered some 2,500 years ago that when a line is divided into two parts in a ratio of 1: 1.618, it is thought to create a profoundly appealing proportion. Artists, including Leonardo Da Vinci and Botticelli, are said to have used it in planning their paintings, and it’s also found in nature, in the curl of a shell or the heart of a flower.

Over the centuries, this ratio has been dubbed the golden ratio, the golden section, the divine proportion or more recently, phi, named after Phidias, a Greek sculptor and mathematician who is believed to have used it when designing sculptures for the Parthenon in Athens.

In the last few decades, it has been applied to facial beauty too and adopted as a guideline for aesthetic treatments.

This may sound strange, particularly if you believe that human beauty is entirely individual and subjective. But that’s not quite true, says Dr Lapa. “There are certain universally accepted features of female beauty, such as high cheekbones, petite nose, good skin and full lips. However, the science of beauty is much more complex. We may be unaware of it, but subconsciously we judge beauty by facial symmetry and proportion – and not just the features of the face,” she says.

Dr Maryam Zamani, London-based aesthetic doctor and oculoplastic surgeon, agrees. “Cross-cultural research has illustrated that no matter ethnicity or race, our

perception of beauty is based on the ratio proportions of 1.618. As the face comes closer to this ratio, it becomes perceptibly more beautiful.”

“For example, the ideal ratio of the top of the head to the chin versus the width of the head should be 1.618,” says Dr Zamani.

Further examples of where the ratio is said to be ideal in the human face include the width of the lips compared to the base of the nose, the measurement from outer eye to outer eye to the width of the lips, the distance from the bottom of the nose to the chin to the distance from the centre of the lips to the chin, the distance from the top of the nose to the centre of the lips should be 1.618 times the distance from the centre of the lips to the chin, and the hairline to the upper eyelid should be 1.618 times the length of the top of the upper eyebrow to the lower eyelid.

US plastic surgeon Dr Stephen Marquardt measured hundreds of parameters of the face and applied the golden ratio to establish the outlines of the ideal face. The “phi mask”, as it is known, has been used to create a clinical assessment tool to determine attractiveness and the result looks quite a lot like Angelina Jolie.

Dr Lapa says she uses the mask with new patients to help them understand how she can enhance their features. Some doctors and surgeons are so convinced of this that they use golden-ratio calipers in their practice. These can be used to mark out the ideal ratio on a patient’s face.

Fashionable aesthetic enhancements that ignore phi may even make us look worse. Dermatologist Dr Stefanie Williams says: “The ideal ratio of upper to lower lip volume is 1:1.6. That’s why when treating the lips, the lower lip should have slightly more volume than the upper lip. If upper and lower lip are made the same, it looks strange and unnatural.”

It’s likely that we consider golden-ratio facial proportions to be beautiful because evolution has taught humans subconsciously to recognise female features such as plump cheeks, full lips and a narrow jaw, which are typical of youthfulness and high estrogen levels, as powerfully appealing signals of fertility.

Scientists from the Chinese Academy of Sciences have found that certain facial measurements, specifically the width of the mouth and

## GOLDEN RATIO – THE MATHS BEHIND

### GLOBAL SURGICAL FACE AND HEAD PROCEDURES (IN THOUSANDS)



HAIR  
TRANSPLANTATION  
115.9  
134



EYELID SURGERY  
1,427.4  
1,264.7



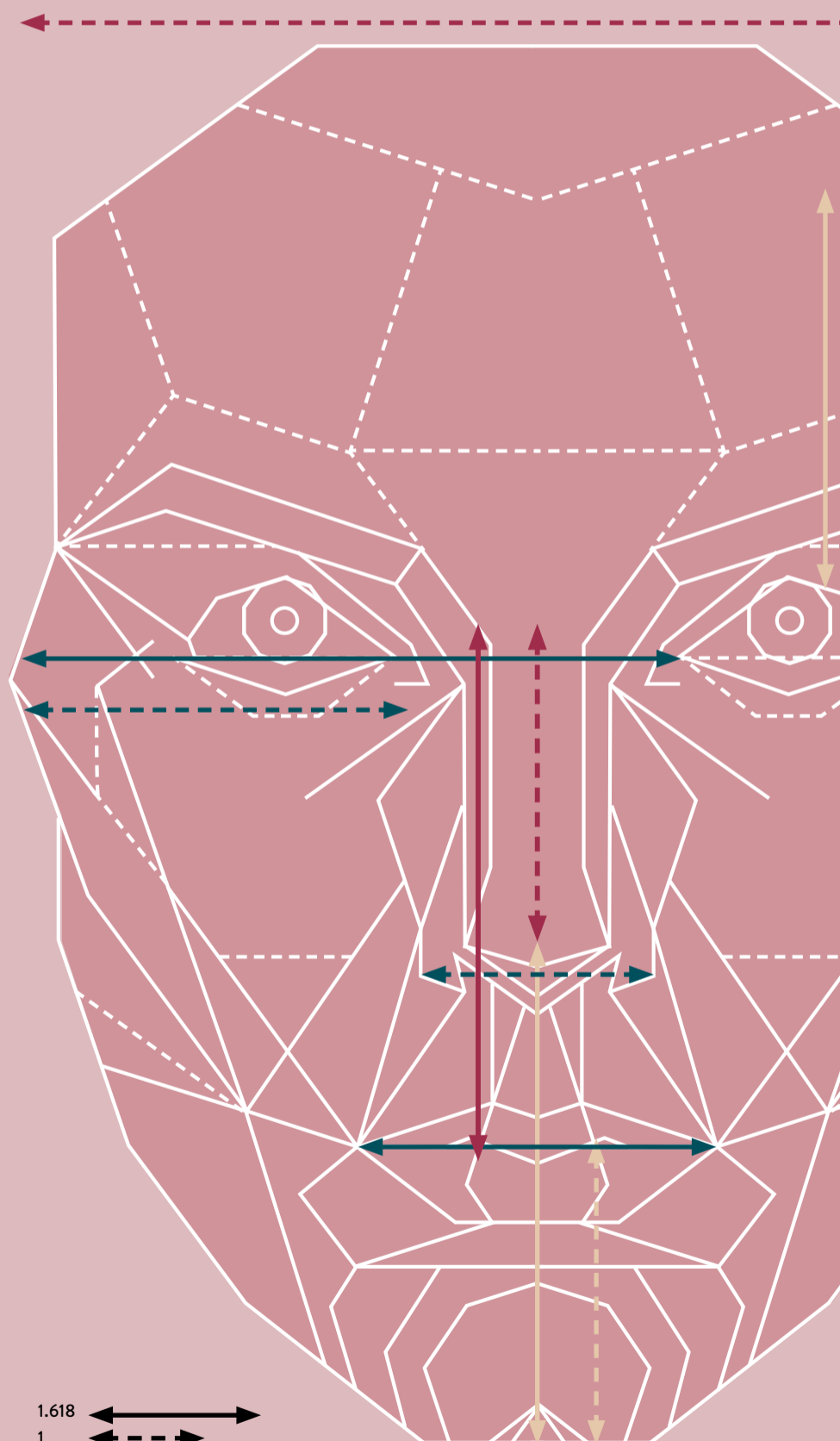
EAR SURGERY  
247.5  
252.7



RHINOPLASTY  
849.4  
730.3



NECKLIFT  
NO DATA  
232.6

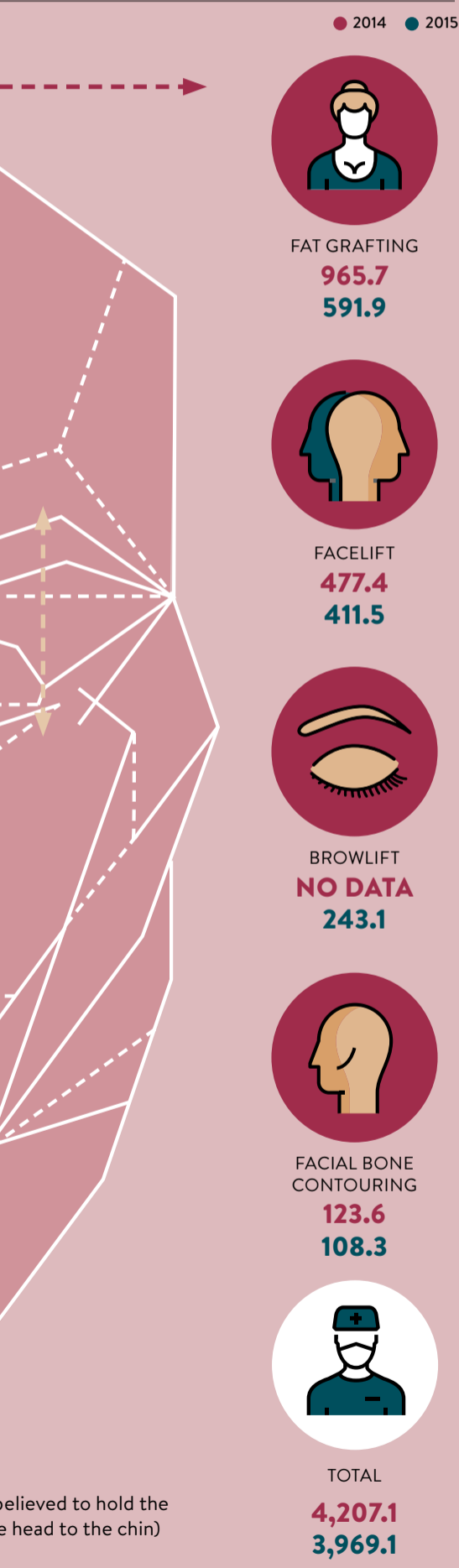


From the ancient greeks to modern-day cosmetic surgeons, the golden ratio - or phi - is believed to be the key to true beauty. That is to say, using the golden ratio, the length of the head (top of the head to the chin) divided by the width should equal 1.618

# Beauty in the ‘phi’ of the beholder?

Beauty and use the ancient formula to help achieve their patients’ sought-after outcomes

## OLD BEAUTY



nose, and the distance between the mouth and nose, tend to expand with age. Crucially, these changes are a far better predictor of biological ageing than multiple blood tests. This means that as we age, even faces that previously closely matched golden-ratio proportions tend to deviate from them.

Plastic surgeons Rajiv Grover and Sydney Coleman studied facial scans taken at different ages, and reported that we lose volume from our faces around seven years before our skin starts to sag. This changes the face shape from a broad triangle to a narrower rectangle.

Another study by Dallas plastic surgeon Dr Rod Rohrich revealed we first lose fat from around the eyes, then from the middle of the cheek under the eye, then from cheekbones, the inner jawline either side of the mouth and the nose-to-mouth lines, and finally from the forehead and sides of the face.

In addition, by the time a woman reaches 40, her philtrum – the groove above the upper lip – will have drooped 3mm to 15mm, extending the length of the lower face. A few millimetres may not sound much, says London plastic surgeon Dr Yannis Alexandrides of the 111 Harley Street clinic, and we may not even notice it consciously, but these tiny shifts “can be a bigger sign of ageing than wrinkles”.

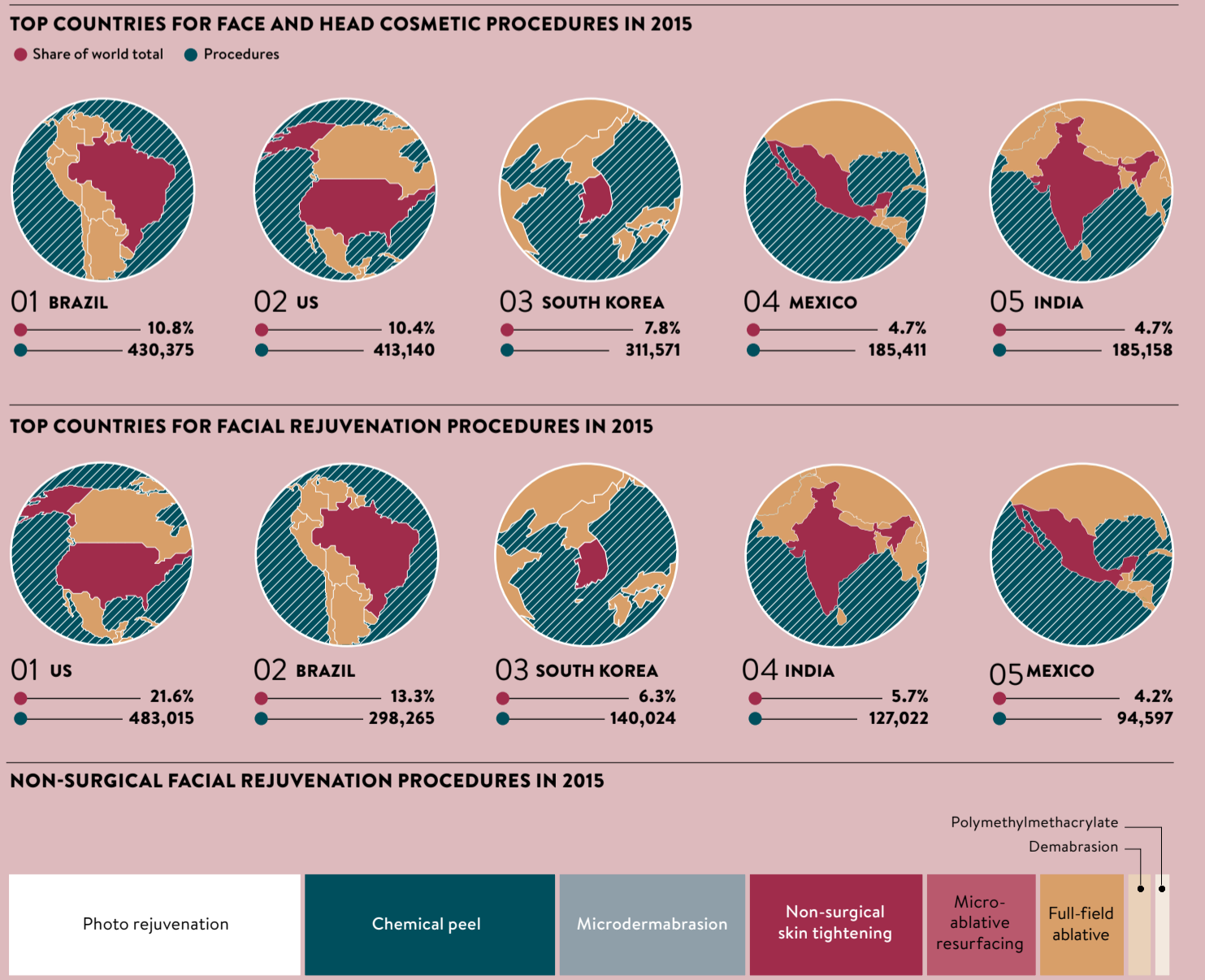
This suggests that restoring proportions closer to the youthful ideal may have the potential both to improve attractiveness in younger women and rejuvenate older faces. But how can this be achieved?

Aesthetic practitioner Dr Sarah Tonks says: “Dermal fillers are the primary tool for subtly altering facial proportions.” If the face is long and narrow, Dr Lapa uses either hyaluronic acid dermal fillers or the long-lasting, collagen-stimulating filler Ellanse to enhance the projection and width of the cheekbones. If a too-high forehead is an issue, she can inject botulinum toxin such as Botox to raise the eyebrows, or if the lower face is too short, she can enhance the jawline and even extend and add symmetry to the chin using fillers.

Dr Tonks likes to fill the temples, which hollow with age, using hyaluronic acid to add width and proportion to the eye area. A surgical lip lift, says Dr Alexandrides, can reduce lower facial height.

The need for an artistic eye is the overwhelming consensus of the majority of cosmetic doctors. As Dr Rita Rakus, whose clinic is in London’s Knightsbridge, says: “Nature does not always follow the rules of beauty.”

While mathematics may help us become beautiful, plastic surgeon Mr Grover says over-reliance on formulae can lead to an army of California-style cosmetic clones. “Treatments should all be about looking individual,” he concludes. “Not about being perfect.”



SOURCE: International Society of Aesthetic Plastic Surgery 2015

# Establishing guidelines to protect the public

The issue of training requirements and regulation of those administering non-surgical cosmetic procedures remains a matter of public concern, although benchmark guidelines are being adopted



Robert Llewellyn/Getty Images

TRAINING STANDARDS  
VICKY ELDRIDGE

The lack of policing surrounding cosmetic procedures has been a hot topic of debate for some time. The unique way in which the market has developed means that the non-surgical sector, which is reported to account for 75 per cent of its value, sits somewhere in between the remits of beauty and medical providers. Many of the treatments being provided are medical in nature. However, as the industry has developed in the private sector rather than NHS, the industry has evolved outside the parameters of regulation and accredited training. This, coupled with the perceived commercial gains to be had from this booming market, has resulted in a plethora of unscrupulous providers exploiting loopholes, due to the lack of regulation, with little redress when things go wrong. The sad truth is that, with the exception of Botox, which is a prescription-only medicine and should only be offered only by someone qualified to prescribe it, non-surgical cosmetic services may be provided by anyone, anywhere. Public confusion over who to go to for what and where has naturally ensued.

Since the *Keogh Review* published its recommendations in 2013, and highlighted the training and qualifications of cosmetic practitioners as an area of key concern, moves have been made to address this important issue, although the majority of medically trained practitioners within the sector would argue that anything less than statutory regulation is not enough. Most significantly, Health Education England (HEE) was commissioned by

the Department of Health to compile a report aimed at improving and standardising the training available to practitioners who carry out non-surgical cosmetic procedures. Cosmetic surgery was not included in the report as this is regulated in the UK. The result was a recommended education and training framework, which was published in two parts between November 2015 and January 2016.

The report set out qualification requirements for practitioners who perform these types of treatments, regardless of any previous training they might have had or their professional background. It separated commonly performed cosmetic procedures into categories based on the level of training the HEE believed those performing such treatments should have. The entry-level requirement, the report

suggested, should be a vocational level-three qualification, as held by qualified beauty therapists. Treatments such as lasers and intense pulsed light or IPL for hair removal, non-ablative lasers, IPL and LED lights for photo-rejuvenation, microneedling with needles less than 0.5mm, and superficial chemical peels, could be performed by anyone with a level-four qualification, equivalent to a foundation degree year one and above.

Treatments such as laser tattoo removal, laser and IPL treatments for benign vascular lesions and microneedling with needles between 0.5 and 1mm should only be done by those with a level-five or foundation degree-level qualification in these procedures. Level six or degree-level qualification should be held by those performing homeopathic mesotherapy, microneedling with needles up to 1.5mm and ablative fractional laser treatments, excluding treatments around the eye. The top tier of treatments, for which it suggested practitioners be trained to a minimum of level-seven post-graduate or masters degree, includes laser treatments around the eye, medium or deep chemical peels, hair restoration surgery, ablative laser treatments, fat-busting

## QUALIFICATION REQUIREMENTS FOR PRACTITIONERS

There are step-off points between each level of training, whereby practitioners will be able to deliver some treatments on completion of requisite modules

	HAIR RESTORATION SURGERY	BOTULINUM TOXINS	DERMAL FILLERS	LASER, INTENSE PULSED LIGHT AND LED TREATMENTS	CHEMICAL PEELS AND SKIN REJUVENATION	
RECOGNITION OF PRIOR LEARNING	✓	✓	✓	✓	✓	LEVEL 7 POSTGRADUATE LEVEL
		✓	✓	✓	✓	LEVEL 6 DEGREE LEVEL
ACCREDITATION OF PRIOR EXPERIMENTAL LEARNING				✓	✓	LEVEL 5 FOUNDATION DEGREE LEVEL
				✓	✓	LEVEL 4 YEAR ONE FOUNDATION DEGREE LEVEL

Source: Health Education England 2015

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injections, mesotherapy with pharmaceutical strength agents and, importantly, the injection of dermal fillers and botulinum toxin.

The industry has long battled against non-medics and unqualified practitioners injecting dermal fillers. The British Association of Aesthetic Plastic Surgeons (BAAPS) has been lobbying for dermal fillers to be classified as prescription-only medicines, rather than medical devices, something the *Keogh Review* recommended, and believes they should only be administered by medical professionals who are capable of dealing with any complications, especially as many of them now include the anaesthetic lidocaine, a medicinal ingredient.

Previously this would have required Europe-wide approval, however, former BAAPS president and consultant plastic surgeon Rajiv Grover believes Brexit may offer an opportunity for the UK to reopen the debate.

“Making dermal fillers prescription-only would achieve a ‘triple-whammy effect’. First of all, if a product is prescription-only, you can regulate what comes on to the market. Secondly, it would mean fillers could only be done by healthcare professionals and thirdly, as it is illegal to advertise a prescription-only medicine, it would automatically block inappropriate marketing,” he says.

In the absence of any formal regulation, the HEE recommendations do offer some clarification. While only recommended guidelines, they are now being used as a benchmark by industry bodies such as the British Association of Cosmetic Nurses (BACN), British College of Aesthetic Medicine (BCAM), Joint Council for Cosmetic Practitioners and General Medical Council (GMC), which are keen to see a way forward in improving patient safety.

Sharon Bennett, chairwoman of the BACN, says: “The key objective is patient safety and this can only be achieved by delivering an agreed set of standards – an open and fair regulatory system.”

Aesthetic-specific level-seven accredited training courses and masters degree university courses are also now being established across the UK to give medical practitioners a pathway to achieving the standards of training outlined by the HEE.

None of these courses are currently being offered to non-medical practitioners. However, the public should be vigilant as the lack of regulation means that courses training beauticians in dermal fillers do exist, but are not equivalent qualifications and do not reach the levels recommended in the guidelines.

On the surgical front, to address the lack of training in cosmetic surgical procedures within the NHS, BAAPS last year announced the launch of a fellowship programme. Paid for by BAAPS, with support

from the British Association of Plastic, Reconstructive and Aesthetic Surgeons, the fellowships offer hands-on practise, mentorship, access to specialist expertise and understanding of how to deal with complications.

While the HEE guidelines may give some clarification on who should be doing what and appropriate levels of training, their implementation is still in its infancy. So what can the public do to safeguard themselves from rogue practitioners in the here and now?

If you are considering a cosmetic procedure you should always check the practitioner’s credentials. For surgical procedures seek a plastic surgeon who is on the specialist register of the GMC and look at the BAAPS website for a surgeon specialising in the specific procedure you’re seeking.

In England, clinics and hospitals that deliver private cosmetic surgery procedures must also be registered and inspected by the Care Quality Commission. Check a clinic’s certification and read inspection reports.

Only registered doctors, dentists, prescribing nurses and prescribing pharmacists are able to prescribe botulinum toxin legally and should, therefore, be the only practitioners offering treatment. You should check that they are registered and accountable to a statutory body, such as the GMC, Nursing and Midwifery Council or General Dental Council.

While this doesn’t guarantee that they have adequate training in aesthetic procedures it does mean they are accountable to their professional body and you are guaranteed a right of redress if anything goes wrong. If their code of conduct is broken, practitioners can lose the right to practise. Also look for medical practitioners who are members of BCAM or nurses registered with the BACN.

Other procedures, such as laser hair removal, skin peels and non-invasive body contouring treatments, may be performed by a trained beauty therapist, although many in the aesthetic sector feel that laser treatment, which was previously deregulated, should be brought back under regulation, due to the high risk factor for serious burns when the treatment is administered by people without appropriate qualification.

In the future we may see further clarification and, if lobbying by BAAPS is successful, the classification of dermal fillers as prescription-only medicines. In the meantime, the best way to ensure you don’t fall victim to unscrupulous practice is to do your research, and then check and check again.



**The key objective is patient safety and this can only be achieved by delivering an agreed set of standards – an open and fair regulatory system**

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## COMMERCIAL FEATURE

# HERE’S UPLIFTING NEWS

*Collagen stimulating treatments offer the potential of natural-looking regenerative lifting and volume restoration*

Until recently the main method of addressing slack and drooping skin, which characterises an ageing face, has been to plump it out artificially. But how much better would it be if we could encourage the body to replace its own diminishing collagen, so we regain our own youthful appearance?

That is the principle behind the next generation of dual-acting regenerative treatments, which are changing the way progressive aesthetic doctors are rejuvenating ageing faces. Two of the most contemporary – Silhouette Soft skin-lifting treatment and Ellansé dermal filler – work by stimulating our own collagen production by provoking the body’s natural reaction to foreign bodies.

According to Dr Ian Strawford: “Collagenesis is the process of stimulating the body to replace lost collagen, which starts to ebb away in our 20s and gallops by the time we reach our 40s. Without the underlying collagen, ‘age-sliding’ of the skin tissues results in nose-to-lip folds, lip-to-chin lines, jowling jawlines and pooling neck skin.”

As clinician trainer Dr Strawford, who was an early advocate of the dual treatments from Sinclair Pharma, explains: “Collagen stimulating treatments offer the potential of regenerative lifting and volume restoration, allowing us to create a far more naturalistic appearance. The results are so impressive, no one will notice that ‘work has been done’, rather they will think someone looks progressively better over a period of months.

“At different stages in our lives we may need one or both treatments so I classify my patients into four types according to their facial degeneration, drooping or excess of skin to help me determine when to lift or combine the treatments. With these combination treatments we can achieve natural regenerative results akin to facelift surgery, without the risks of going under the knife, and achieve impressively sustained results.”

Skin lifting with Silhouette Soft sutures involves a unique two-stage process – an immediate lift and gradual collagen regeneration. Think of it as the creation of scaffolding for skin, reversing the southward droop of necks, jowls and cheeks. The sutures are peppered with a series of tiny cones and introduced just under the top layer of the skin. The cones are bi-directional, which secures the sutures in place in the subcutaneous layer and allows them to be pulled in two directions to lift the skin.

The sutures and cones are made from polylactic acid, which is the same material as dissolvable stitches, and in the ensuing three months before they are absorbed by the body they bring about the process of collagenesis. This is the method the body uses to repair a damaged area, in this case created by



the agitation of the cones. This brings about a biological lift, where the skin becomes firmer and tighter as a result of the augmentation from newly laid down collagen underneath the surface to fill it out naturally.

Silhouette Soft has been chosen to hold back time by a raft of celebrities thanks to the subtle nature of the results it achieves. Those who have spoken publicly about it include actress Gillian Telford, presenter Meg Mathews, and Olympian and TV sports interviewer Sharron Davies.



**The results are so impressive, no one will notice that ‘work has been done’**

### Holy Grail of facial rejuvenation

“The Holy Grail of facial rejuvenation would be the ability of a skin injectable to stimulate controlled, lasting collagen production.” So says one of Europe’s leading consultant dermatologists, Dr Nick Lowe. Gratifyingly this Holy Grail has been achieved with the development of Ellansé from the Sinclair Pharma stable. It is the first dermal filler that provides both instant and gradual results; increased volume occurs immediately post-injection, however volumisation continues to develop for up to four months. The results can be tailored to last between one and four years.

**“I still look like me... just a better version of me”**

The 42-year-old model, actress and presenter Nancy Sorrell, who is also

the wife of comedian Vic Reeves, is a firm Ellansé fan. She says: “I was starting to see the lines from my nose to my mouth deepening. My doctor advised that a little Ellansé filler would lift and smooth out the lines, and it worked instantly and got even better over time.”

Dr Kuldeep Minocha, who trains other doctors worldwide for Sinclair Pharma, concludes: “Whereas once upon a time the aesthetic community was focused on fixing lines and wrinkles, we now have a shared understanding of the many factors that contribute to facial ageing, not least of which are loss of volume and skin quality.

“A more holistic approach, appreciating the three-dimensional nature of ageing, is more likely to achieve the effect of a more youthful appearance. Using muscle-relaxing injections as the only treatment modality for clients as they age can be limiting, especially when we have treatments such as Silhouette Soft and Ellansé in our armoury of minimally invasive procedures.

“Both these treatments encourage the body to produce type 1 collagen, which is the most flexible type, compared with type 3 which is scar tissue. This allows full facial movement, and as a consequence brings about flexible, nuanced and natural-looking results.”

**For more information please contact:**

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**Dr Nick Lowe**  
[www.doctornicklowe.com](http://www.doctornicklowe.com)  
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[www@minochahealth.co.uk](mailto:www@minochahealth.co.uk)  
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# Create a new smile and self-confidence

From tried-and-tested whitening to the more experimental 3D tooth printing, when it comes to aesthetic dentistry and the latest technology there is plenty to smile about

## AESTHETIC DENTISTRY

NICOLA KRAMER

Both men and women rate smiles and teeth as the second most important attractive feature, with personality in the top slot, so the Oral Health Foundation tells us.

That our awareness of this concept has risen in previous years is borne out by the fact that a quarter of Brits have undergone some form of cosmetic dentistry, with the industry worth about £2 billion, according to market research company Mintel.

So what does aesthetic dentistry have to offer the discerning dental patient both now and potentially in the not-too-distant future?

Tooth whitening has become one of the most popular treatments, as the approved bleaching process is relatively affordable and effective.

While some dentists will advocate more futuristic-looking "power" bleaching in the dental practice, whereby a light is shone to stimulate the active ingredient, others will consider home-whitening the best bet; it all depends on individual circumstances.

The key to a successful outcome is to consult with a fully qualified dental professional registered with the General Dental Council. It is important to note that it is illegal for anyone other than a dentist, or a dental hygienist or therapist working to a dentist's prescription, to carry out tooth whitening, so beware anyone claiming otherwise.

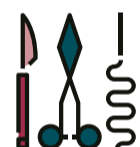
Meanwhile, for many the idea of orthodontic treatment brings to mind years of discomfort and unattractive metal stuck on to the teeth.

Today's technology, however, allows that perception to be placed in the dim and distant past, with short-term teeth straightening claiming a well-earned place among the growing uptake of life-enhancing treatments.



**£2bn**

estimated size of the UK cosmetic dentistry market



**1/4**

people in the UK have undergone some form of cosmetic dentistry

Source: Mintel

Suitable for adults who require relatively simple tooth movement, aesthetic results can be achieved in about six months using a series of almost imperceptible removable aligners, so not only will most people not notice, but also there will be no limitations on the wearer's ability to keep their teeth and gums clean and healthy throughout the process.

It's no secret that veneers have been the go-to for many a celebrity looking to improve their smile in one easy step, and it is equally accessible to any one of us looking to correct defects such as gaps between teeth, discolouration and crooked smiles.

Veneers are individually hand-crafted by dental technicians and placed on top of the existing teeth, creating a natural and lasting smile; if looked after well, they can last a good ten to fifteen years.

What's more, new materials have allowed veneers to become thinner and thinner, so no tooth preparation is required and therefore the outer surface of the teeth does not need to be trimmed back. There are, however, some limitations and considerations beyond aesthetics, so they are not suitable for everyone.

The concept of lasers in dentistry might seem like it belongs in the future, but they are already being used to good effect to enhance cosmetic treatments.

For example, a patient opting for veneers may well benefit both aesthetically and functionally if they have a low or uneven gum line. Reshaping the gums can help achieve a neater look, more in proportion with the teeth.

A simple procedure for a qualified cosmetic dentist or gum specialist to carry out, soft tissue gum sculpting using a laser typically requires one visit of about an hour. Local anaesthesia is usually administered to the area to be treated, and



the laser then used to trim, reshape and re-seal the gums, as necessary. However, it should be pointed out that the use of lasers by dentists is not regulated.

Perhaps one of the most exciting innovations in the pipeline is that of 3D tooth printing. In the past dentists with the right technology have been able to create new teeth chairside using scanners, 3D-modelling software and a block of a suitable material such as one made of ceramic.

However, 3D printers are poised to offer a revolution in tooth creation. Fabricating items layer upon layer, 3D printers enable replacement teeth to be created to an exacting, natural-looking standard.

As with any new technology, time and cost barriers are slowly being overcome, while a necessary next step is to ascertain the efficacy of these teeth within the oral cavity, to check how they fare alongside millions of microbes. To this end, the possibility of fabricating 3D teeth with antimicrobial properties is already being explored.

Commenting on technology and smile aesthetics, Dr Patrick Holmes, president of the British Association of Aesthetic Dentistry, says: "In recent years there has been recognition, both from dentists and the public, that having unsightly teeth is not just a matter of vanity. If you do not have confidence in your smile, it can affect your behaviour

and self-assurance. Cosmetic dentistry has a wealth of techniques and materials which, applied correctly, can make a very positive impact on people.

"Unfortunately, at the moment the General Dental Council has not yet created a specialist list for those who have concentrated their skills in this area. If you are seeking treatment,

**“**  
Fabricating items layer upon layer, 3D printers enable replacement teeth to be created to an exacting, natural-looking standard

a personal recommendation can be invaluable. Furthermore, never be afraid to ask what postgraduate training the dentist proposing the treatment has had in this field, so that you are comfortable they are able to offer the most appropriate, scientifically backed treatment, tailored

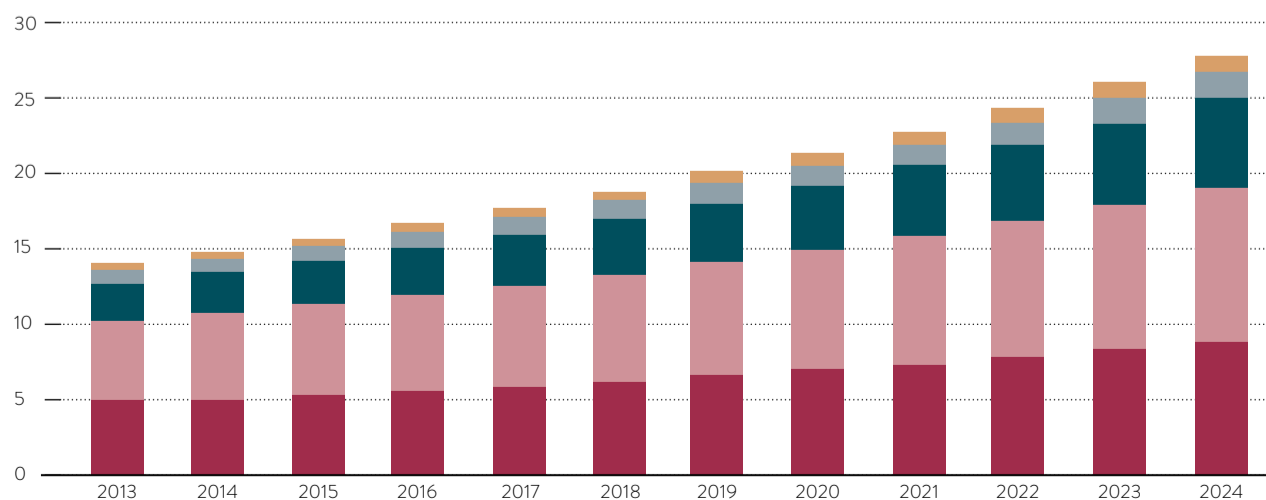
to your needs.

"We would also recommend that, before any treatment is undertaken, there is full understanding of what will be done and the long-term implications."

There is no doubt that 21st-century technology allows dental professionals to be more than the guardians of oral health. Whether patients are looking for a subtle change or a complete smile makeover, today's equipment and techniques can help to achieve a healthy, visually appealing smile, with plenty more to come, when they place themselves in the hands of a qualified dental professional.

## GLOBAL COSMETIC DENTISTRY MARKET 2013-2024 (£BN)

North America Europe Asia-Pacific Latin America Middle East and Africa



Source: Grand View Research 2016

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## COMMERCIAL FEATURE

# 'INVISIBLE' ALIGNMENT FOR A CONFIDENT SMILE

*The teeth-straightening system that has launched almost four million smiles worldwide is continuing to pioneer advanced techniques to end the confidence-draining appearance of crooked and twisted teeth*



The global success of Invisalign treatment, which uses clear polymer teeth aligners instead of the traditional brackets and wires of braces, has put Align Technology at the forefront of orthodontic innovation.

Its latest leading-edge developments, added to an impressive track record, will help patients combat severe teeth misalignment, including deep bite teeth formations that can cause discomfort and embarrassment.

A recent survey, conducted by Align Technology for National Smile Month in conjunction with the Oral Health Foundation\*, has shown that nearly 40 per cent of us worry about the appearance of our mouth at least once a month and, due to concerns over the appearance of our teeth, 45 per cent experience low confidence and 70 per cent never smile in photographs.

The company's successful approach works on established biomechanical principles, but its clear, custom-made aligners allow patients to correct their teeth discreetly and with an ease that makes maintaining their usual daily life and oral hygiene routine easy.

"Invisalign aligners have revolutionised dentistry. They replace the wires and braces, which can feel awkward and look unsightly, with a thin plastic aligner that is virtually invisible," says Dr Raman Aulakh, an orthodontic specialist. "Many people are deeply unhappy with their crooked teeth, but are put off having them straightened because they do not want to wear braces in public view."

"The Invisalign system is proven to work by straightening teeth and restoring confidence, and its range has recently been extended to correct complex teeth malformations such as deep bite."

Invisalign treatment has been growing in popularity since its launch in 1999 and its reach has spread around the world. Its use of digital scanning, computer modelling and 3D printing enables it to produce customised teeth aligners that steadily move the teeth into place over the period prescribed to each patient, which usually ranges from nine to eighteen months.

Patients receive bespoke sets of clear polymer aligners that are slipped

over teeth to provide the necessary traction to realign the teeth. The aligners are changed incrementally every two weeks to reform the teeth gradually and permanently thanks to long-term retention. Unlike fixed braces, the aligners are removed for eating and for cleaning the teeth.

The before and after results are often impressive, and have attracted clients from all walks of life who are keen to have a confident smile. These include Olympic cyclists Laura Trott and Jason Kenny, both gold medallists at London 2012 and Rio 2016 who are able to wear their Invisalign aligners during their intense training schedules. Laura and Jason are official Invisalign ambassadors whose treatment has been sponsored by Invisalign.

"When we saw pictures of ourselves participating in events, we realised how important it is to look after your teeth. We set ourselves a goal of improving both our smiles. We decided to have Invisalign treatment because it was really important that the treatment did not impinge on our training or racing performance," says world and Olympic champion Jason.

"While riding we obviously breathe extremely heavily and we also drink a lot of water. Invisalign meant we could do both these things comfortably while still wearing aligners. We were also keen that Invisalign didn't rub on our cheeks – as a child Laura had had fixed braces and had experienced cheek-rubbing discomfort – and obviously this can be a huge distraction."

The golden couple, who are due to marry this year, were awarded OBEs for their athletic excellence and their work encouraging youngsters into sport, believe Invisalign fitted in perfectly with their positive mental approach to sport and life.

Actress Georgia May Foote, a finalist in BBC TV's *Strictly Come Dancing* and an official Invisalign ambassador, whose treatment has been sponsored by Invisalign, has just won the prestigious role of Holly Golightly in the acclaimed stage version of *Breakfast at Tiffany's* and she will be performing the demanding role while wearing Invisalign aligners. The 25-year-old former *Coronation Street* star will sing, dance and act throughout its UK tour with the audience unaware that she is in orthodontic treatment.

Dr Rhona Eskander, a London-based Invisalign provider, comments: "The effect that a beautiful, bright and healthy smile can have on your personality and increased self-confidence cannot be overestimated."

The process is simple and efficient with the most well-equipped dentists performing a quick digital scan of the mouth using a hand-held scanner. Chair-side screens then display the anomalies to the patients and, using the images and jaw and teeth measurements, a digital prediction of the preferred outcome of treatment can be displayed.

The aligners are tailor made for each patient to a defined clinical treatment plan, approved by their dentists, that takes into account the jaw's physiology so that the facial rejuvenation synchronises with a natural look and feel.

The opportunity to be part of the process appealed to Olympian Laura Trott, who adds: "I think it is a real bonus to be able to see what my teeth would



**ABOVE**  
Once an Invisalign patient, now a model for the company

**TOP**  
Nearly four million Invisalign patients can now smile

**LEFT**  
TV presenter Andy Friedlander smiling with confidence

look like at the end of my treatment and be able to give my opinion about the look I wanted to achieve before I start."

Straighter, more attractive teeth can have a huge health as well as psychological benefit as oral hygiene becomes much easier without tight and twisted teeth. Dental therapist Melonie Prebble, of Abbey Road Dental, in London, says: "Plaque can accumulate and stagnate in tighter, overcrowded mouths. Aligned teeth make the task of dental hygiene easier as it's simpler to clean teeth."

**For more information about your nearest Invisalign provider and a chance to book an appointment online for a consultation to assess if you are suitable for treatment, please visit [www.invisalign.co.uk](http://www.invisalign.co.uk)**

\*UK survey conducted on behalf of Invisalign in January 2015 with 300 respondents aged 18 to 60



Invisalign aligners replace the wires and braces, which can feel awkward and look unsightly, with a thin plastic aligner that is virtually invisible

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