

THE QUEST FOR
BEAUTY



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In experiments, scientists were surprised to see that despite the subjects being from different cultures, races, and ages they generally agreed on what they thought was beautiful. Infants as early as three months old could pick out and determine the same faces that the majority of the adult subjects considered attractive. It appears that beauty may be ingrained into our brains no matter our age.

When we decide that a face is “attractive”, we are judging the vitality and health of that person. We analyse facial symmetry and the evenness of the skin. Facial symmetry is the best way to discover signs of good health development and good genes and these idiosyncrasies are what we refer to when we think that an individual is beautiful.

After years of searching for the secret of beauty, recent studies indicate that the mystery may finally be solved. Tests created by scientists to measure beauty often includes showing subjects a string of pictures of faces and asking the subjects to examine their appearances.





THE MATH BEHIND ATTRACTIVENESS

Beauty may be subjective. However, there's much thought to the mathematical reasoning behind why we are attracted to particular shapes and objects. We use these criteria when designing beauty

THE RULE OF THIRDS

Facial thirds are from the hairline to the eyebrows, the eyebrow to the base of the nose and the nose to the chin.

In an attractive and symmetrical face, the thirds are equal.

THE RULE OF FIFTHS

Lines are drawn vertically on both the inside and outside corners of the eyes, and on the outside of both ears. This results in the face being split vertically into fifths.

In an attractive and symmetrical face, the fifths are equal.



WHAT MY PATIENTS NEED TO KNOW

If you are well motivated, have realistic expectations and select a qualified plastic surgeon, chances are you will be happy with your decision to have aesthetic plastic surgery. Here are some things you should know before going ahead:

EXPECTATIONS

Ensure that you discuss your wishes and desires in detail with us so that there is no room for error or confusion. A well-informed patient gets the best results.

SURGICAL FACILITY

Dr Patel operates at Accredited Hospital Facilities. This could be surgical centers, or hospital based centers. These facilities will only allow accredited Specialists to operate.

PRIVATE HEALTH INSURANCE

Some Plastic Surgery is not covered by insurance; however, this depends on your insurance and type of coverage. There are certain procedures, such as blepharoplasty, reconstruction, scar revision and tumour work, that may address functional problems as well as improve your appearance. In such cases, Insurance will review the proposed surgery. Purely cosmetic surgery like facelifts, necklifts, endoscopic browlifts and cosmetic lower blepharoplasty or lasers are not covered by insurance.

RISKS OF SURGERY

No surgeon can offer risk-free surgery or guarantee a perfect result.

GENERAL RISKS

Wound infection (treatment with antibiotics may be needed)

Pain and discomfort around the incisions

Haematoma (an accumulation of blood around the surgical site that may require drainage)

If blood loss during surgery has been large, a transfusion may be needed: this is uncommon

A blood clot in a leg or the chest (deep vein thrombosis) that will require further treatment; rarely, a clot can move to the lungs and become life-threatening. Gentle exercise and stopping smoking reduce the risk of blood clots.

Nausea (typically from the anaesthetic, usually settles down quickly)

Heavy bleeding from the incision: also uncommon

Keloid or thickened scars (most scars fade or flatten, but some may become “keloid” and remain raised, itchy, thick and red. A keloid can be annoying, but it is not a threat to health. Additional surgery or injection treatment may be needed to try to improve the scar)

Slow healing (more likely to occur in smokers)

Separation of wound edges

Chest infection (more likely to occur in smokers)

Complications due to the anaesthesia and allergies to anaesthetic agents, antiseptic solutions, suture material or dressings. Anaesthetic risks are best discussed with your anaesthetist before your surgical procedure.



BEFORE AND AFTER SURGERY

Dr Patel will give you all the information you need to prepare for surgery and recovery. You will be asked to avoid smoking for six weeks before surgery. Certain other medications and supplements are to be avoided two weeks before surgery, such as aspirin, red wine and vitamin E.

Following your procedure, there may be restrictions to your activities for several days to several weeks. Plan your business and social activities to allow sufficient time for recovery. All patients are provided with an after-hours phone number so you may be in contact at all times through your recovery.





EXPECTATIONS

To perform any cosmetic surgical procedure, an anaesthetic will be necessary, which will be a general anaesthetic or local anaesthesia and sedation if appropriate.

There can be no absolute guarantee with any surgery. The real aim of surgery is improvement. It is important you realise the limitations of what is possible with cosmetic surgery. Further operations may occasionally be needed after surgery to correct complications that have occurred.

It is important that you read all of the risks and complications outlined in this book and discuss these with Dr Patel.

NO SURGERY IS GUARANTEED. Cosmetic surgery is unique in that you, the patient, request the surgery. Misunderstandings may result if you do not explain precisely to the surgeon what is desired. You must be quite specific as to exactly what you want the surgeon to perform. It is important that you realise the limitations of what is possible with cosmetic surgery. It is also important that you realise that there may not be a successful result after the surgery is performed.



ADDITIONAL INFORMATION

SCARS

Every wound in the body heals with a scar formation. It is not always possible to predict the outcome and the quality of the scar. The quality of the scar will depend on the patient's age, healing ability and the site on which the scar is located. However, some scars may take many years to mature. Occasionally further surgery may be required to improve the appearance of scars.

PAIN

Different patients and different operations will produce differing amounts of pain. Occasionally pain and sensory change may persist for a considerable time. The techniques used are designed to minimise pain.

Dr Patel will discuss with you prior to your operation the amount of pain expected and medication, which will be given. Increase in post-operative pain may be a sign of impending complications, and the surgeon must be notified immediately.



RESTRICTION OF ACTIVITY

Wound healing is aided by some restriction in activities. This will minimise discomfort and reduce the risk of complications.

ANESTHESIA

Dr Patel likes his patients to have optimal comfort when having surgery. Therefore, he prefers to use general anaesthetic for most larger procedures; sedation and local anaesthesia may be an option for your procedure.

An Anaesthetist is a highly trained specialist who after graduation as a doctor spends several more years training in anaesthesia, pain control and the management of medical emergencies.

Your Anaesthetist will assess you before the operation, select the most appropriate anaesthetic for you and monitor you throughout the surgery. He is also in charge of pain relief.



COMPLICATIONS

Complications can arise as a result of the anaesthetic or indeed the surgery itself. All of these complications are discussed previously.



YOUR ROLE BEFORE SURGERY

Get fitter – regular walks will do wonders

DO NOT SMOKE – ideally for at least six weeks prior to surgery. Patients are at a higher risk if they are smokers. Smoking can also cause wound breakdown

Drink less alcohol

Tell your surgeon and Anaesthetist of any drugs you may be taking

Do not take any aspirin or aspirin-based drugs two weeks prior to surgery

Tell your surgeon if you have a cold or flu

Ask your Anaesthetist if you have any more questions or you are anxious about anaesthetics.





YOUR ROLE **AFTER SURGERY**


When you wake up you will feel drowsy. You may have a sore throat; you may feel sick or have a headache. You may also feel dizziness, blurred vision or short-term memory loss. This should all pass soon.

If you are having day surgery, make sure someone accompanies you home and stays with you for the first night. Do not drive or use dangerous equipment, drink alcohol or sign any documents for at least 24 hours.

DO NOT EAT OR DRINK ANYTHING SIX HOURS PRIOR TO SURGERY

You will get specific instructions about fasting the day before your surgery. Please follow the advice carefully to avoid any delay in the timing of your surgery. Safe anesthesia demands proper fasting periods.



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