

Plastic Surgery: An Anthroposophic Approach

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Our bodily image is developed in comparison to other people. A physical deformity places people in the position of being “different”, with a connotation of a disadvantage in relation to others.

There are social, psychological, and surgical solutions to deal with this problem. As a social solution, there are countries, like for instance the United States, which open and organize clubs of the “different” to make them “equal”. The Colostomy Club is an example – it was organized for members to feel “equal”. Surgery is the best solution to make someone with a cleft lip look like other people. However, one has to remember that the intrinsic anthroposophic principle of the evolution of human beings is individual diversification itself, and it will always prevail over any type of surgical correction or any “Club of Equals”.

Through the study of anthropology, we know that in certain tribes the upper lip is dilated to a giant size for its possessor to be “different”, and regarded as beautiful and good. Likewise, people from some African tribes

purposefully cause ornamental keloid scars on their bodies. Margaret Mead and others have demonstrated the relevance of cultural patterns in the concepts and ideologies of what is good and bad for different populations. The esthetic connotation gains a relative value due to the interference of sociological factors, even among the “equal”.

In this manner, round, ordinary eyes are operated on in order to become almond-shaped and “different”, but with a beautiful connotation. In the past, slightly plump, buxom women were regarded as beautiful, whereas today, thin, young women are commonly valued.

In addition to social aspects, there are psychological aspects that interfere intensely in these situations. In this manner, a boy with gynecomastia and/or protuberant nipples resorts to surgery to remove his problem.

Deformities may arise suddenly and unexpectedly or gradually and progressively in someone’s conscience.

The first case occurs with traumatic accidents, like burns and it's the resulting scars. The second case emerges with people's biological development, as well as in the development of awareness and their [PEOPLE'S] unique features. Examples would be a cleft lip or a nasal deformity, etc. These situations lead people to seek repair through Plastic Surgery.

Generally speaking, the main conscious or unconscious reason that leads people to seek surgery is the need to improve self-esteem, other people's affection and approval.

When observing a patient who is complaining of a deformity, the anthroposophic vision, also tries to understand other unique features of that person, like the patient's general cultural aspects, the part of the body he/she wants to repair, and the distinction between the objective deformity and the subjective deformity.

In this manner, for example, a small scar on the skin of the forearm may be experienced as a major problem. Although there is an objective base, it is not enough to produce anguish and so great a compulsion for repair, and there is often a major disparity between reality and the projections patients make about it.

It is undeniable that Plastic Surgery offers obvious and dramatic benefits. However, it is important that patients and colleagues understand not only its benefits but also its limitations.

No Plastic Surgery will lead to perfection and there is no guarantee that results will meet the patient's expectations. Expectations should be realistic.

Plastic Surgery may shape the body but not the life.

Although the improvement in appearance after surgery may raise self-esteem, Plastic Surgery does not solve emotional, family, or professional problems...

Feelings of insecurity, anxiety, sexual difficulties, social inadequacy, low self-esteem and other changes should be identified and followed up by a professional of the area.

And plastic surgeons, although they see patients with apparently organic problems and with surgical orientation, they should not forget the psychosocial components, because the need for repair often originates in these factors. Surgical indication aims at careful consideration, meaning a prudent, accurate and suitable indication.

Moreover, patients should be ready to face the surgical trauma, to tolerate discomforts, the resulting scar and individual limitations.

And in the postoperative period, in the phase of excitement, patients often do not take in the explanations about surgery and postoperative orientations. In this sense, the Free and Informed Consent will help to understand the surgery and postoperative evolution, and will improve the doctor-patient relationship. Photographic documentation may also be an instrument of high value, in cases where due to their excitement patients suffer from "amnesia" of the body image they had before surgery.

In closing, I conclude that Plastic Surgery plays the noble and basic role of repair, taking into account the patient's biopsychosocial aspects, through a humanistic doctor-patient relationship.