

Psychiatry and Behavioral Sciences Section - 2012

17 Minimizing Malpractice Exposure in Plastic Cosmetic Surgery

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The goals of this presentation are to understand psychiatric issues in cosmetic plastic surgery, recognize patient groups that that tend to be the most satisfied with cosmetic plastic surgery procedures and their motivations to seek surgery. This presentation will also recognize psychiatric conditions that prevent patients from achieving satisfaction with their cosmetic plastic surgery and recognize patient groups that tend to be the most litigious.

This presentation will impact the forensic science community by identifying and understanding the psychiatric issues in plastic surgery which will help surgeons identify patients that are suffering from or are likely to suffer from Body Dysmorphic Disorder/minimal defects, personal crises, multiple revisions, and loss of identity. These patients may be unable to achieve satisfaction with the result of their cosmetic plastic surgery procedures. Limiting exposure to these patients will minimize liabilities a cosmetic plastic surgery practice is exposed to.

The most common reason for litigation in cosmetic plastic surgery is patient dissatisfaction. Therefore, a physician must strive to accept only patients that are capable of being satisfied with a cosmetic plastic surgery procedure in order to limit the liability of a cosmetic plastic surgery practice.

The objective of cosmetic surgery is increased patient self-esteem and confidence. Most patients undergoing a procedure report these results post-operatively. With these goals in mind, the success of any procedure is measured in patient satisfaction. In order to optimize patient satisfaction, psychiatric literature suggests careful pre-operative patient preparation including a discussion of the risks, benefits, limitations, and expected results for each procedure undertaken. As a general rule, the patients that are motivated to surgery by a desire to align their outward appearance to their bodyimage tend to be the most satisfied. Patients that are not motivated by self-improvement tend to be less satisfied.

There are some psychiatric conditions that can prevent a patient from being satisfied without regard to aesthetic success. The most common examples found in psychiatric literature are Body Dysmorphic Disorder minimal defect, the patient in crisis, the multiple revision patient, and loss of identity. Patients that fall into these categories also cannot make fully reasoned decisions regarding cosmetic plastic surgery. This presentation will familiarize the audience with these conditions, symptoms, and related illnesses. Case examples from clinical practice are described and then explored in terms of the conditions presented. A discussion of the patient's motivation for surgery, goals pertaining to specific attributes, as well as an evaluation of the patient's understanding of the risks, benefits, and limitations of the procedure can help the physician determine if a patient is capable of being satisfied with a cosmetic plastic surgery procedure. If each potential patient is screened, then the practice limits its exposure to a class of patients that tend to be the most litigious.

Plastic surgeons can screen patients suffering from these conditions relatively easily, as psychiatry is an integral part of medical school education. If a psychiatric referral is required, then the psychiatrist needs to be aware of the nuances of each of these conditions.

Plastic Surgery, Psychiatry, Malpractice