

# TIME

## Nip. Tuck. Or Else.

Now everyone gets work done.  
Will you? **By Joel Stein**





NIP.

**WHY YOU'LL BE GETTING**

TUCK.

**COSMETIC PROCEDURES EVEN**

OR ELSE.

**IF YOU DON'T REALLY WANT TO**

**By JOEL STEIN**

PHOTOGRAPH BY MILES ALDRIDGE FOR TIME

# You're going to have to do it. And not all that long from now. Probably not a full-on, general-anesthesia bone shaving or muscle slicing.

But almost definitely some injections into your face. Very likely a session of fat melting in some areas and then possibly moving it to some other parts that could use plumping. Not because you hate yourself, fear aging or are vain. You're going to get a cosmetic procedure for the same reason you wear makeup: because every other woman is.

No, it's not fair that—in 2015, with a woman leading the race for the Democratic nomination for President—in addition to dieting, coloring your hair, applying makeup and working out, you now have to let some doctor push syringes in your cheeks just to look presentable. It's not fair that you have to put your surgery on your credit card just so the other moms on the playground don't overestimate your age. It's not fair that you may risk your life going under general anesthesia just to keep up.

Then again, maybe it's not fair that some women are born straight-nosed and full-breasted. That some people don't have trouble staying thin. That workers with above-average looks will make \$230,000 more over their lifetime than people who are in the aesthetic bottom seventh, as a study by University of Texas economics professor Daniel Hamermesh found. Maybe it doesn't feel fair that a man is writing about this, even if more and more males are starting to feel the same kind of pressure that women have dealt with for decades.

"It's becoming harder and harder to say no without being read as irrational or crazy," says Abigail Brooks, the director of women's studies at Providence College, who recently completed research comparing women who undergo antiaging interventions and those

whom she calls "natural agers." The former group described the latter using phrases like "let herself go" and "not taking good care of herself." Brooks worries that that pressure is not only exhausting but also keeps women forever 21 emotionally.

Having work done lost nearly all of its shame years ago. A few months before she died, Joan Rivers told me about a dinner party she went to in 1973, not long after her first face-lift. Always eager to be an entertaining guest, Rivers shared her experience with Janet Leigh and the other actors gathered at Roddy McDowall's Los Angeles home. "They asked, 'What's it like?'" she recalled. "They had such scars running up the back of their heads. It was like the B&O Railroad. 'What's it like?' I wanted to say, 'You don't remember?'"

For nearly five decades after, Rivers was ridiculed as vain and tacky for her cosmetic surgeries. But about six years ago, people stopped mocking and started asking Rivers for advice. She wrote a book to answer them, *Men Are Stupid ... And They Like Big Boobs: A Woman's Guide to Beauty Through Plastic Surgery*. Women, she found, had become as open about their Botox, fillers and mommy

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JENNIFER COGNARD-BLACK,  
St. Mary's College of Maryland professor

makeovers as she had always been. *Not* having work done is now the new shame.

This shift happened partly because doctors got more nuanced and stopped making patients look like tigers with bolt-on breasts. Partly because so many procedures don't involve surgery at all. Partly because procedures got a bit cheaper and doctors created payment plans. Partly because reality shows demystified the process. Partly because general practitioners, eye doctors and dentists started turning their offices into high-tech beauty salons to fix cash-flow problems. Partly because, due to social media and phone cameras, everyone is always on the red carpet. And partly because our culture has become so much more narcissistic that we now regularly celebrate doing something for ourselves as if it's a moral imperative.

It's not just America. In Seoul, Beirut and Rio de Janeiro, women proudly show off bandages in public as if they're Birkin bags. One in five South Korean women has had cosmetic surgery. In Venezuela, being an "operated woman" is so common, many of the mannequins have D cups. Five years ago, Brazil made plastic surgery tax deductible; officials argued that many procedures contribute to physical and mental health. And Iran, where women cover their hair and bodies but not their noses, leads the world in rhinoplasty.

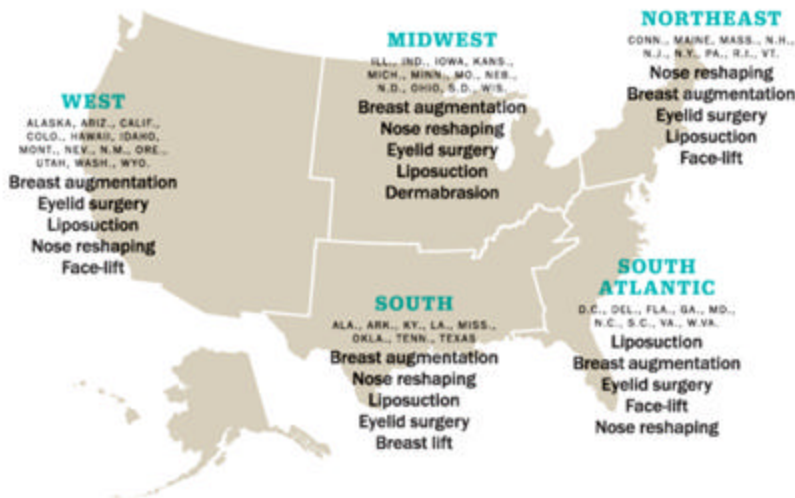
In the U.S., doctors performed over 15 million cosmetic procedures in 2014, a 13% increase from 2011 and more than twice as many as in 2000. Most of the nearly \$13 billion Americans spend on cosmetic procedures is for surgery—lipo and boob jobs are consistently the top moneymakers.

But it's the cheaper, nonsurgical procedures that have become commonplace. U.S. doctors perform more than five times as many nonsurgical procedures as surgeries, delivering 3.6 million rounds of Botox (and other non-name-brand injectable neuromodulators), along with 1.7 million shots of Juvederm, Restylane and similar fillers. Dermatologists have gone from doctors to beauticians: 83% of them provide Botox and similar treatments, which is just 11% fewer than treat skin cancer.

An industry that was once exclusively for rich Beverly Hills and Manhattan women has been thoroughly

## Across the Country

There were 1.7 million plastic surgeries in the U.S. in 2014. The top five procedures—breast augmentation, nose reshaping, liposuction, eyelid surgery and face-lift—account for nearly two-thirds of all surgeries. Here are the top procedures by region



## Around the Globe

Here's a ranking of countries by percentage of plastic surgeries performed worldwide in 2013

1. Brazil: 12.9%
2. U.S.: 12.5%
3. Mexico: 4.2%
4. Germany: 3.0%
5. Colombia: 2.5%
6. Venezuela: 2.0%
7. Spain: 1.8%
8. Italy: 1.6%
9. Argentina: 1.0%
10. Iran: 1.0%

democratized. In 2005 more than two-thirds of cosmetic-surgery patients in the U.S. made \$60,000 or less. Most people getting nonsurgical procedures probably made less. As of 2007 the city with the most plastic surgeons per capita was Salt Lake City.

Americans feel much more comfortable these days with the idea of cosmetic enhancement. A 2014 survey by MSN found that 62% of people would say, upon finding out that a friend had work done, “Good for them!” Another survey, from the American Society for Dermatologic Surgery, last year found that 52% of people are considering aesthetic treatments, up from 30% two years ago. Cosmetic surgery has become the new makeup.

**AS WITH ALL** issues having to do with women’s bodies, there are strict but ever moving boundaries of acceptability for cosmetic procedures. Celebrity magazines and websites commend “good work” with the neofeminist language of taking care of yourself—it’s upkeep like yoga, cold-pressed juices and mani-pedis. But a face that’s a bit too tight, boobs a bit too big,

lips a bit too plump—“bad work”—and you’re cast as sad, vain, phony. “The hypocrisy is pretty remarkable,” says Victoria Pitts-Taylor, the chair of feminist, gender and sexuality studies at Wesleyan and author of *Surgery Junkies: Wellness and Pathology in Cosmetic Culture*.

This moralization of aesthetics is mostly our society’s way of controlling what it deems too sexual or too vain. “Our unease with the technological modification of the body hasn’t gone away. We’ve merely refined our judgment about it,” explains Pitts-Taylor. “We have this increasing tolerance for the anatomically improbable for women. A 36D breast size doesn’t look nonhuman to us even if the waist is 21 inches. Anything more than that in either direction makes us increasingly uncomfortable.” And, yes, Pitts-Taylor has had surgery. We’ve gotten to the point where even the chair of feminist, gender and sexuality studies at Wesleyan has had a nose job. And isn’t embarrassed to talk about it.

Eight years ago, Jennifer Cognard-Black, a professor of English and women, gender and sexuality at St. Mary’s College

of Maryland and a member of the Ms. Committee of Scholars, wrote an article for Ms. magazine titled “Extreme Make-over Feminist Edition: How the Pitch for Cosmetic Surgery Co-opts Feminism.” In a 2013 speech, she reconsidered. “I would have said that getting your boobs done or your tummy flattened is not feminist, and now I’m really not sure,” she says.

Some people use cosmetic surgery to achieve looks that are more about self-affirmation. If facial feminization surgery can be empowering for a transgender woman like Caitlyn Jenner, something that “just makes it easier for her to be accepted in society and to feel better about herself,” as one of her plastic surgeons told the New York *Daily News*, maybe that’s true for everyone. Even if many of them happen to feel like inside they’re a tiny-nosed, wrinkle-free, large-breasted 27-year-old. Cognard-Black feels more certain it’s good that fewer women are no longer keeping their procedures a secret. “From a feminist perspective,” she says, “putting voice behind one’s body-image issues is better than feeling ashamed.”

One of the things women talk about is how to sort through the increasing number of new cosmetic procedures. There are so many options that Wendy Lewis, known as the Knife Coach, quit her job managing Manhattan plastic-surgery practices to start a consultancy in 1997. For \$300 to \$500, clients either Skype, call or meet Lewis for an hour, often telling her about cheating husbands, sexual frustrations or childbirth details.

After finding out what her clients want to change, Lewis recommends doctors and procedures. “If I have a client who wants a neck lift but also has hooded upper eyelids that age her, I will gently ask her how she feels about her eyes and point out that if she just does her neck and leaves her eyes as is, she may regret it. My typical analogy is painting one wall of a room,” Lewis explains. Her clients are mostly professional women.

Women are also getting recommendations on RealSelf.com, a website that rates plastic surgeons and dermatologists, which had more than 51 million visitors last year. CEO Tom Seery, who lives in Seattle and worked at travel website Expedia, launched RealSelf eight years ago when his vegetarian, Subaru-driving, yoga-practicing wife came home with

a brochure for a \$1,500 laser procedure for her face. “I figured if my wife would consider doing a laser treatment, I’d say nearly everyone in America would,” he says.

Seery figured the hardest part of his business would be getting women to go on the site and write about getting and wanting cosmetic procedures. But he was wrong. Women, and a few men, often use their real names and post public pictures not just of their faces but also their nearly naked bodies. “At first I was a little alarmed,” he recalls, “but now it’s become a lingua franca of sharing on our site.”

**ONE REALSELF USER**, Rosemary Hall, posted a thread titled “Had a baby and some people have thought I am her grandmother” in which she asked for advice on choosing a surgeon near Los Angeles. She wanted a mini-face-lift to start a process of beating back aging. Many plastic surgeons and dermatologists advise starting a lifelong regimen as early as your late 20s so you “freeze” your look instead of drastically changing it all at once.

Hall lives in the suburban San Fernando Valley and found the Beverly Hills doctors she met, many of whom have been on reality shows, to be too expensive and too rushed. So she spent a Thursday in July last year with her husband Kevin Tantraw and their adorable 5-year-old daughter Stella driving two hours to Newport Beach in Orange County to meet three more potential surgeons.

A pretty, dyed-blond former Chicagoan with prominent blue eyes, Hall wears jeans, a loose burgundy blouse and sandals that show off French-tipped toenails. She will not reveal her age despite the fact that she’s comfortable telling readers of *TIME* magazine that she’s getting a face-lift. She was planning on telling her family and friends anyway. Which provides a modicum of relief to Tantraw, who—in addition to worrying about keeping secrets—is very much against Hall’s face-lift because he fears the risks of surgery and the fact that she might not look like herself afterward, like the patients on E!’s TV show *Botched*.

For a man, having an opinion on this huge cultural change is as fraught as talking about abortion: it’s both none of our business and partly our fault. But perhaps we can also be a bit more objective about

it, inventorying the changes both positive and scary without having to experience them. During Hall’s doctor visits, Tantraw is trying his hardest to stay quiet and supportive. But it’s not easy.

Hall works as a video editor for a production company that makes reality shows, the industry most directly responsible for cosmetic surgery’s growing acceptability. On Dec. 11, 2002, ABC aired a one-time special called *Extreme Makeover* that got such strong ratings, the network turned it into a series. A year earlier, Howard Schultz, the show’s creator, had been watching an episode of Jenny Jones’ talk show in which women showed off their plastic surgery, taunting guys who rejected them in high school; he had also noticed women in Beverly Hills openly walking around with bandages on.

Schultz knew there was a national cultural shift when thousands of people showed up at auditions to get plastic surgery in the least discreet way possible—on network television. The show so redefined and enriched dentistry, increasing demand for pricey veneers and whiteners, that when Schultz spoke to a group of dentists in Nashville last year, they gave him a standing ovation before he even started his speech. His show also launched a lot of spray-tan businesses and demystified surgery, showing it from the patient’s perspective instead of the doctor’s as previous shows had.

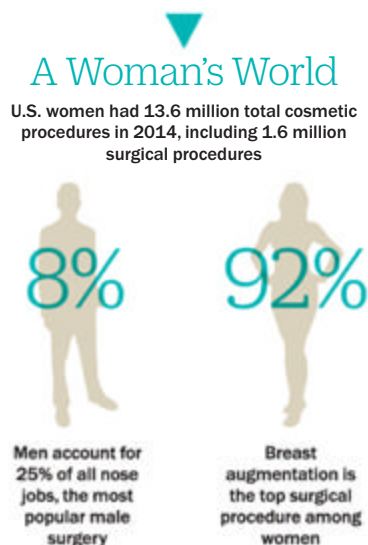
Schultz worked with a psychologist to cast patients who, he said, had high self-esteem but low self-image. David Sarwer,

a professor of psychology at the Center for Human Appearance at the University of Pennsylvania’s medical school, says until recently the vast majority of therapists told patients that cosmetic procedures were a sign of depression and low self-esteem. Academic papers on the subject in the 1960s seem offensive today because they argue that nose jobs are an attempt to get rid of the father. (Nose equaled penis, as all things did in 1960s psychology papers.) “They were saying that 20% of patients had schizophrenia, and we just don’t see that,” Sarwer says. “Now we think that appearance matters. We have evidence that more attractive individuals receive preferential treatment throughout their lifespan.”

**ACCEPTABILITY EVENTUALLY COMES** to nearly all forms of vanity. In 19th century America, makeup was often sold under the counter because it was considered a tool of prostitution. In the 1930s, when hair dyeing was new, women got their color done in the basements of beauty parlors so no one would see them and continued to do so for decades after; now 75% of women dye their hair. And 15 years ago, getting your teeth whitened made you a tool; now dentists throw in free whitener in the goodie bag along with the floss and a toothbrush. It’s actually difficult to find a toothpaste that doesn’t include whitening.

Since Botox was introduced as a cosmetic product in 2002, most of the advances have come in dermatology—many from Harvard University’s professor of dermatology R. Rox Anderson, who helped invent and refine ways to use lasers to remove hair, tattoos and wrinkles, as well as the hugely popular CoolSculpting, which painlessly freezes body fat from a machine placed on the skin, causing the fat to disintegrate and come out with your urine. Dermatologists also use fillers, which replace the skin’s hyaluronic acid (instead of its collagen, the old method), to replace lost volume. In November 2013, Juvederm introduced Voluma, a filler for cheeks that can last two years, provides more lift and has a reversible antidote in case a patient changes her mind or a doctor goes too far.

L.A. doctor Derek Jones, who is 50 and wrinkle-free thanks to practicing on himself, says he has dosed 2,000 patients with



Voluma at \$1,000 per session. He also helped bring Kybella to FDA trial; the drug, available this summer, erases the fat in a double chin. The company that developed it was bought by pharmaceutical giant Allergan for \$2.1 billion on June 17.

These kinds of procedures are even starting to get normalized for guys. More than three times as many men are getting “Botox” than in 2000. Grant Stevens, who has practiced plastic surgery in L.A.’s Marina Del Rey for 28 years, says he always had about 8% male patients until he bought a CoolSculpting machine in 2009 and got ESPN radio jocks to try it and talk about it in radio ads. Last December he expanded into office space next door and built Marina ManLand. There’s a private entrance, a fake buffalo head and ostrich-leather walls in the reception area, leather scent pumped in and a TV screen looping the behind-the-scenes video of the *Sports Illustrated Swimsuit Issue* in the bathroom. “I tried to get beer, but I couldn’t,” Stevens says. “Medical board.” Now 40% of his patients are men, and his nine CoolSculpting machines (he often hooks two simultaneously to one busy exec to save time) deliver the gateway procedure: about half return to do something else.

Inside, there’s the Bear’s Lair for laser hair removal, the Lion’s Den for hair replacement and the Dog House for facial-like spa treatments. Bob Van Dine, the co-founder of the St. Ives skin-care line, sits with an ice pack on his face after some fillers, Botox and a dose of liquid nitrogen to remove an age spot. “Hell, women have been doing this since after the war. So why not?” he asks. He even got a friend to come in. “Now he told me, ‘I get laid more today than I have in 10 years.’”

Van Dine and Hall, like the vast majority of American plastic-surgery patients, are white. But that’s slowly changing. While cosmetic procedures performed on Caucasians went up 38% from 2005 to 2014 in the U.S., they jumped by 146% for Asians, 77% for Latinos and 72% for African Americans. A lot of that is due to the ease and price of injectables, but a fair number of those procedures were done to give Asians the crease above the eye that other races have, or to thin black people’s noses, which conjures up images of Jews getting a “Diamond nose” in the 1960s and ’70s (named after New York plastic surgeon Howard Diamond)

## The Price of Beauty

From the spa to the operating room, Americans spent \$12.9 billion on cosmetic treatments in 2014. Here are the average physician fees for some procedures:



### RHINOPLASTY \$4,694

Swelling subsides within a few weeks, but the nose may gradually change for up to a year until the contours become permanent.



### LIPOSUCTION \$2,971

Costs vary depending on the surgeon’s experience and techniques used. Swelling may last for several months after surgery.



### BOTOX \$371

Injections take about 15 minutes. Botox reduces wrinkles by blocking muscles’ nerve signals so they can’t contract.



### FACE-LIFT \$6,550

A face-lift incision runs from the temples to below the ears. The tissue is repositioned, and the skin is redraped and trimmed.



### BUTTOCK LIFT \$4,509

Implants or transferred fat enhance the butt cheeks. Patients typically wear a support garment for weeks after the procedure.

or Irish immigrants de-pugifying theirs in the 1890s.

WHEN DR. LARRY NICTER, whose offices are across the street from the Fashion Island Shopping Center, meets with Hall for her first consultation of the day, he asks her if she’s had any procedures done before. She tells him about her 2007 eye lift, which she’s quite happy with and which is utterly inconspicuous. When Nichter probes further, she eventually remembers that, sure, she got Botox in her forehead and tried Juvederm fillers, but it didn’t change her face enough to make the injections worth it. Or even memorable.

Nichter, who has fading, thin white hair and a calm, gentle demeanor, is known for the LiteLift surgery, a variation on a mini-face-lift, which he and his partner created. With a LiteLift, Hall could avoid an operating room and general anesthesia. Instead she could take an anti-anxiety pill, get a local anesthetic, have a short incision hidden behind her ear and be done in two hours right in his office.

It’s pretty much the same procedure that was offered by a 68-location national chain called Lifestyle Lift, which had commercials starring Debby Boone using her 1977 hit “You Light Up My Life.” After expanding too quickly, it shuttered most of its locations in March. But chains for other surgeries are growing: Sono Bello for liposuction (26 locations) and Bosley for hair restoration (71 U.S. locations). Seery, the CEO of RealSelf, thinks a breast-augmentation chain will be next.

Nichter gently pinches the sides of Hall’s neck as she whimpers at the attention drawn to what he calls her “redundant skin.” Then he gives her a hand mirror and pulls her cheeks up. “Oh, that’s so nice,” she says. He advises her not to do the brow lift she wants, which he says might give her that “Hollywood, swept-away, wind-tunnel” look. As part of his regular list of questions, Nichter asks Hall, “Do you care if people know you had surgery? It adds two weeks to your recovery.” She, of course, does not. She does, however, have a legal pad of other questions to ask him.

This takes a while. Way longer than her daughter Stella, who was in this just to go to the nearby Huntington dog beach, wants. But there are enough moms coming to Dr. Nichter’s that he has a bowl

SOURCE: AMERICAN SOCIETY OF PLASTIC SURGEONS

of wrapped Dove chocolates and a stack of children's books for her. When it comes time to explain her bandages to Stella, Hall is considering buying her a children's book called *My Beautiful Mommy*, written by Miami plastic surgeon Michael Salzhauer to help his patients since so many have "mommy makeovers," which can include liposuction, breast augmentation and a breast lift to reverse changes from childbirth and breast-feeding. At the end of the consult, Hall stands against the wall, turning as Nichter takes "before" photos. Stella holds her hand, turning and posing the same exact way.

Nichter leaves and Barbara Kone, his patient-care consultant, who has communicated with Hall by phone and email, enters. She looks at Tantrow, Hall's husband, and asks, "Did you want to stay for the financial?" He gets up, taking his daughter's hand. "C'mon, Stella," he says. "Daddy needs a drink."

The surgery will cost Hall \$11,475 if she goes for the in-office, nonanesthesia version, more if she wants to do it in a medical center. Hall asks if she can pay with her CareCredit card, which, naturally, she can. It's a card just for "health, beauty and wellness needs" that charges no interest for a limited time, then jacks it up so high that the company reached an agreement with the Consumer Financial Protection Bureau to pay \$34.1 million back to customers in December 2013.

After a late breakfast at Ruby's Diner, Tantrow and Stella go to the dog beach while Hall meets with another surgeon, Dr. Amy Bandy. The examining room has a wall of wicker baskets filled with silicone bags, ranging from 100 ccs at the top of the case to 800 ccs at the bottom. Most of the women who work in the office look as though they didn't reach very high to select theirs. An iPad hanging on the wall flashes a barrage of before-and-after photos of patients' breast augmentations. Bandy, an older woman showing a lot of natural cleavage in her short tan dress, has long clear nails, glasses and very little makeup.

Over the past few years, Bandy says, women have checked in on Facebook or Yelp from the waiting room, allowing their friends to comment on posts about their appointments. "I had a woman who had breast augmentation, and in six months I saw 10 of her friends," she

says about how openly—and often—her patients talk about their work. There are three kinds of cosmetic procedures, though they overlap: sexualizing (breast augmentation), normalizing (nose job) and antiaging (face-lift); the sexualizing ones are nearly wholly public, while the ones whose purpose is to appear younger are kept quieter.

**ALONG WITH BREAST** augmentation, Bandy regularly performs two other procedures for her younger patients: labiaplasty, which she says patients often say they would have done long ago if they'd heard about it, and butt lifts. They are, by far, the fastest-growing types of plastic surgery. (Butt augmentations are up 86% since 2013; labiaplasty is up 49%, according to the American Society for Aesthetic Plastic Surgery.) Miami plastic surgeon Dr. Constantino Mendieta, who owns the website [www.ButtsByMendieta.com](http://www.ButtsByMendieta.com), doesn't use implants, which are considered an early failed approach. (Sitting on silicone bags was considered a drawback.)

Instead, he takes patients' unwanted fat, which he calls "liquid gold," and puts it in their posteriors. He's done some 3,000 butt lifts—about 3.5 a day on average. "I'm going to South Africa, Dubai, Korea, Australia—everyone is interested in the buttocks," Mendieta says. He adds that all his patients come from recommendations since he doesn't advertise.

But even if certain procedures get normalized, new ones freak people out. Though it's uncommon, last year the *New York Times* and the *Daily Mail* reported on women having hand lifts right after getting engaged to show off their rings on Facebook and Instagram. Los Angeles podiatrist Dr. Ali Sadrieh administers the Cinderella procedure to his patients so they can better fit into high-heeled shoes. Dr. Sean Ravaei is shocked that his podiatry practice, which has

expanded to six L.A. locations, morphed from the sprained ankles and bunions he went to school to treat to 30% cosmetic procedures—mostly for women who pay \$2,000 to \$4,000 to shorten an abnormally long toe.

"I started doing this in Philadelphia in 2004. This lady came to the office and said she didn't like the way her toe looked, and we made it shorter for her. She told her friends, and more people came. That was in Philadelphia, where many, many people are obese and people do not care much about their looks," he says.

Hall's main concern is that the results of her face-lift look natural. This is what everyone says to a plastic surgeon, and it means nothing. Bandy doesn't perform mini-face-lifts because, she says, patients don't see enough change to make the pain and money worth it. The problem is that every micro-demographic thinks that something else is natural. "Look at the difference between the Real Housewives," says Wendy Lewis, the cosmetic-procedure consultant. "Orange County is big boobs. New Jersey is rhinoplasty. Atlanta is the South, and in the South, lips are big."

Scott Westerfeld, the author of *The Uglies*, a sci-fi series for teens about a future in which everyone gets plastic surgery around 16, thinks plastic surgery already is used to communicate the same things that handbags and shoes tell, and that it's no stranger to use it that way. "This is the first generation that thinks about plastic surgery as almost a given," he says. "When you look at a picture, when you meet someone, you think, 'Is that her nose?' Just like when you meet someone who's got red hair you think for a second, 'Is that real red hair or is that fake red hair?' They're the first generation to grow up with the idea that plastic surgery is neither superexpensive nor a weird thing that only the maladjusted would do. The idea that the body is this thing you are given and you can't escape it—that no longer holds."

Different subgroups already have different work: tasteful small Upper West Side breasts; butt lifts for hip-hop lovers; plumped lips for selfie-prone party girls; fillers for CEOs. And there's also a very specific generic look. "There's a plastic-surgery look that doesn't compete with the natural look and indicates

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class privilege to the time and money it takes to maintain such a face,” says Kjerstin Gruys, a sociologist at Stanford University. “My concern is the same way bad teeth are a risk in the business world, soon having certain natural facial features as far as aging might be a class signifier.”

Hall’s third stop is Dr. Steven Daines, who shows her a PowerPoint presentation about the face-lift procedure she wants. A few days later, he mails her a handwritten note thanking her for her visit. Plastic surgeons became salespeople in the 1980s, when the medical industry was deregulated and physicians were allowed to advertise. Many now have publicists. And regular physicians and eye doctors have packed their offices with more brochures than a Days Inn lobby. Increasingly, not only is the line between doctor (laser resurfacing) and spa (microdermabrasion)

blurred, but between doctor and Sephora salesperson.

**A FEW DAYS** after Hall’s daylong doctor-shopping trip to Orange County, she posts on RealSelf that she’s chosen Dr. Nichter and scheduled a face-lift for when she has time off work to recover. She chose Nichter because he was thorough, had a lot of experience and was a little cheaper, plus she loved his assistant. A week later another user, Angie, commented on Hall’s announcement: “How exciting that you settled on a doctor and a surgery date!” Angie, who lives in Seattle, posts pictures of herself and is satisfied with her lip and nose jobs, though she thinks laser hair removal isn’t worth it.

But in December, Hall decided, like so many other patients, not to get the surgery and opted instead for noninvasive

procedures. She had Dr. Nichter liposuction her chin and transfer the fat to fill under her eyes, her nasiolabial folds and marionette lines. And she’s very happy. “I was just laid off, so I’m really glad I had the procedure done,” she says. “I’ll feel more confident on interviews, especially once the lipo scar on my chin has smoothed out.” She recently looked at her wedding video and couldn’t focus on anything but her chin. “Before if someone took a picture of me, I’d hate it and not look at it. Now I’m taking selfies,” she says.

All this sisterly support is real, but it’s nuanced and sometimes backhanded. Judging used to be simple. Your friend got plastic surgery; you pretended you didn’t notice and then told all your mutual acquaintances she must really hate herself to go and cut up her face like that. But now you’ve got to feel everyone out. Just fillers? Looks good. Botox around the eyes? Yeah, I guess that’s O.K. Laser resurfacing, tooth whitening, microdermabrasion? That’s basic upkeep. And a mommy makeover that just gets you back to where you were in the first place? Only fair, right?

There’s no judging at the Aesthetic Meeting 2014 in the Moscone Center in San Francisco. At plastic surgery’s biggest convention, no one uses the phrase *plastic surgery*; the preference is for terms like *realization*. There are a lot of new products on display, including a cheetah-print “jaw bra,” for the chin-implant seeker with style.

At the booth for CoolSculpting, Becky Thomas, a mom of six from Hopland, Calif., who looks like she could be Tina Fey’s aunt, gets the procedure done in front of a crowd, showing off the product for the company in exchange for the service. Thomas had already gotten some back fat zapped. “It’s not a good look,” she says. “I would stand in front of the mirror and grab my fat and say, I don’t deserve that.”

Maybe Thomas is right. Maybe she doesn’t deserve that fat. Maybe none of us do. But then, of course, all of our friends are going to have to keep up with us. And then all of their friends, until everyone is getting every procedure they possibly can. And there were an awful lot of booths at the Moscone Center. —With reporting by KATY STEINMETZ and STEVEN BOROWIEC