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## The Relationship between Aesthetics and Self-Esteem

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The aesthetic industry encompasses many products and services dedicated to beauty, cosmetics, and personal appearance. As the demand for minimally invasive cosmetic procedures, such as Botox, fillers, peels, and lasers, rapidly increases, Aesthetic Medicine is gaining recognition as a separate specialty within Pakistan and globally. The prevalence of skin disorders worldwide has increased, leading to many patients seeking skin therapy that utilizes light, ultrasound, and laser-based solutions.

The top five minimally invasive cosmetic procedures, namely botulinum toxin type A, soft tissue fillers, laser skin resurfacing, chemical peels, and intense pulsed light, have recently gained significant popularity. This rise in demand can be attributed to various factors, including reduced treatment risks, cost-effectiveness, and faster results.<sup>2</sup> Technological advancements within the aesthetic industry consistently provide new treatment opportunities and improve the approaches used to address existing indications. Additionally, there is a notable surge in acceptance and popularity of a wide range of non-invasive corrective treatments. Patients increasingly seek these procedures to enhance their physical appearance and improve their mental and emotional well-being.<sup>3</sup>

In a survey of Dermatology residents in Pakistan conducted by Asher et al., 65% of participants expressed interest in pursuing Dermatologic Surgery as a subspecialty after completing their fellowship in Dermatology.<sup>4</sup> Academies offering costly certificate courses in aesthetics have also seen significant growth, while aesthetic practices are predominantly conducted in private setups with minimal regulations.Non-physician operators and allied healthcare professionals have entered the field of aesthetic medicine in large numbers, resulting in a lack of regulation and oversight. After undergoing training, many administer medical procedures to patients without the fundamental knowledge and training required.<sup>5</sup> This editorial aims to provide insight on how aesthetics impacts self-esteem of

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1st Revision: 01-12-2023 Received: 29-11-2023 Accepted: 21-03-2024 1st Revision: 01-12-2023 2nd Revision: 31-01-2024 3rd Revision: 13-03-2024 people seeking these services.

Aesthetic treatments using injectables have shown substantial improvements in patient-reported psychological and social well-being, along with a decrease in distress related to their appearance. A study examining the use of autologous fat and platelet-rich plasma for facial filling demonstrated that the treatment improved the social and psychological functioning of the patients involved. Many aesthetic clinics have adapted their approach to meet the evolving needs of patients who seek to enhance their appearance and optimize their overall well-being. As a result, aesthetic clinics have transformed into all-in-one wellness centers, offering a comprehensive range of solutions to address patients' concerns. For example, besides providing body contouring treatments, these centers offer opportunities for patients to consult with experts such as dietitians and fitness professionals.<sup>7</sup> This shift reflects a recognition of the interconnectedness of various aspects of health and wellness in achieving the desired look and feeling of individuals.

However, while aesthetic medicine aims to enhance individuals' appearance and build self-confidence, it can unintentionally decrease self-esteem, as indicated by evidence.8 Unrealistic beauty standards promoted by the media can further erode self-esteem as individuals strive to meet unattainable ideals. While it is challenging to establish a direct causal relationship between unrealistic beauty standards and the increase in the practice of aesthetic medicine, there is evidence to suggest a correlation between the two. Research has shown that societal pressures and cultural norms related to beauty standards can significantly impact individuals' body image dissatisfaction and desire for cosmetic procedures. A study by Hawkins et al, found that exposure to thin-ideal media images was associated with increased body dissatisfaction and a greater desire for cosmetic surgery among women.9 A study published in JAMA Facial Plastic Surgery highlighted that social media platforms like Instagram, which heavily emphasize appearance through filtered and edited images, have contributed to an increase in facial cosmetic procedures. The study found that patients often requested specific features seen on social media influencers or celebrities. 10

Body dysmorphia can develop when individuals obsessively focus on perceived flaws, leading to distress and a decline in self-esteem. Social comparison also plays a significant role, as individuals compare themselves to others and feel self-doubt and dissatisfaction when they don't meet societal beauty standards. Additionally, the high cost of beauty products, treatments, and surgeries in the aesthetic market can create feelings of inadequacy for those who cannot afford them, impacting their self-esteem. Research shows that the most common surgical cosmetic procedures performed on individuals aged 18 or younger include nose reshaping, breast lifts, breast augmentation, liposuction, and tummy tucks. However, the safety and long-term risks of these procedures to adolescents have not been extensively studied. This is particularly concerning since adolescence is a crucial mental and physical development stage. 10

In aesthetic surgery clinics, there is a notable occurrence of patients seeking a range of cosmetic procedures, often requesting treatments that may appear disproportionate to their overall needs. Many of these patients may have underlying psychiatric disorders that have been either unrecognized or untreated.<sup>6</sup>

There has been a significant increase in individuals seeking aesthetic treatments to resemble their idols. However, it is important to acknowledge that many images that inspire these patients have been heavily altered, creating an unrealistic perception of what can be realistically achieved through aesthetic interventions. Consequently, these patients are likely to be dissatisfied with the outcomes, and it would be prudent for practitioners to consider carefully whether to proceed with treatment in such cases. Following the ethical principles of non-malfeasance and beneficence, refusing treatment to patients with unrealistic expectations may be necessary. This is because the potential risks of the treatment may outweigh the potential benefits in such individuals. <sup>11</sup>

On the other hand, aesthetic interventions can yield clinically significant psychological benefits in carefully chosen patients. Most individuals who seek aesthetic consultations are typically in good physical health but often report a decline in self-confidence resulting from the deterioration of their facial appearance. 12 To maximize the benefits of aesthetic procedures and minimize the associated risks, it is imperative to prioritize optimal patient selection and uphold a high level of technical expertise. The long-term effects of aesthetic procedures on self-esteem, quality of life, self-confidence, and interpersonal relationships have produced conflicting results in studies. While individuals generally express greater satisfaction with the specific body part they had the procedure on, the overall impact on these aspects remains uncertain and inconclusive. <sup>10</sup> Besides positive outcomes, research has identified a correlation between plastic surgery and unfavorable post-surgical outcomes for certain patients. This is particularly evident among individuals with a personality disorder, those who believed that the surgery would salvage a relationship, and those who held unrealistic expectations regarding the procedure. 9 Certain studies have gone to the extent of establishing a connection between

dissatisfaction with cosmetic surgery procedures and suicidal tendencies.<sup>4</sup>

Several studies indicated a concerning association between breast implants and suicide rates. For example, a study revealed that women with breast implants were four times more likely to commit suicide compared to other plastic surgery patients in the same age range. Similarly, three other studies reported suicide rates two to three times higher in women with breast implants. However, it is important to note that these studies could not establish a direct causal relationship. Some researchers speculate that factors such as certain personality traits or unrealistic expectations among specific individuals who undergo the surgery may have contributed to the heightened risk of suicide.<sup>7</sup>

In the past, mental health experts believed that individuals seeking cosmetic surgery had underlying psychiatric issues. However, numerous subsequent studies have revealed that there are minimal pathological distinctions between those who choose to undergo cosmetic surgery and those who do not.<sup>11</sup> The primary motivation driving most individuals to undergo cosmetic surgery is dissatisfaction with their body image.

BDD, a condition characterized by an obsessive preoccupation with a specific aspect of one's appearance, involves repetitive behaviors that disrupt daily functioning. Studies indicate that around 7 to 12 percent of individuals seeking plastic surgery exhibit symptoms of BDD. Furthermore, most BDD patients who undergo cosmetic procedures do not find relief from their BDD symptoms and often pursue multiple surgeries targeting the same or different areas of their body. Cosmetic rhinoplasty is frequently undergone by individuals with Body Dysmorphic Disorder (BDD) due to their common preoccupations with their nose. 12 According to some studies, patients who are dissatisfied with the outcomes of their cosmetic surgery may seek further procedures and may also experience depression, difficulties in adjusting to the changes, social isolation, problems within their family relationships, engaging in self-destructive behaviors, and harboring feelings of anger towards the surgeon and their staff.5

Research shows that aesthetic treatments rarely address the core symptoms of BDD and can sometimes make the condition worse. Instead, evidence-based treatments such as serotonin reuptake inhibitors (SRIs) and cognitive-behavioral therapy (CBT) are recommended to help reduce BDD symptoms. In some cases, a combination of medication and treatment may be beneficial. <sup>12</sup> There is a pressing need for comprehensive, large-scale prospective studies that involve representative samples of patients and employ established research tools. While many individuals experience positive psychosocial adjustments after cosmetic procedures, the field must acknowledge that some individuals may not fare as well. It is important to implement screening measures

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to identify such individuals. Specifically, exploring the long-term impact of cosmetic surgery on patients' relationships, self-esteem, and quality of life presents numerous research prospects for psychologists. It is important to recognize that the relationship between the aesthetic market and self-esteem is complex, and efforts should be made to promote diverse beauty standards and foster self-acceptance.

## **Authors Contribution:**

**Sannia Perwaiz Iqbal:** Conception of design, writing, proof reading

## **REFERENCES:**

- Widdows H, MacCallum F. The Demands of Beauty: Editors' Introduction. Health Care Anal. 2018 Sep;26(3):207-219. doi: 10.1007/s10728-018-0360-3.
- Collier H. Aesthetics: the wild west of medicine. J Aesthet Nurs. 2018;7(10):548–9. DOI: 10.12968/joan.2018.7.10.548
- Mashhood AA, Sheikh ZI, Bukhari SK. Choice of second fellowship in dermatology. J Pak Assoc Dermatol. 2018;28(2) :121–2.
- Noor SM, Sagheer F. Regulating teaching and practice of aesthetic medicine and surgery. J Postgrad Med Inst. 2023; 37(2): 89-90. https://doi.org/10.54079/jpmi.37.2.3250
- Jacobsen PH, Holmich LR, McLaughlin JK, et al. Mortality and suicide among Danish women with cosmetic breast implants. Arch Intern Med. 2004;164(22):2450–2455. doi: 10.1001/archinte.164.22.2450

- Meningaud JP, Benadiba L, Servant JM, Herve C, Bertrand JC, Pelicier Y. Depression, anxiety and quality of life: outcome 9 months after facial cosmetic surgery. J Craniomaxillofac Surg. 2003;31(1):46–50. doi: 10.1016/s1010-5182(02)00159-2
- Spivey TL, Gutowski ED, Zinboonyahgoon N, et al. Chronic pain after breast surgery: a prospective, observational study. Ann Surg Oncol. 2018;25(10):2917–2924. doi: 10.1245/s10434-018-6644-x
- Najjaran Toussi H, Share H. Changes in the Indices of Body Image Concern, Sexual Self-Esteem and Sexual Body Image in Females Undergoing Cosmetic Rhinoplasty: A Single-Group Trial. Aesthetic Plast Surg. 2019 Jun;43(3):771-779. doi: 10.1007/s00266-019-01336-2. Epub 2019 Feb 25.
- Hawkins N, Richards PS, Granley HM, Stein DM. The impact of exposure to the thin-ideal media image on women. Eat Disord. 2004 Spring;12(1):35-50. doi: 10.1080/ 10640260490267751. PMID: 16864303.
- Rajanala S, Maymone MBC, Vashi NA. Selfies-Living in the Era of Filtered Photographs. JAMA Facial Plast Surg. 2018 Dec 1;20(6):443-444. doi: 10.1001/jamafacial.2018.0486. PMID: 30073294.
- 11. Yurtsever I, Matusiak £, Szepietowski JC. To Inject or to Reject? The Body Image Perception among Aesthetic Dermatology Patients. J Clin Med. 2022 Dec 26;12(1):172. doi: 10.3390/jcm12010172.
- Teixeira Nicolosi J, Fernandes de Carvalho V, Llonch Sabatés A. A quantitative, cross-sectional study of depression and self-esteem in teenage and young adult burn victims in rehabilitation. Ostomy Wound Manage. 2013 Sep;59(9):22-9.