

Plastic surgery: good or evil



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Research paper Plastic Surgery: Good or Evil Date: May-13th-2009

Introduction God is beautiful and loves beauty. As humans, we are working on adopting this theory whereby plastic surgery is our leader. A large number of people undergo plastic surgery, adopt the latest medical techniques and make their body physically fit and beautiful.

The practice of plastic surgeries is affecting our lives in many domains; in particular, psychosocially. For instance, the goal of this research project is to spot light on the pros and cons debate concerning plastic surgeries. Through this paper, I will be presenting the argument through relying mainly on quoting experts and using credible sources. I will be talking about plastic surgery done for ethnical, medical, psychological and human life improvement purposes.

I will also go through the religious views toward the practice of plastic surgery and show the medical risks of this practice. Yet, this paper presents interweaving of the psychologist Dr. Nidal Najjar and the medical surgeon Dr. Nabil Kanj. Choosing this topic to argue was not so hard.

As a Lebanese, this topic raises my interest. Lebanon has become “ Mecca” of plastic surgery. Plastic surgery, being used for both cosmetic and reconstructive purposes, is being opposed by group of people who still believe that such surgery will lead to the dilemma of humanity, or because they are still prejudiced to the idea that what God created should never be altered. However, although of the arge group of opponents against plastic

surgery, proponents did prove that the latter affects people positively and can serve as solution for various humanity problems.

Definition of Plastic Surgery Plastic surgery is a medical term which describes a surgery concerned with the repair of distorted, defective, injured or misshapen part of the body. As for some people, the use of the word “plastic” means some thing superficial. While for others, they believe that the word plastic implies the implantation of plastic material in our body.

However, it is neither the former nor the latter. The word “ plastic” is derived from Greek origin plastikos, meaning able to be molded (Kita, 2009, origin and definition section).

This medical specialty is concerned with reconstructing and reshaping body parts. Plastic surgery may be divided into cosmetic and reconstructive surgery. The former seeks to enhance one’s physical features and body parts with no trauma or injury, but based on purely aesthetic level. Reconstructive surgery is done to correct any deformed or abnormal physical feature whether it is acquired or congenital.

One of the most important examples supporting the use of plastic surgeries from old years was in World War I when new medical techniques for plastic surgery were developed for caring for soldiers suffering from disfigured facial features (2007). According to Dr. Kanj, cosmetic surgery is necessary from the medical perspective while cosmetic surgery is not. He meant that the latter focuses on satisfying people who are displeased with their faces or their breasts or their noses or their color and many others. Plastic Surgery

and Ethnicity Plastic surgery is used to eradicate signs of ethnicity. As a practice, ethnic cosmetic surgery is not new.

Since the 20th century, the time of emergence of cosmetic surgery, individuals in the United States & Europe not only have looked at enhancing their appearance, but also they were concerned with eradicating physical features that marked them as “ Other” (Davis, pp. 89). Early cosmetic surgeons have developed surgical procedures that allowed ethnic people to be ethnically invisible. For example, Jaques Josef, the founder of modern rhinoplasty, developed procedures that allowed Jewish to be ethnically invisible. The first nose correction was done by John Reo whose feature was associated with Irish immigrants (Davis, pp 89).

According to the American Society for Aesthetic Plastic Surgery (ASAP) and the American Society of Plastic Surgeons (ASPS), ethnic minorities accounted for about 20 percent of the 11. 9 million cosmetic procedures done in 2004 (Stafford, 2009). According American Society of Plastic and Reconstructive Surgeons, as published in New York Times, over 20 percent of aesthetic surgery were done for black, Asian or Hispanic in 1990. Ethnic plastic surgery should be a right whereby it affects ethnic groups positively.

Those surgeries stem mainly from the social inequality. According to Davis, the doctrine of great chain of Being, constructed ethnic groups at the bottom of the pyramid. She adds that those hierarchal arrangements were based on phenotypical attributes and developed subordinated racial taxonomies. This means that social inequalities stem from this unfair hierarchy; white European and American on the top and the African on the bottom. As a

natural reaction, the ethnic groups are performing cosmetic surgeries to eradicate signs of ethnicity, and according to Haiken, to be ethnically anonymous (Davis, 90).

As for immigrants and members of marginalized groups, this newly emerging medical specialty of cosmetic surgery seemed to provide a solution” (Davis, 90). Cosmetic surgery provided its ethnic patients with a way to achieve upward mobility and assimilation in a culture where certain defined people are known as different and more important by virtue of appearance (Davis, 90). This surgical passing makes individuals escape the oppression and subordination accompanying one identity and access the privileges and have better working statuses (as cited in Davis, pp. 90).

Moreover, cosmetic surgeries should be available to all people. Just as people of color should have access to higher education and well paid jobs, they should be also to access performance cosmetic surgery. So cosmetic surgery for disadvantaged group is concerned with injustice and therefore it is a matter of politics not just aesthetics. Moreover, ethnic cosmetic surgery is just like any development or progress happening within the humanity. Ethnic cosmetic surgery should be easily accepted as a matter of adopting the new technologies to encompass a growing group of potential patients (Davis, pp. 2).

Now here is the case of Michael Jackson one of the most striking evident fame examples of racializing cosmetic surgery. Michael Jackson now does not resemble the dark skinned African baby of 70's. Michael Jackson says:” I can afford it, I want it so I'm going to have it to look better”. Also he expressed

that in one of his songs "Black or White": "I am tired of this stuff...I am not going to spend my life being a color" (1983).

Critics considered his disfigured African features as a violation of nature and unusual act which negates the essential natural identity. According to Awkward, Jackson is regarded as a "race traitor" whereby his racially motivated surgery is a mere attempt to deny his identity. This view was supported by other critics who viewed that as a reflection of self mutilation of blackness. They condemned Jackson of removing features that express his enslavement and Eurocentric definitions of beauty (Davis, 90).

For instance, Dr. Najjar commented on this by saying that whenever allowing ethnic cosmetic surgery, this means that we are giving the right for white to insult black and to view them as different. However, Adria Piper argues that this surgical passing is not about rejecting blackness but rejecting identification with blackness (Davis, pp. 97). Also, she Adria said that it is easier to change people's color rather than changing the whole society (Davis, pp. 90).

This is not new, as mentioned before; ethnic surgery is since 1990 when over 20% of cosmetic surgeries were done for eradicating ethnic signs. For instance, those who take choice of ethnic cosmetic surgery are mostly subordinated and unprivileged because of their color. Those should not be blamed of taking such choice, but their culture which treated them as "Others" is to be blamed. Accordingly, all recipients of cosmetic surgery have to be regarded as individuals negotiating their identity whereby embodied differences serve as unbearable suffering. Plastic Surgery and Shaping

Deformed Children Plastic surgery is used to make children with physical congenital abnormalities look more normal and have their psychosocial functions enhanced. New techniques and applications in the medical field continue to be developed to be able to enhance humanity.

In particular the wide spread of cosmetic surgery to eliminate differences with appearance is being opposed by many. Think of a young boy who has ears that stick straight out, who is teased constantly by his schoolmates. What if he had plastic surgery that made his ears look normal? If he had plastic surgery, he would be better physiologically and psycho sociologically. According to the Hastings center, children with achondroplasia (genital dwarfism), anomalous genitalia, and craniofacial deformities are the main cases of children doing plastic surgery (Parens, pp. 8).

Also, I have taken in a hematology course with Dr. Khatib that, children with bone marrow deformities can be reshaped using plastic surgeries unless the disease is malignant. For instance, in an interview with Dr. Kanj, who is a medical surgeon, he added that also Down Syndrome's patients are also doing such surgery a lot. He said that those patients have abnormal distinctive features as flattened and round face, underdeveloped ears and flattened nose. Also Dr.

Kanj added that such surgeries are beneficial for HIV patients who have atrophy of face. As for the latter, Dr. Kanj said that the results are being excellent. However, many parents tend to reject their deformed children. By looking at 1200 Israeli families whose children had atypical appearances,

sociologist Miera Wiess found that 80 % of the parents rejected their children.

They isolated them in the home away from the rest of the family (Parens, pp. 238). Plastic surgery used to normalize children and enhance their psychosocial functions should be an accepted right. According to Parens, who is a senior research scholar at the Hastings center, individuals with physical disabilities are regarded as powerless isolated minority of people. They are treated unequally just for the assumption that they are physically impaired (Parens, pp.

233). For this reason, deformed children should have access to plastic surgery. However, some critics oppose surgically shaping children supporting their cons by the argument which says that such surgeries make it permissible for disabilities to be distracting (Parens, pp. 236). In their opinion, such surgeries fail to promote the idea of legitimacy of physical differences that a just society can and should include (Parens, pp.

237). For instance Parens refute that by saying “ whenever it comes to body differences, it is easier to offer children surgery to help them look normal than to change attitudes of those around them” (Parens, pp. 25). However, the controversial aspects of surgically shaping abnormal children are still rising over. Some critics say that such surgeries create a gap between the inside and outside of the child, whereby it leaves mental abnormality intact and invisible.

At this point, Davis counter argues those critics and supports Parens by saying that individuals with Down’s syndrome are already suffering their

mental impairment, for that, it is not fair that they also have to suffer because of their facial features (Davis, pp. 138). Moreover, experimental literature proved that physically normal people are perceived as more sociable, intelligent and sociable than physically deformed people. Here comes the role of plastic surgery to eliminate physical markers of difference and to propose justice and equality among all.

This is more emphasized by what parents say about that. A father of deformed children says in an interview written down by Davis, that “ it is not fair to penalize his son just because he is handicapped, the operation should be regarded as similar to having braces put on” (Davis, pp. 139). However, effect of surgically shaping children is not just limited to society, but also to the parents of the deformed child. Children’s deformities do affect the parental love and intimacy. Many parents of deformed children come to either reject their children or isolate them.

In both cases, they will not love their children as if they were normal. Parental confusion and ambivalence are not good for the child. Children need love as flower needs sunshine and water. Hence, by doing plastic surgery and after having their shape normalized, their parents become more involved in smiling, interacting and loving with their children who were impaired before.

In particular, surgical change is considered the easiest way to give the person with atypical body a chance at participating in teams and social interactions (Parens, pp. 230). In simple words, the better the child looks, the better he is rewarded by his society. Something interesting was mentioned

by Parens regarding normalizing shape. She said that “ our homes reflect who we are, and we want people to love the home to which they are invited.

If our bodies are personal to us, how much more personal are our bodies?

We want to be comfortable with our own bodies and we want to have them at least accepted by the world” (Parens, pp. 231). Plastic Surgery and Human Life Improvement Plastic surgery seeks improvement of human life through its equal distribution on humans. Caplan argues that the desire to improve human is not vain. That is human nature. In his article, Human Enhancement Will Improve Human Life, Caplan mentions that many critics consider opting plastic surgery to enhance human life is as opting perfection, while Salvador considers that as an improvement which all humans should opt to.

According to Caplan, if we just limit ourselves, we will rob ourselves from the biological revolution opportunities for enhancing our life. Anti-meliorists argue against improvement by saying that fat is being suctioned out, breasts are being augmented and moods are being calmed down and that should be stopped because it can lead to unappealing places (Caplan , 2007). However, we know that something which gives us pleasure is our ability to control our appearance. Other critics of this human enhancement relate improvement to vanity, and they say that “ if you want to look better, you are vain”.

However, this argument is neither logical nor supported by tentative evidence. For instance, if you want to look better, you might say that you are presenting your self in a way that makes you feel better, or in a way you have self confidence or self regard, or in a way you gain advantage in mating

game (Caplan, 2007). Yet, that has nothing to do with vanity. For instance, it seemed that the problem is not with vanity or improvement.

It is more with inequality. Critics argued that such plastic surgeries will not be available but only for those who can afford paying for. According to Caplan (2007), here the only argument is inequity. Yet, Caplan and all of us argues that inequity is wrong, but Caplan says that inequity is wrong but not that it is biological it is wrong. However, here the only argument is inequity. This argument falls here down completely because in most countries, loans are given from banks for those who want to do plastic surgeries.

For example, taking Lebanon as an example, the National bank offered a new product in 2007: a loan for plastic surgery, and as Mr. Nasr explains, the bank has structured the loan the way it is without the need for guarantee and at 6 % interest and at a minimum salary of 400\$ (Biedermann, 2007). By this way, the loan makes the surgery available to those who previously could not afford it. That is proved by what Gearoge Nasr, the head of FNB's marketing department, mentioned about that that. He stimated that the number of cosmetic procedures has doubled in Lebanon since 2000, and about 1000 operations supported by loans are done a year (Bierdmann, 2007). After it is proved that plastic surgery enhances human lives and is bounded by equity, there is no principle argument why we should not improve ourselves.

Plastic Surgery and Psychology Plastic surgery functions as a psychological solution through enhancing one's self esteem. The physical changes that patients seek are a means of psychological goals. According to Dr. Najjar, a

psychologist whom I interviewed, she said that patients seek plastic surgeries to improve their emotional states, interpersonal relationships, and reactions of larger groups in society with them. In simple words, she described, they tend to improve their self esteem. According to a recent study done by the American Society for Aesthetic Plastic Surgery, it was mentioned that the participants' self esteem score increased 20.

7 to 24.9 on the 30 point Rosenberg scale and their sexual desire increase at 78.6 % from initial scores (Nauret, 2007). This is prevalent compared to pre-surgical situation of the patient.

Patients especially women say: "I feel young but I look old". This means that there is distinction between I who feels and I who appears (Blum, pp. 162). So patients want the person in the mirror to match their own projection of themselves. In particular, plastic surgeons use this point to justify how cosmetic surgeries enhance one's psychology. A surgeon said that when the patient looks at the mirror and see somebody looking youthful, they actually will become more energetic, interactive and their self esteem better (Blum, pp.

163). However, Marianne (2007) in her article about cosmetic surgeries counter argued that by saying " don't think for a minute if you are attractive the whole world will fall at your feet- the shallow and the ignorant may, but truly there is much more to life than looks". However, Dr. Najjar did not agree absolutely with this. She said that physical attractiveness is shown to be influential whereby it gives a booster dose of energy for its athletes in

their workplace. That was clarified in a simple way by Gordon Patzer in an interview with U.

S. news. Cuter babies in nursery are more touched and talked to than less attractive ones, and school teachers tend to hold higher educational expectations for more attractive students (Wolgemuth, 2008). For this reason, many people tend to perform plastic surgeries because they think this is the only way by which they can go up the ladder. According to Wongemuth, good looking people are more likely to get hired, and attractive supervisors are regarded as more credible.

However, the French philosopher Guy Debord says that whenever “appearing” suggests what one both has and is, then identity happens on the surface, and the person’s identity becomes no more important (Blum, pp. 165). For instance, Dr. Najjar counter argues that by saying that plastic surgery is not limiting identity to appearance, because identity is located in both mind and body.

Through plastic surgery, the patient is conveying one half of his identity in a nice way and not erasing the second part. In particular, the relation between mind and body is explained by Schaler based on the materialistic theory. The relation between body and mind is like the relation between heat and molecular motion; they are the same but viewed as different. Accordingly, every mental effect is related to a physical effect (Schaler, 2004). Plastic Surgery and Medical Risks Risks and complications in plastic surgery have lessened overtime and have become very uncommon.

According to Dr. Nabil Kanj, a medical doctor, whom I interviewed, he said that risks of plastic surgery are almost all regular risks of any surgery combined with anesthesia. He mentioned risks like shock, respiratory failure, allergic reactions, cardiac shock or coma. However, these risks are very uncommon; they are not restricted to plastic surgery, so any patient undergoing anesthetic surgery will be exposed to such risks. According to Dr. Kanj, these risks are minimal in case the patient chose a well experienced surgeon. Moreover, that also depends on the health of the patient. Being in good health is of up most importance of preventing infections. Dr. Kanj added that there are always risks associated with any surgical procedure; however that can be prevented by taking certain precautions given by the surgeon. When I asked Dr.

Kanj, about some of these precautions, he mentioned that the patient should stop smoking and drinking alcohol at least 2 weeks before an operation. That is because the latter ncrease exposure to bacterial infections. Also, he said that he recommends from his patients to wash their body using antibacterial on the day of the surgery. For instance, Dr. Kanj specified post surgical procedures to prevent bacterial infections. That is done through prescribing antibiotics to prevent bacterial infections.

In particular, Dr. kanj assured that all public talkative risks that some plastic surgeries can cause cancer are untrue. For example, he gave the example of silicone breast implants. He said that silicone does not cause cancer. It may hide or delay the diagnosis of cancer if it happens for another reason.

Moreover, Dr. Kanj informed me that he is a member of a study research group, studying the long-term effect of plastic surgeries but up till now, they found no link between silicone implants and women's diseases. Plastic Surgery and Religion Religion welcomes the practice of plastic surgery as long as it is done for the benefit of patients. Incorporating religion with medicine raises serious questions of medical ethics. The opposition against plastic surgery argues that it is not permissible to change what God created. Looking at the Islamic religion, it rules that individuals should be satisfied with the way Allah created them.

According to a paper submitted by four plastic surgeons, "even if Islam clearly considers "changing the creation of Allah" is unlawful, Islamic view is ambiguous regarding cosmetic surgery whereby its objection to cosmetic surgery is not absolute" (Atiyeh, Kadry, Hayek & Mucharrafieh, 2008, pp. 1). It is rather an objection to exaggeration and extremism. It has been mentioned that "Allah is beautiful and loves beauty". As for Christianity, there is nothing to indicate that cosmetic surgery is in and of itself wrong (www.gotquestions.org). However, this religion recommends from Christians to think and consult God about the issue before performing the surgery. Although Christianity calls for beatifying the inner self first, because charm is deceitful, however it does not state that cosmetic surgeries are not accepted ethically. If the patient is convinced that he is not hurting himself or exaggerating, then he has the choice to do the surgery or not (www.gotquestions.org). Conclusion To sum up, plastic surgery has become a factual technological progress capable of enhancing humanity. Through its

performance, many patients are normalized, others are looking more attractive and others are getting better working opportunities. According to Karmer, plastic surgery makes people feel better than well (as cited in Parens pp. 12).

However, plastic surgery is still not covered by insurance companies. As a student that have done this research paper, I recommend that plastic surgeries should be covered by insurance. For the sake of argument, just take the case of Samer who performed plastic surgery to treat abnormal features because of Down's syndrome disease. Insurance should have paid but it did not.

My second recommendation is from the patients of plastic surgeries. I recommend that they do not do plastic surgeries in a secret or be ashamed of doing that. For example, do not hide for a month at your home whenever you do surgery for your nose. Just go out and be proud of changing your shape whenever you are convinced by that.

Otherwise, patients will make it permissible for plastic surgeries to be distracting.