Introduction and Doctor Whiteu2019s Background

And you may ask two people the same question, and they're going to be completely different answers. So part of that is working with the patient to understand what is important to them and thinking about.

One do I agree? Is that something that's beautiful to me because I also don't want to produce something personally that I don't think is beautiful, or that I don't think will work with someone, especially with their face.

And that's okay. We can have a difference of opinion and you're going to find another doctor who's going to do that for you. Potentially not. That's totally cool.

But there's no right or wrong about that. The problem that we encounter nowadays with all of these trends is, for instance, there's the Fox friend. This is doctor talks, real talk from real doctors on the issues that matter to you most.

So the beauty standards we've been chasing for years actually help women feel beautiful or where do they created? But an industry that thrives out of endless pursuit of perfection, fueling consumerism.

While younger women in their 30s are turning towards very invasive procedures out of fear of aging? Women in these life are redefining beauty, choosing confidence and authenticity, and trying to embrace natural beauty over impossible ideals.

So what does beauty really means today? Continue with our conversation in midlife Changes and Men of Power Redefining Beauty, ethics, trends, and the social Media effect.

This conversation at its core, it's about esthetics and how our inner feelings and mental perceptions shape our overall well-being. Doctor Paul Adelman, triple Board-certified and your host in Double Down with Doctor Dee.

So we have a sweet treat today, doctor Jeremy White, a double board certified EMT and plastic surgeon with over 12 years of experience in plastics. Please, doctor white, introduce yourself.

Yeah. So, Jeremy White, I, hail from New York, where I did all my education and it took me a while to get over leaving New York. But little by little, move my way down south via DC.

I did my my training and, my undergraduate and medical school, all in New York at Columbia, that Einstein that I did my EMT residence one year general surgery and four years of extra fun, doing, EMT facial plastic surgery, had neck reconstruction and have neck cancers and signs and symptoms and sort of that's how I started actually falling in love with plastic surgery.

I really strong love with it through that. And then I had to decide, am I going to do a facial plastic surgery fellowship or am I going to do a plastic surgery residency?

I was at that really ideal time where to do a plastic surgery residency was an additional two years or three years. So, I'm like, gosh, you know, let me just go.

I'm going to do it all. And you got, in my opinion, I got much more hands on training doing that that way with the general plastic surgery residency. So I ended up getting boards in both specialties.

I do everything head to toe, but my passion and most of my work is really up here in the in the face. So, I actually I finished my auntie training in GW, then I did, my plastic surgery, training at Cleveland Clinic Florida.

Got my boards in both specialties. I really just practiced plastic surgery, focusing on, on facial esthetics, but the EMG train really came in handy because, a lot of what I deal with are, is rhinoplasty, and I do close rhinoplasty.

I haven't done an open rhinoplasty in many, many years. And it was cool because during the training, I got a lot of exposure to both open and closed rhinoplasty.

And it was somewhat unique in that perspective because most of the plastic surgeons really just do open rhinoplasty. And now you're seeing another shift in paradigm these days.

So that sort of brought me to a unique expertise in the face, because I was able to understand both the functional aspects of the nose and the cosmetic aspects of the nose.

I was comfortable with Michelle, you're plastic surgeons are not comfortable with, so it's really cool. I love what I do, the other part of my practice I spend working with some dermatologists, which is also really fun.

It's almost like a camp day for me because, you know, I go over there, I have a, a great huge staff there. And we just we just operate all day. But it's really fun because you get to help a ton of people.

And one day back to back with their skin cancer needs, with their reconstructive needs, teach them about the healing process. And, also kind of think on your feet in that sense, because you all can go in there and sometimes they'll ask me for for a conversation beforehand.

Oh, well, what are we going to do here? I'm like, truthfully, sometimes I don't know. And that's part of the beauty of this is I have to discuss options.

Could be anything from this to this. If it's something big. And sometimes you have to think on your feet and be creative and you know, honestly, sometimes you go in there and you're like, gosh, what am I going to do here?

And then, you know, by the end you're like, oh, that worked out pretty damn well. So like, yeah, you do have creative and think, I know for creativity.

So look at that. I gave you the option just to introduce yourself, because I wanted to demonstrate to my audience that you were a sweet treat. But what you are is the whole combination of knowledge, experience, perspective from the EMT perspective, from the cosmetic perspective, from the dermatological perspective, which is as well a little bit of an extra on it.

So with that, you are the star of the episode. I just want to start with almost introducing to my audience, which I'm trying to target women in midlife, making something very holistic.

And I feel that you are that type of holistic doctor, despite all the diplomas that you have hanging on your wall, because, we are going through a problem right now in medicine and it's, it's a big detachment between the physician and the patient.

So that's why when we use the word holistic, which in my opinion has been overused, but really what we meant holistic is let's don't forget that a patient, first of all, they are the owner of their own health and their perspective.

It has to be validated. And, and we have to listen. So when we start, we have to start really listening.

Beauty Standards and the Shift Toward Natural Results

In medicine, decades, centuries ago, the doctor had to listen because it was the only way they could figure it out, exactly what the patient had. And it was a lot of of this immunology behind.

Right. What questions will come out today with so many technology we don't listen anymore? The eye contact became a luxury between physician and patient relationship.

I love the fact that you are first the doctor with a specialty with we. We look forward for many reasons and we're going to have the discussion here. But on the other side, a doctor who is understanding that listening and having the humbleness of maybe I don't have an answer to you right away, but we'll figure it out together because you have you trust your hands, you trust your creativity.

You plastic surgery at the end is an art, right? So you were about to create a piece of art and you know it's going to come out beautiful, but it's a commission piece of art.

So the person on the other side has had something to say. And, and let's start with a very unique question. And is the perception of beauty just was mentioning how we are all changing that perception is becoming.

It's so much noise around and depends of the stage that you are in life. I'm finding that the women that are going through midlife like me, we're trying to almost embrace the natural beauty again.

Yes, you might require some procedures to go back into that natural beauty, but how do you think that old fashioned, I would say standards of beauty is starting to shift, and especially in these mid life kind of transformation that is happening in the 40s and 50s, you know, it's you touched a lot of different points about, the doctor patient relationship, how that's changed. And I'm going to try and focus specifically on, on on what you were talking about.

So, you know, thank goodness that we are focusing again a lot more about what is natural, what is what is time tested because there are so many guides and trends that come and go.

Like you said, beauty is in the eye of the beholder. Different people may have different ideas of what is pretty and what is not, and that's okay. That's part of our conversation.

I'll ask people, you know, what do you think about this or that or what? What is it that you like about this part of your face or this part of your nose?

And what is it that you don't like? And you may ask two people the same question, are they going to be completely different answers? So part of that is working with the patient to understand what is important to them and thinking about one, do I agree?

Is that something that's beautiful to me because I also don't want to produce something personally that I don't think is beautiful or that I don't think will work with someone, especially with their face.

And that's okay. We can have a difference of opinion, and you're going to find another doctor who's going to do that for you. Potentially not. That's totally cool.

But there's no right or wrong about that. The, the problem that we encounter nowadays with all of these trends is, for instance, there's the fox eye trend, okay.

And a lot is was being pushed on social media. And I've seen these really beautiful 20 year old girls coming and women coming in and saying, I want the fox eye procedure.

Can you do that? Well, it's really a it's a brow after at the corner of a corner of the eyelid, basically, you know, there are two different ways people look at it.

So like a lateral canthal plasti or or a brow lift. And I talk to them about brow position. And it's in traditional esthetics and, and ideals of beauty.

And really this is not something that's reversible or certainly not easily reversible. So I, I've talked many patients out of it. And that's okay if that's what they want and they can go somewhere else, they can they can get that.

There's still a big role for brow lifts. Absolutely. I love doing brow lifts. But it's gotta be for the right patient. I don't want to create anything that's going to look funny and that they're going to look back at and say, oh gosh, you

know, five years down the road, maybe I should have done that.

And now it's really hard to fix. We're seeing that come and go with, with, for instance, Brazilian butlers. I don't do bubbles. I have my own reasons for that. But, if you see a big trend that we're going to have big, big bucks and a lot of that was pushed by the Kardashians or by by their fame.

And now now that they're starting to downsize, now you're seeing people also starting to downsize or, just request a little bit of a smaller augmentation.

They're same thing with breast implants. We're starting to see patients request a little bit of a smaller implant size. I think my office has always been a little bit more on the conservative side when it comes to breast implants.

I have more of that. Perhaps that conservative New Yorker mentality mentality to me, I guess. But, you know, Miami, we look around Miami, it's, you know, Beach Nation.

So there's nothing wrong with that. You can have, you know, very large breasts and it's great. And for some work some people it works awesome. But there are downsides to that.

They have long term, large, really, really large implants. It stretches out the skin a lot. It sends out the the breast tissue itself, and there are more problems associated with it.

So pros and cons are discussed. These new trends will come and go. I mean I think a lot of is just is pushed by it used to be by the magazines. Now it's a lot of it is social media and influencers.

I agree it is very interesting about the whole trends, Doctor White, because at the end you are we're talking about younger women, the ones who are holding the the fountain of youth, but obviously there is a discomfort within and that who is just firing up this is this social media.

Is this so unrealistic in some world we're living and it feels like like virtually feels like you said, real not and not real world. How do you how do you approach that, how a 20 year old will be approached and say, you might not going to like your eyebrows to be lived in ten years?

And, I'm not going to do these for you, or you will say, okay, this is what you want, and we're going to do it in a conservative way. Yeah. I think from my perspective, I, I'm thinking, you know, about the patient's long term goals and I do want to help them.

But on the other hand, I'm also thinking about what what do I want out there? What's going to represent me as a cosmetic specialist and as a static surgeon?

And, I just don't want people coming on my office looking funny and not being proud of what it is. So if I don't think that that's something that's really going to improve what they look like, then I'm just not going to do it as simple as that.

And, and I'll tell them it's there's nothing wrong with that. There's nothing wrong with what you're requesting. That's okay. It's it's a it's a chance of passing them.

I'm trying to educate them on trying to educate them about how I look at, for instance, an esthetic brow. Some people are really just focused and they're like, nope, just the procedure.

And actually, that's part of what one of the issues that we encounter because you're mentioning technology, how that has changed the focus about who has the who has knowledge in the situation a little bit.

Social media and the internet has played a big part in patients taking control of their health care, and even now, their beauty care. And part of the part of the issue is that looking something up online doesn't really give you the experience behind it.

And so they'll see trends and they'll say, oh, I read somewhere on Google that this procedure is going to be best for me or that that whatever it is and then they don't come to you with a question of, with with a problem and an open mind.

They come to you and say, I want this procedure. And and that makes the conversation sometimes a little bit more difficult to start because they've already made up their mind.

They want this procedure. I feel like it, truly. I see a lot of that with, procedures like my elevate, for instance. I like doing my elevate. I think it's great, my elevate, and I often combine it with radiofrequency energy.

And I'll see patients in their 60s coming to me and saying, no, no, no, I only want a minimally invasive procedure to tighten my neck, and I want my elevate because I read about it and I look at them and their neck is like this, and I say, I'm so sorry.

I don't think that this is the right procedure for you. You need a traditional face and neck lift, and I can make a beautiful, you know, face and neck lift for you.

That will make you look very natural. It will be very conservative. It will make you look much younger, much younger, youthful and rested. And sometimes that conversation goes right, and sometimes.

And it's okay. Sometimes you're like, nope, I want the my elevate. I will say, I'm so sorry. Then I can't offer you that because you're not going to be happy in the end, and I'm not gonna be happy.

And, and I want the best result for you. And that's part of the the challenge of being a plastic surgeon. Is that because I have all these other skills and I have all these other, options for patients, I really have to help guide them towards what the desktops will be for them.

And also they will hold me responsible for their results as well. Whereas a lot of times these days it's it blows my mind like I saw a patient. I saw a patient who had something like that really, really loose skin in the neck.

And she went to someone for laser, laser, laser or microneedling or whatever was minimally invasive things that they were doing. I'm like, I look, you know, I'm like, I'm so sorry.

I, I would I would never, ever offer that to you because that would not do much of anything and nothing against the person who was offering it. But the problem is, when you don't have all the skills and tools in your toolbox and you have 1 or 2 techniques, if all you have is fillers around because of Botox and filler, patient.

And so I think, I think we kind of lost it as a society because now everyone is doing Botox and fillers and you know who's the expert in this particular situation.

So they go and they'll go to their dentist, they'll go to their, you know, their local, primary care doctor or whatever. And it's cool. They they may be very, very good at that, but it takes more than just a technique to provide the appropriate esthetic service for patients.

Social Media Trends and Unrealistic Procedures

In my opinion. Yes. And it's something that it can be applied to many other specialties as well. But unfortunately something that became very profitable like it is esthetics in general, right for you.

Because if we go a little bit in the history of plastic surgery, really started as a reconstructive surgery and then obviously where it was amazing what we could be doing through reconstruction that we could start like targeting things that it was making us look younger and more youthful.

And now we're jumping in to make me look someone or something that I'm not. So that's the problem is the scalpel is there, the hands are there, the creativity is there.

But we need the ethics behind. Right. And this comes to my next big, conversation with you and is ethics and esthetics. And obviously outside there in social media, nobody is regulated in everybody can say do on or portrait whatever.

And we kind of start with how much, for example, plastic surgeons who being that, fully trained and been going through the whole process of being a physician, a surgeon, a plastic surgeon, and subspecialties on and on, all fellowships now, they could be, totally.

Criticize on social media for, and put put in a before or after picture that and women being shame and but someone else who it has no credentials and no experience, no background but it's able to go and have, a put a hand on even, fake cosmetics or cheaper esthetics procedures are not accountable.

Nobody nobody rules on these kind of of I don't know how to call them if it's a provider or is it's a person that is just like trying to be a plastic surgeon or anesthetist and all of their methodologies when is not.

And it's it is. Absolutely. We have a problem here. That is that's what it but that's what is like feeding into the social medium. That's what all of us is.

We are all getting that that truth, that fake truth through that social media. It's really wild because yeah, you'll see people talking on social media about their quick fixes and their, oh, you know, all I do every day is I use, you know, yogurt and I mix it with this and that and this is my routine.

And look at me so beautiful. Like, yeah, you're 18. Like you don't need to be doing anything special right now, but don't start thinking now as a 40 year old that.

Oh, well, I'm, I have to start doing this yogurt thing and this is what's going to change my life. And you know, you talk about, you know, where do you get the expertise or where do you get these experts and they're influencers.

Part of it is I'm starting to see little by little is is monetarily motivated. They're like, oh, well, go to my Shopify account and buy these products that I recommended here.

So that's that's one thing I have from the side. But yeah, a lot of things, a lot of these things that people describe on social media just don't work.

And they have no evidence behind it, no scientific evidence. I mean, you see these people talking about facial yoga and things like that. And, I even did I did a video about a review article that looked at patients who did that for yoga, and one it was very hard for them to, to keep up with the process and the procedure of keeping up with facial yoga, just to see any changes.

But but the results from the changes were so minimal to none. And how can these people keep coming up on social media saying, oh, this is what I do, and this is going to change your life?

Well, it may they may feel like it helps them and that's okay. And there's no downside to doing it. But don't go out there and saying this is better than a facelift, or you don't need a facelift or something like that, or there's no evidence to that.

So, so that's a big problem. And then the other part is, is the misrepresentation on social media. And that comes from, from two things. One, the esthetic injury industry is notoriously poor about real, real scientific results and also about standardization of, of the results and how we're evaluating that.

So I, I was looking up about exosomes, for instance. And exosomes has become, I'm sure, in your world, right. You're you're starting to hear a lot about it.

Have you started using it all or. No. No idea. I'm a traditional doctor. And the problem is that it's a it's an industry that is moving so much money, the whole biohackers and the supplements and and tapping into your telomeres.

Now you can tap into your telomeres and go figure. I don't I don't read those articles if they exist, but I don't think they exist yet. But the money it is, it is going everywhere with pennies there.

So, you know, there are two ways to approach. You can say like, well, they worked in rats and mice, gruesome hair for mice. So awesome. We should start trying to do this as long as it's safe.

And there's nothing wrong with that approach. But, you know, show me the photos because my patients, if I'm going to start really believing and exosomes, which again, they may do a lot and I haven't used them personally.

But if you were to talk to us about that exosomes and I don't, I don't know, I don't know, I because I don't read those things. What are they that they're little extracellular.

So cells talk to each other and they send signals to each other and especially young cells or what people are doing or what scientists are doing is they were taking young cells and they were they were harvesting these little packets of information that the cells send out with RNA or proteins. And, with the hopes that this is going to help, like you were saying, biohacking is helping to restore youth and so that those particles are then harvested and used in certain preparations.

So people are doing microneedling and then they're putting on the exosome on top, saying that it's going to change your skin or saying that it's going to grow your hair.

And that's great. I really hope it does. But I want to see the photos. I want you to see their produce. They are producing the lab. So it's like, let's say it's in a vial and, and it's a liquid that they just inject or put on their bodies.

Yeah. I think officially you're not allowed to inject them yet. But they can be placed on topically after you make little micro channels, little, little openings and so forth.

So, so a lot of people are really into it. That's cool. This may be the wave of the future, and I hope it is. I hope this is something that that solves a lot of problems for us.

But as of now, I am not yet convinced by any data. I want to see photos. And the other problem that we see comes back to the photos. When you see photos, you have all of the industry reps showing you photos.

And before and afters. And I've even seen this. It's horrible to say, but certain doctors there is a doctor, who? Gosh, I was looking at his after results.

I'm like, wow, it's really, really incredible. And I look at and you look at the before result and you're like, gosh, I mean, like, I could never produce that in a million years.

Looking at that before result to me after result that's truly just mind blowingly incredible. And and I had a little reading and I saw, that one of the staff members outed the doctor saying that he takes photos.

The pre-op photos are done with a fisheye lens. So all of the the central component of the nose is widened, the entire center face basically gets widened and post-op.

He takes a normal camera photo. I mean, it's ridiculous. What? It was a beautiful result afterwards. What? Why do you need to do that? Just don't do that.

You're creating unrealistic expectations for other patients out there. The other thing, same thing with like, some of these minimally invasive, neck tightening procedures or things like that, you will see, or fat melting procedures you will see, you go for pictures like this.

I mean, I like horrible I think after the after photos like this. And that is like great neck. Like if you don't pay attention to those things and you're the layman, you won't understand that all they're doing is they're changing neck position or they're changing the flaps that they the, the before photo is always like totally dark.

There's shadows all over the face, and then the after photo is and it's like some kind of skincare treatment. And the after photo is bright flash and wow, this is flawless.

Like, yeah, all I did was change the flash. That doesn't mean that it didn't work. It doesn't mean that it's a worthless technology. It can sometimes mean that the result is a lot more subtle than what you're showing.

So just be honest about it. Say, hey, this is a subtle result. It works. It helps build collagen. It's great. No problem with that. Just don't don't try to deceive people.

That really upsets me. Yeah. And it's a marketing. It's a marketing strategy. At the end. Right. So it's as much as much people that you can attract towards you.

Eventually you have to deliver. So it's going to be a moment that you won't deliver. As he's promising through those fake pictures and or is going to be worse.

So this is a matter of time. He just crumbles because, but what you, me, what amazed me is like, there is no one to rule those kind of that world. We as a physicians, what always rule our malpractice rule says the industry rules us the even the the pharmaceutical companies rule says.

And but we can. But a plastic surgeon can put a picture of before and after a picture that he hasn't been edited wrongly and because is going to be highly criticized because the whole shaming behind.

Right. So we are in this world with everything is so extreme. So now is it's about how we shame women because they are going after certain procedures.

When you explain to us very well that everybody has their own perception of their own beauty and, and as much as you can guide them, you are not the one who at the end makes the decisions, is called an informed decision.

And that's what we do with our patients. So it is a first. I feel that sometimes we get abandoned in this world. We were so regulated for so many decades that social media drives and we are they continue regulating us, but whoever has no credentials are not regulated.

And that brings me to The Dark Side, the horror movie of so many. Again, I don't know how to call them providers or experts that are doing procedures in a, in a non very septic antiseptic.

Environment. These horrible the stories about plastic surgeries in a hotel room that was a video going through Instagram of someone videotaping from another building, a full surgery from a window to a window into a residential building.

So it is this is something that is not a no no, but there is no policeman knocking on the door on that apartment.

Ethics, Credentials, and Unsafe Cosmetic Practices

There is no medical. There is unless something horrible happened is going to be the ambulance. But there is not medical, bodies going after. There is not the, the association, the medical associations putting a hand on it.

They only put a hand on us. We are the ones who are always keeping up with the procedures, the policies, the licenses, the whatever it requires. So I, I'm feeling that social media and, and not a lack of regulation, is opening the door for many of these procedures that used to belong to certain experts.

And today it has been it's been like a like the bulls in Pamplona. They just let go out out of the, of the biggest stadium. And everybody has to start running because you never know what is going to happen.

And I know that sounds like fun. You're going to go please vote no. Yes yes yes I did I did in the night is is I have yes yes that's cool. But there are the many things that are out there.

And I heard you about, microneedling and things that as long as there is not, if we keep it, do not harm. Right. We're physicians right from the beginning is do not harm.

There is no, Again, I don't know what kind of experts are those ones I don't want to say is that these is because many people is an institution that is very well trained.

I don't want to say, they are mid-level providers because many of them are very well trained. But there is people who decided that they know just because because they are good with their hands and are putting people at risk.

And who who is liable for these and and how we going to keep the, the public, educate it on how to take their own decisions. This is not an informed decision.

This is a, manipulated data marketing strategy for you to make a decision that is going to make me profitable. This is what how I'm seeing these. So regarding, like, nurses and police who I know a lot of injectors nurses are actually fantastic.

They do really beautiful work. And I, I have no issue with that. As far as holding people responsible, ultimately in those situations, I think they are still responsible for being supervised by a doctor.

So ultimately, the doctors responsible for anything that that ends up happening in those situation, which can be kind of tricky. You know, their regulating bodies like the FDA, American Board of Plastic Surgery and that's, say, plastic surgeons that look over the plastic surgeons and the way that they conduct themselves as well.

So there's that. But the people, the the totally unlicensed practitioners that you were mentioning, I mean, yeah, thank goodness they do get in trouble. But unfortunately, sometimes it's only after something happens, like you mentioned.

It's it's crazy when you hear like you mentioned that surgery was being done in some house somewhere. Was that a, was that a surgeon who was at a board surgeon in the US, or do you know what the story was, I forget?

Yeah, video was watched by 5 million people and you. And it was videotaped, like on a 23rd floor, face to face. And they were grounded, but it was in a residential apartment, not building a million things like that.

Things go wrong. It's a problem. Yeah. And most probably what I'm just assuming maybe they are surgeons. They just going to say normally your surgery is going to cause an X amount.

We're going to call it a half because we don't have to use the hospital I don't know have you're working but it's out of my mind. Well it's not a great deal.

And I actually I want to get into that because that gets into the whole, you know, the whole open world travel for cosmetics or everything. But the one more mentioned about the unlicensed practitioners and just a cautionary tale because I think is way too often you have the the people who are just kind of dabbling in, in the industry, figuring out on their own, or they went to a weekend course in liposuction, and now all of a sudden they want to bypass surgery on everyone and a perforated bowel because they don't understand, hey, this guy had a prior laparotomy and he's going to have a high risk of, of the problem.

And nor do they know how to take care of them. Gosh, there's so many, so many things that we can discuss from this, but, but about the non licensed practitioners because I can get back into that stuff.

I'll give you a cautionary tale because then there are so many people you mentioned money being a concern. And so they'll find a cheaper option if it's sugar, if it sounds too good to be true, it's probably too good to be true.

And I fear there's so many times where I see a a young, really beautiful woman and she actually goes to the hospital because she's got a, a draining read by the and she goes, she says, well, my two friends, yeah, they went to this doctor should be wearing a white coat and in a hotel room.

And we were getting injections. We didn't really know what it was and know everything was fine with them, so I figured it'd be okay with me. And ultimately it was some kind of a silicone or some kind of oil that was put in there.

And this is a permanent problem. That person is going to be scarred for life. Getting rid of that stuff is is nearly impossible because it's all over the place.

Without creating tremendous scars. And it's painful and it's a draining sinus tract, which basically like stuff starts coming out of there. Ultimately, sometimes they're fine for years, and all it takes is a little something to stir up trouble.

And now they know they have the problem. So yeah, if it sounds too good to be true, it's probably too good to be true. So definitely stick with your your board certified plastic surgeon, your board certified dermatologist, your board certified facial plastic surgeon for whatever it is that is esthetic.

Those are should be your go to people for everything esthetic. And again, nothing against going to a par for for Botox and fillers. Totally totally fine.

There are a lot of them who are really fantastic. We were going on a different tangent though before, and that was a little bit about how. Because of the expenses in the United States with regard to plastic surgery, a lot of people are going abroad now.

So for instance, that will go a big tourist destination is Turkey for, rhinoplasty and for hair transplants bought cheaper. Truthfully. I mean, they allow these guys do beautiful work.

I can't, you know, can't can't deny that. But what if something goes wrong? What if you're going to. We see all the time, truthfully, with with South America.

Nothing to do with nothing. Again. South America, a lot of great doctors there. But because we're in Florida, we see this, they go to Colombia and, they have their tummy tuck and lipo and double totally fine get discharge.

They leave, after a week or so, they come back to us, and now they got out there dropping infection, developing a problem. Now they get they open wound, they end up in the hospital.

People try and help them, but they don't really want to take over because it's a disaster. And, and it's a real issue because now you're really stuck, you know, where the patients really stuck, are they?

They go back to Colombia to get them to fix everything and somehow find someone in the United States to take over and end up paying double or triple what they would have paid initially, because now they have to fix up a really hard problem.

I'm a, you know, there are certain things that I think are easier to travel for, like a hair transplant. Not much more. Not not too much can go wrong with a hair transplant.

Finally, some hair follicles. Okay, no big deal. You're going to go in for, for a larger procedure. You're going for a tummy talker. From like that, you'll listen even to the best of hands.

Things can go wrong. And I really think that you're putting yourself in a bind to go abroad for these types of surgeries, to save some money, because you're putting your life in jeopardy, not only are the standards of care not the same in a lot of these places.

But again, things can happen even in the best of hands. Then you want to be able to communicate with your surgeon and the well taken care of. And the end of the day, you got your one body or one face, and you want to be able to trust that to the best can put yourself in the best situation for the best result.

And, well, I have to agree with you. I have to agree with you on being consequent. I mean, always a surgeon or

anybody in medical, in the medical field, whatever procedure we going to be doing, we already put, it's our responsibility to make sure that that patient starts on A and finishes through Z in a good condition.

We have to be responsible of any consequences of what we do. Absolutely. That that is just like I'm a little bit biased because I'm Colombian, and I have to tell you that I know all the plastic surgeons that I know they are all, that they call on the impossible as humans do.

And the but I can see how if something goes wrong down the road, what are you going to do? You want to just keep the patient for the next three months, you know, until until you close the wound or.

Absolutely. I agree with that. But you see, people is making those decisions out of money. So, maybe I don't want to have this conversation about how much the health system costs because my not going to apply to doctor Y, the plastic surgeon, which many people is already used to it.

I do life is telemedicine, I do weight management, I do hormonal treatment for menopause and all this and I don't I'm not in this. I'm not in the insurance world.

I am out out of the network. And and because I was with, with the, with the system for a long time and I, I got burned out might not be your your situation because people is used to it that never insurance covered any type of esthetics.

So when I want something I save the money to go and get my esthetics right. This is how people is making those decisions. If if they really want something and they, they really feel that that beautification, if it is that word, it will give them the self-esteem and they will being what might as well you save the money and you go for it.

Now, going back into the beginning of this podcast, which artist you want to commission your art to, that's what it is important. Right? So this is when Doctor White puts his signature in his canvas after he does something.

That is your responsibility not only is not yours because that person is going to be your free marketing, but on the other side is your responsibility.

Absolutely. Without doubt. And from that perspective, I'm told I totally agree with you. But this is how people is making decisions on money. And and as much as I'm, I'm working at the level of the clinical level, and I think that good health is the right of a human being, I think is that X should be a right for anybody.

Everybody should be able to afford them. It if if you are in that is state of mind. But just to start wrapping up a little bit on our episode here, I would love to hear from you.

Maybe some advice that you can give to our audience regarding of staying safe on out there, on when to make their decision, how they can avoid, not to fall into into this big trap on these snake oil, whatever they are selling or in procedures that do have some harm and made by people who are not licensed.

And, and how are they going to know when the marketing is in your face, when someone is taking pictures with the wrong lens to make you believe something?

Yeah, it's it's getting more and more difficult to for you to make those types of decisions. And it used to be that in plastic surgery, people would find out who to go to by asking their friend or asking their doctor or something like that.

And nowadays what do they do? They they basically they go to social media or they go to Google and they search up like that. And and that comes back to, well, marketing is taking over as opposed to, you know, the other ways, of just basically having a good reputation, being a good doctor in, in the community.

So, so that that's changed the game a little bit. But as far as making your decisions about who to go to, ultimately, I think especially if it's a, if it's a small thing, hey, you know, ask your friend.

That's a great way to start. Ask for recommendations from other people that, you know, have a procedure. And I think it's a really great way to start.

Google has a tremendous amount of knowledge out there, obviously, but but don't get caught up in the hype, and especially if it's a bigger decision like surgery.

You want to I want I would see, probably see a couple surgeons before you do any kind of surgery. Make sure you share the the same esthetic goals, the same mindset.

Make sure that the surgeon is board certified, at least if it's plastic surgery, board certified by the American Board of Plastic Surgery or facial plastic surgery.

In terms of face as well. You know, or, if it's a dermatologic procedure, obviously it can be any of those things. So those are important obviously looking at before and afters again, confirming whether or not you guys share the same esthetic goals, but go to someone who you think is honest, who's going to have that conversation with you and spend the time.

Because a lot of a lot of times when people go to their clinics and they have a have a consultation, it's really like, oh, okay, you need a facelift next, that kind of thing.

And we spent 45 minutes to an hour talking to our patients about their health issues, if they have any. What are their goals? What are the different types of options?

What what is it that you we may look at our current photos and say, okay, which what do you like? What what excited you about this? What did you not like about us?

What what was your concern about this? And then by that, you can kind of tweak or understand better what is a priority for them. And then also someone who's can be realistic, the surgeon being realistic as well, letting them know, hey, this is something achievable.

And perhaps this is really not something that I can get, at least I personally can do for you. But maybe no one can really do for you because there are limitations.

We're not just taking a face to. And sometimes people will come in and they'll say, oh, can you do more often? Then truthfully, I prefer not to do more thing because with morphing or with, any other kind of software, I can do whatever I want.

I can put your cheekbone up here like this, and that's fine if you think that looks beautiful. But it's not something that I can really achieve. So I'd rather.

Look, I'd really rather give you my knowledge, show you real photos, try and educate the patient, and then come up with a game plan together that works with their lifestyle and works with their goals.

Choosing the Right Surgeon and Avoiding Bad Outcomes

They may not decide to do surgery right off the bat, and that's okay. We have other options, whether it's to just wait it out or just or to maybe do something more minimally invasive.

Sometimes I'll see a patient is kind of on the earlier like I I'm seeing patients in their 40s these days. I never would have thought I'm in my 40s, okay.

I never would have thought that I would be seeing patients in their 40s come in for face and neck lifts. But truth is, especially with the weight loss revolution, which you're seeing a lot, right?

And yes, patients are losing weight and they're losing weight in their face and everything's coming down. But so

these patients would benefit from surgery.

And not only that, why should they wait ten more years before getting it for them to enjoy their life and enjoy the way that they look and and feel young?

I mean, when not when that face, when the mirror does not match your internal strength and and and and, energy. There's nothing you can do about that and there's nothing wrong with that.

And so sort of like something switched in my mind. This person was, gosh, you know, it was it was sort of a scary thought at first because, again, I'm in my 40s.

But there's nothing wrong with it. And those patients actually can get much better results doing these procedures earlier because their tissues are better.

It's thicker tissues. You know, it's not a, you know, first time facelift on an 80 year old woman who has paper thin skin and nothing holding up anything.

I know no fat content. I don't see a reason anymore for them to wait because one, they can appreciate the result for a longer period of time. The tissues are better in their 40s, so it's not this 90 year old paper thin skin with no fat content underneath that, where you have to really try and rebuild everything and sometimes it's really impossible at that point, really 90. But you get the point.

When you're 40, you can get a really beautiful natural result. And why should they wait? Why should they wait any longer? They want to look gorgeous. They want to feel that same energy that they have inside and have a reflect on the outside.

And that's awesome. Go for it. So so my mindset has sort of changed as, as as I've gone on with that. Is it? We didn't talk about patients like that during residency, you know, or people facelift.

You thought they said, oh well that's for older people. Gosh. Now I guess now I'm one of those older people. We're really fun. We're redefining beauty.

We redefining aging as well. And that but just to summarize the way how you can guide someone that was, say, one just a little off investigation is very easy with the internet now knowing who your doctor is, the more certification I think it is important and it's so it's easy is free.

They can perfectly go to the Association of Plastic Surgeon. We're certified uncertified by the American Board of Plastic Surgery. The American Board of Plastic Surgery for sure was going to have a directory.

Second, I agree with you. Shopping around for your doctor is going to be your savings going for him? Yeah, it is a good idea. And most of the plastic surgeons and other providers and esthetics are happy to meet and greet.

To see was there was this dictations and three we all humans. We know when the other person is listening and to guiding us. Right. It's obvious. I had a friend of mine who actually met with ten different plastic surgeons before she was doing her augmentation.

That's what am I what am I going to have time, you know, time for that? Oh my goodness. And she's like, I was so important for me to know their their personalities.

Even if I want to be asleep, I want to know exactly who was taking care of my body. What I wasn't there, and second, their opinion on how they manage things.

They can. They'll be thinking that we're cuddle passing by and they're just putting silicone on and on. So and I'm like, I agree with that. And that's actually a big problem in Miami.

And it's becoming a problem throughout the country where we have private equity and just large corporations, creating these centers, these esthetic centers, she so money, so, so, so many of these in South Florida.

And like you said, they're herding cattle and they they know it. They just know it because the surgeons there from 6 a.m. till 10:00 at night putting in breast implants, gosh, that's gotta be exhausting. But, not only forgetting about the fatigue factors in that situation, but is that the way you want to be treated as a patient?

Number one and number two, when things go wrong? Because inevitably someone will have a problem. Like I said, no matter how good you are, you operate enough.

They're going to be problems, complications. How how are they going to that or are they going to match up? Because again, when I when I say call, I see these patients coming in from even possibly zero or post-op day one and they just go straight to the hospital.

I'm like, did you call your doctor? Did you speak to anyone? Do they don't pick up the phone? Did did they schedule a post up plan for you? The answer is typically no, no, no to everything.

There's there's no communication. There's no post-op care. They basically operate kick them out next year. And there's really maybe maybe they will see some other lower level provider for post-op down the road, potentially at some of these places.

But usually you ask them they have no post-op appointments with their with their doctor. Usually the answer that I get from these patients who've had problems with, with some of these centers is that they had really no post-op care with any of their doctors.

Maybe they saw some other lower level provider within their or. I don't even know if they were if they're even not a medical practitioner. But it blows my mind that someone can go into a situation like this, get real surgery, and then not have a post-op protocol process follow.

Have that follow up with the doctor because again, even little things, if you catch them early, you can address it. But but the issue is that there's they don't answer their phone.

They don't they don't schedule appointments. They don't. There's there's no semblance of post-op care. And that really that communication starts off from what what you mentioned before, like a lot of that loss in the communication between the doctor and the patient, perhaps it's almost become expected, like what you said.

And maybe you don't care about that anymore. But I think it's still so important because a big part of how your result is going to end up is going to be that communication and that post-op care process that you're going to, that you're going to need post-op.

So the those are the those are my, my sense of that is that you really need to have a good rapport with your doctor. Make sure that that board certified, make sure that they're going to be following you throughout that throughout your post-op care.

How do I get in touch with you? If there's a problem, you know, make sure that all that's in place, you know, I hate to think about other things like sanctions by the boards and things like that.

I'm sure that's few and far between, but usually I, I know it's I know it's a lot cheaper, but it's probably safer to stay away from a lot of those lot of those centers where you're getting kind of herded like cattle, like that, unfortunately.

Well, doctor y thank you. You really gave us a full tour of what is happening in plastic surgery right now, and maybe things that are going to come in the future.

How do you see the world of esthetics and plastic surgery in the future? I'd like to think that I'm not going to be replaced by I. So hopefully that doesn't happen in my lifetime.

But I do think that we're going to be incorporating more of that in some way, shape or form in at least in the medical industry as a whole. The question is, how will that fit into esthetics, you know?

Well, what about the well, I have ultimately a computer where I can put someone's face in there and say, okay, well, she wants, or he wants a nose that's shaped like this and then put that into the computer, says email, put up a picture and print something out for me, like, okay, that looks great print.

And then all of a sudden have this robot come over like, hey, that would be super cool. Will I have in my life? I'm probably not. I think in the next, couple of years, we're probably going to see a lot of the stuff that they, you're doing get integrated more as we begin to learn more about these growth factors and how to integrate them into esthetics and how to really, slow down the aging process rather than just reverse the aging process.

And that's going to be a big part of it. Probably one of the easiest things that we can do that's low tech right now. Usually sunscreen, eat right, exercise.

Probably, you know, decrease the sun exposure. Don't smoke. Those are those are simple things. And, you know, to, to slow down your aging process. But, you know, this is not reinventing the wheel in there.

I that's you're right on. I think the future is you do a slowing money, which is almost going back into the past. This is what grandma used to say. Put your sunscreen, don't smoke and brush your teeth.

And, I truly believe in the in the artistic side behind esthetics and plastics. And who is touching you in the hands of the artist? Is the Picasso. Where?

That's why I don't think it looks like a bad skate. Let's say that again. Hopefully they don't end up looking like a Picasso. No no no no, neither. Neither Picasso.

He's the last of these pictures. But it's it is so unique, so artistic that that's why. Me too. I will question the eye there. It's not like a neurosurgeon, I would say, with all due respect to the neurosurgeons, it will be easier.

A very specific removal of, mice in in in the in the brain. It will be easier than finalizing something that is so unique to, the esthetics of someone.

Especially when that someone has their own perspective of beauty. That's where flaws don't forget. The most important ingredient in here and is the psychological part, which is how you are almost reading the person that you they you have in front of you that understands that those esthetic changes are maybe not coming from his psychiatric part and is more coming from, no, this is me.

This is my well-being. I'm sure, I am doing the right thing. Some things are obvious, right? Some things is like, look, I'm like, I. You spoke to you before. I might with age.

My eyelids are falling eventually, I don't I want to wake up in the morning and open my eyes. So it is plastic surgery, so. Oh, yeah. That construct and, you know, looking at but you even mentioned you mentioned the psychiatric part is yet part of what we do, or at least what I feel like I do is sort of psychology in the sense that I have to understand how they feel, trying to understand how they want to look, but also make sure they have realistic expectations because some people do not.

There is a certain incidence in the general population, I think somewhere around 2%. That sounds incredibly high. But, of body dysmorphic disorder, where people have this altered sense of.

The way that they look to the outside world and people who seek plastic surgery have a higher percentage of that. And especially patients who seek rhinoplasty have an even higher percentage of that.

So sometimes that makes my job a little more difficult, too, because you're interviewing me as a plastic surgeon, but I'm interviewing you too.

The Future of Aesthetics and Final Advice

And I want to understand, is this something that I can accomplish? Are this are these patients expectations reasonable and not only from an outcomes perspective, but also from a life changing perspective?

Is this person chronically depressed and hoping or thinking that getting plastic surgery is going to change his or her life, get him a better job and girlfriend?

It might, but I don't ever want promise that that's you know what? If it doesn't happen, that's not something that I can I can deliver on. So, or even someone who focuses on, you know, a millimeter imperfection that they have.

And I look at that and I say, well, yeah, I see it, but that's bothering you? I'm thinking it's bothering you a lot more than what I would expect. It's to bother you and this otherwise beautiful face.

And sometimes that means I have to say I might not be the right doctor for you in those situations. Both. For both for really for their protection and for mine.

I used to discuss this more with patients. I only had one patient ever in my career to call my office afterwards and say thank you for having a discussion, because it kind of opened up their eyes.

Like, oh, gosh, you know, maybe I am, unrealistic. Thank you for giving me a psychologist, number to discuss this, because there were a lot more emotional overtones.

And truthfully, going through a post-op recovery process is an emotional roller coaster process. So, I typically don't go over the subject too much anymore.

Having having been through that, most people are not so happy to to hear about those types of thoughts. But, you know, like I said, it's just the reality of things that perhaps I.

Okay, I don't think I can achieve your expectations. That's it. You know, it's like, you know, maybe someone else can. And maybe that's just me being humble, you know?

And I think that's also important too, is being truthful, is being truthful, is being ethically appropriate. And that's what it is. Because unfortunately, I would say one of the specialties that is always, even within the medical field, within all of us, that we are always discussing about ethics, it is the plastic surgeons, because until we, we start seeing like plastic surgery is fixing something that for us, we don't see as a disease.

Regardless, that can be a totally all new podcast about it. I do believe that it is important because it's part of your wellbeing. I'm a holistic doctor.

I see that as long as you are comfortable with yourself and you were explaining before, you are doing good for your health mentally and physically. So yes, plastic surgeons are important and I love plastic.

Surgery is an art again. But you have to be ethically, appropriate. You cannot believe that this is just the business and period. This has to be something that I, I am taking responsibility and I'm looking at you.

And regardless, I want you as a patient. I know that you have to go through another specialist before the psychiatrist, the psychologist, or even just the family coach, whatever.

I mean, I don't, I don't have like a routine, like psych evaluation on anything. I never require that. But but you can get the sense sometimes just just from the conversation that perhaps they're they're just looking for something.

They're they're condo, they're depressed. And they're really hoping that surgery is going to make them happy. And unfortunately, that happiness, it comes from within.

That's not something they can change on the outside. And that that's a lot of people's personal struggle and that's okay. I mean, depression is a really it's a it's a mental illness.

And there are people who can help these patients, but it's not it can't be me. You know, I'm not going to be able to fix that. So you know, same it's comes from within that.

But if we're making tweaks and I can help, help rejuvenate your face and make your nose look better or, or fix your, you know, give you a mommy makeover and fix up that tummy and make you feel awesome and you're being so again, fantastic, you know, make me super happy and makes you super happy.

Hey, everyone's a winner. But, you know, there's some some patients, unfortunately, who who need extra help and are perhaps need to be in a better place before they can get surgery.

Thank you for this long conversation. It has been very enlightening, and I'm sure we're going to have a lot of listeners being so happy and grateful that they could listen to you, and it's a treat.

I say with the food, cheesecake and doctor, why, please let us know how, what audience can find you. Yeah. So, you can look us up on our, on our website.

It's, RC plastic surgeons with an a.com at our website. My Instagram is, at Doctor Jeremy White, MD. Like medical doctor. We're also on TikTok. Yes. Somehow I got on that make all all together.

And, where else? Yeah, pretty much just just give us a call. We do virtual consultations if you're from out of town, you and, obviously, I always prefer to put my hands on the patient myself.

So even if you're from out of town, I don't want to meet you the day of surgery. I meet you beforehand, and. And we'll be able to do a full exam and everything like that.

So, really important. But in any case, that's how you find me. We're. We're in South Florida. My office is in Aventura primarily, and also second, our office in Fort Lauderdale.

So come visit anytime. Thank you so much. And am I going to invite you in the future? Because we have a lot to talk. Awesome. Sounds like fun. See you guys soon.

Thank you I feel like thank you for tuning in to Doctor Talks. We hope today's episode has enlightened and inspired you on your path to optimal health.

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