Cosmetic surgeons can be very skilled in their trade and achieve excellent aesthetic outcomes, but those who can minimize the discomfort and pain that a patient perceives during and after a cosmetic procedure are likely to be the most professionally — and financially — successful.

There are many variables that influence a patient’s decision to have cosmetic surgery, and arguably the most important factor in the decision process is potential peri- and postoperative discomfort. According to one expert, there is a direct relationship to the business of a surgeon and his or her ability to make and keep patients comfortable, and this can be best witnessed in dentistry.

“Most of us who consider our dentist to be ‘good’ really don’t know their rank in their graduating class or have a clue about their procedural technical expertise. We consider them ‘good’ if the experience is painless and ‘bad’ if it is not,” says Joe Niamtu III, D.M.D., a board-certified maxillofacial surgeon in Richmond, Va., with a practice limited to cosmetic facial surgery and fellow of the American Academy of Cosmetic Surgery. “From a marketing standpoint, the technically better dentist may be much less successful than one of lesser ability, but who practices great pain control. The same parallel can be drawn in cosmetic surgery.”

Tell Them What to Expect

It’s critical that a patient knows what to expect before each step of the cosmetic procedure. A “little sting” should be just that but not more, otherwise the patient will lose faith in what the practitioner says. According to Dr. Niamtu, having patients know what to expect is a big part of how they may react.

“A prospective facelift or laser patient can gain a lot of insight and confidence and be more relaxed after speaking with a patient who has already had the procedure,” Dr. Niamtu says. “The continued reassurance from physicians that they and their staff will individually and specifically cater to the patient’s post-operative discomfort will also put the patient at ease and diffuse periprocedural fear and apprehensions. In our office, we refrain from using the ‘P’ word when discussing post-operative pain and speak of discomfort instead.”

Each patient should be approached individually in terms of apprehensiveness to pain and the subsequent control of it. Postoperative pain can be managed well with powerful analgesics, which can be used for several days where necessary and deemed appropriate. Significant advancements in postsurgical pain control with tumescent anesthesia can also be very effective; in some cases it can keep patients comfortable for 24 hours postoperatively.

“It is important to remember that different patients have different pain thresholds. Some cosmetic surgery patients do well with Tylenol (acetaminophen, McNeil), while others may require several narcotic prescriptions. Extended or unusual pain may also be indicative of complications, delayed healing, infection, hematoma or drug-seeking behavior,” Dr. Niamtu says.

Pain management is not only an issue in more invasive surgical procedures; it’s an issue in simple aesthetic injectable procedures, as well. Those physicians who can administer pain-free Botox (onabotulinumtoxinA, Allergan) and filler treatments will surely gain popularity among their aesthetic clientele. This is crucial to a physician’s business, as word-of-mouth can be a powerful tool.
marketing tool as patients communicate freely about “who hurts” and “who does not.” However, positive feedback is not free, and it requires a heightened commitment and dedication to patients and practice.

“Adequate pain control requires more time, and some doctors are too busy to take this time. If a practitioner is truly concerned about a painless procedure, it simply takes more time, but pays off dividends in increased business,” Dr. Niamtu says.

**DEGREES OF PAIN**

More invasive cosmetic surgery procedures such as abdominoplasties also involve pain and the control of it. However, they are often erroneously associated with more intense pain compared to less-invasive aesthetic procedures. This false association can veer a prospective patient away from surgery.

“The thought of horrendous pain following an abdominoplasty prevents some patients from ever seeking consultation for this procedure,” says Angelo Cuzalina, M.D., D.D.S., a board-certified cosmetic surgeon at Oklahoma Cosmetic Surgery Center, Tulsa, Okla., and president-elect of the American Academy of Cosmetic Surgery. “The truth is that a tummy tuck may be less painful than a facelift for many patients.”

The pain following an abdominoplasty can be variable, depending on the type of procedure performed and the pain tolerance/threshold of the patient. According to Dr. Cuzalina, heavier patients who may require a larger volume of skin and fat excised often experience more pain than thinner patients who require loose skin excision, but have minimal excess fat. On the other hand, patients with severe rectus diastasis and muscle laxity requiring major rectus plication will have more postoperative soreness than those with good muscle tone.

Tumescent anesthesia can help limit pain for the first 12 to 24 hours postoperatively, because peak lidocaine levels will be highest during this time. This allows patients to slowly shift to oral pain medications before some of the numbness wears off. For abdominoplasty patients with a true fear of pain, Dr. Cuzalina says a pain pump delivers excellent results. A small catheter closely infuses long-acting anesthetic solution throughout the surgical area for the first few days, greatly reducing discomfort to the patient.

“Cosmetic surgery is 100 percent elective, and surgeons who are expert in perioperative pain control will be more popular than those who are not. Patients will go out of their way to seek out the ‘painless’ physician for a more pleasant experience. Sometimes, the daily grind of practice withdraws the surgeon and staff from the intricacies of patient comfort, and we all need to rethink our practices and practice the highest form of pain control for the benefit of our patients,” Dr. Niamtu says.

Local anesthesia is used for all filler injections. In folds or wrinkles, the 32-gauge needle is inserted deep into the fold, as not to distort the fold anatomy. Two injections of 0.2 mL to 0.3 mL of local anesthesia solution is threaded from the corner of the mouth to the nostril from two puncture sites. This will render the actual filler injection painless.

(Photos credit: Joseph Niamtu III, D.M.D.)