

# Facial Plastic TIMES

AMERICAN ACADEMY OF FACIAL PLASTIC AND RECONSTRUCTIVE SURGERY, INC.

## THE US GRANT IN SAN DIEGO HOSTS *REJUVENATION OF THE AGING FACE*, THREE-DIMENSIONAL APPROACH

**S**tart the new year off right by attending *Rejuvenation of the Aging Face*, January 19-23, 2011, in sunny San Diego, Calif. Co-chairs Vito C. Quatela, MD; David W. Kim, MD; and Mary Lynn Moran, MD, have arranged a course that is unique, practical, and beneficial for all levels of surgeons. Over 50 multi-disciplinary faculty from across the globe will come together to teach both basic and advanced concepts of the modern approach to the aging face—three-dimensional rejuvenation.

“The main focus of this meeting is the dynamic volumetric nature of the aging face,” says Dr. Quatela. “Our goal is to enhance and deepen attendees’ understanding of the three-dimensional approach to facial rejuvenation.”

Days one and two offer two tracks for attendees to choose from. On day one, hear from master surgeons with at least two decades of experience on the fundamentals of analysis and treatment in *Basic Principles of Aging Face*; or check out an in-depth review of the most effective and novel technologies at the *Laser, Light Therapy and Resurfacing* workshop. Day two of fundamental learning continues in a hands-on cadaver dissection lab covering the range of facial rejuvenation techniques, highlighted by prosecutions from expert faculty. For those not participating in the lab, the *Facial Volumization* workshop will cover



cutting-edge, educational experience, while enjoying the beautiful city of San Diego.

The US GRANT hotel will be hosting our meeting. It is located right in the heart of the historic, vivacious Gaslamp Quarter, where there is plenty of shopping, dining, and more. See the enclosed brochure for meeting and hotel details, visit [www.aafprs.org](http://www.aafprs.org), or call the Academy at (703) 299-9291. ■

the why's, what's, how's, and future of volume replacement and enhancement with filler, implants, and fat, including live demonstrations of advanced techniques.

On days three through five, expand your knowledge of advanced concepts through intense didactic sessions. Lectures, panels, and video presentations will address all areas of surgical rejuvenation, focusing on a three-dimensional approach to the aging face. Friday and Saturday evenings also offer sessions on practice management to help take your practice to the next level with such topics as marketing, staffing, operations, and the Internet.

New videos will be featured at this meeting, specifically the *MACS Lift and Facial Fat Grafting*, by Patrick Tonnard, MD. The Academy's Video Learning Center will be in the exhibit hall allowing attendees to view over 275 videos prior to their purchase.

If you haven't registered yet, it's not too late. Plan to attend this

### Election Results

**President-elect**  
Tom D. Wang, MD

**GVP for Public Information and Regulatory Affairs-elect**  
Edwin F. Williams, III, MD

**Canadian Region Director-elect**  
Harvey D. Strecker, MD

**Southern Region Director-elect**  
Richard E. Davis, MD

**Midwestern Region Director-elect**  
J. David Kriet, MD

**Director-at-Large**  
Scott A. Tatum, MD

**Nominating Committee**  
Shan R. Baker, MD  
Russell W.H. Kridel, MD  
Stephen S. Park, MD

**Audit Committee**  
Wm. Russell Ries, MD

**Southern Region Credentials Representative**  
Mark M. Beaty, MD

**NOVEMBER/DECEMBER 2010**  
**Vol. 31, No. 8**

**BOARD OF DIRECTORS**

Jonathan M. Sykes, MD\*  
*President*

Daniel E. Rouso, MD\*  
*Immediate Past President*

Tom D. Wang, MD+  
*President-elect*

Stephen S. Park, MD\*  
*Secretary*

Paul J. Carniol, MD\*  
*Treasurer*

John L. Frodel, Jr., MD+  
*Group VP for Education*

Mary Lynn Moran, MD\*  
*Group VP for Membership & Society Relations*

Corey S. Maas, MD\*  
*Group VP for Public & Regulatory Affairs*

Minas Constantinides, MD+  
*Group VP for Research, Development, and Humanitarian Programs*

Scott A. Tatum, MD  
*Director-at-Large*

Corey C. Moore, MD  
*Canadian Regional Director*

David A. Sherris, MD  
*Eastern Regional Director*

Harrison C. Putman, III, MD  
*Midwestern Regional Director*

Eugene L. Alford, MD  
*Southern Regional Director*

Sam P. Most, MD  
*Western Regional Director*

David W. Kim, MD  
*Young Physician Representative*

Edwin F. Williams, III, MD+  
*Group VP for Public & Regulatory Affairs*

Harvey D. Strecker, MD  
*Canadian Regional Director-elect*

J. David Kriet, MD  
*Midwestern Regional Director-elect*

Richard E. Davis, MD  
*Southern Regional Director-elect*

Stephen C. Duffy+  
*Executive Vice President*

\* Member of the Executive Committee  
+ Ex-officio member of the Executive Committee

*Executive Editor:* Stephen C. Duffy  
*Medical Editor:* David Reiter, MD, DMD  
*Managing Editor:* Rita Chua Magness  
*Freelance Writer:* Lynnette Simpson  
*Contributor:* Ann Holton Jenne  
Facial Plastic Times is published by the American Academy of Facial Plastic and Reconstructive Surgery (AAFPRS)  
310 S. Henry St., Alexandria, VA 22314;  
Phone: (703) 299-9291; Fax: (703) 299-8898;  
E-mail: info@aafprs.org; www.aafprs.org.

Articles signed by their authors express the views of those authors only and do not necessarily express official policy of the Academy. The Academy does not necessarily endorse the products, programs, and services that appear in paid, non-AAFPRS advertisements.



## PRESIDENT'S MESSAGE:

It is with great pride, privilege, humility, and responsibility that I accept this gavel as a symbol of the presidency of the American Academy of Facial Plastic and Reconstructive Surgery. I stand in front of my close friends and colleagues with the purpose of guiding our organization to what I am sure will be a productive year. As I look forward to this year and identify my goals for improving our Academy, I naturally think about our past leaders who have shaped my thinking and helped create our

Academy's position of global excellence. I am indebted to these leaders. They include M. Eugene Tardy, Jr., MD and Jack Kerth, MD, who were among my early teachers. They include past presidents such as Ted A. Cook, MD; Wayne F. Larrabee, Jr., MD; Peter A. Hilger, MD; and Robert L. Simons, MD, who have guided our Academy and given me personal mentorship. They include my resident mates at Northwestern Wm. Russell Ries, MD; Tom D. Wang, MD; Vito C. Quatela, MD; and Dean M. Toriumi, MD, who have learned with me and taught me through their actions to strive for excellence in fulfilling my daily work. More recently, Academy presidents Daniel E. Rouso, MD, and Donn R. Chatham, MD, have shown me how to be a quiet, but strong leader and to be calm and thoughtful during difficult times. Most of you who know me well realize how difficult being quiet and calm is. I have witnessed Donn's creative thinking and incisive wit, and Danny's hard work and calmness under fire. I feel fortunate to be able to work with them and follow them as leaders.

As we look forward to the end of 2010 and the beginning of 2011, it is important to be aware of our past and of our roots, in order to confront our future challenges. George Santayana said in 1905, "Those who cannot remember the past are condemned to repeat it." The educational, socioeconomic, and advocacy goals that I set forth here look hopefully toward our future, while acknowledging our past. I feel very fortunate to be able to work with our executive vice president, Steve Duffy and his excellent and loyal staff to implement these goals.

Who are we, and where have we been? The AAFPRS was founded 46 years ago in 1964. In our mission statement, we are committed to: 1) promoting the highest quality facial plastic surgery through education, 2) defining facial plastic surgery as a specialty that requires intensive training and competence, and 3) assisting members in the practice of facial plastic surgery. During the past 46 years, the AAFPRS has created the highest quality of educational programs designed to teach excellence to our members.

As examples of our educational excellence during this past year, we had a highly successful 10th International Symposium in Hollywood, Fla., April 28-May 2, at the Westin Resort and Spa chaired by Shan R. Baker, MD, and Philip J. Miller, MD. The symposium was excellent, and the diverse faculty illustrated how far our organization has come in attracting national and international leaders in facial plastic surgery education.

The recent Fall Meeting in Boston, chaired by Edwin F. Williams, III, MD, and Theda C. Kontis, MD, had an outstanding program with six panels, 49 free papers, eight breakfast sessions, 81 instructional courses, and two hot-topic debates. In the next year, our biannual *Rejuvenation of the Aging Face* meeting will be held at the US GRANT hotel in San Diego, January 19-23, 2011. Dr. Quatela; Mary Lynn Moran, MD; and David W. Kim, MD, are the chairs of this course, which

# NEW PRESIDENT'S INAUGURAL SPEECH, FALL MEETING 2010

will offer a cadaver workshop and promise to include the latest in both surgical and non-invasive facial rejuvenation.

The *Advances in Rhinoplasty* course, under the direction of Stephen W. Perkins, MD; Stephen S. Park, MD; and Minas Constantinides, MD, will take place at the Sheraton on Lake Michigan in Chicago, May 4-7, 2011. This flagship course of the AAFPRS will feature some of the world's best lecturers on rhinoplasty and a separate cadaver workshop. It will surely be outstanding.

Education is the keystone of our Academy. I am sure that the traditional courses that I have just outlined—under the direction of education vice president John L. Frodel, MD—will be world class. Our challenge moving forward is to create new educational opportunities for our members, including the addition of on-line instructional videos and the expansion of Web-based learning. A goal of my presidency is to increase the number and breadth of streaming videos available to members on our Web site.

Additionally, I see value in partnering with other specialties in creating multispecialty educational venues. This allows our Academy to increase educational opportunities and to forge personal and professional relationships that have positive effects far beyond the course itself. Involvement with other specialties broadens the horizons of our members, while allowing our surgeons to be recognized and heard by other practitioners and specialty societies. This undoubtedly gives recognition to our members and to our Academy. In the macroscopic view, education and collegiality always triumph.

Our fellowship program is the best organized postgraduate plastic surgery educational program in the world. We should all be proud of our fellowships, which number 43, and typically have 50 to 60 extremely well qualified applicants. The continued interest in this program by residents is a tribute to the high quality of our fellowships. In the past 12 months, we have introduced international and domestic observerships with many participating senior AAFPRS members and fellowship directors. These observerships serve to broaden the education of surgeons in the United States and abroad while improving the quality and status of facial plastic surgery internationally. A goal of my presidency is to expand these programs to further establish our role as the world's premier educators of facial plastic surgery.

The interaction between our Academy and our international colleagues is vital. We should encourage their participation and attendance at our meetings, and continue our close coordination with the International Federation of Facial Plastic Surgery Societies (IFFPSS), under the excellent guidance of Roxana Cobo, MD. Expansion of the international

observership program and joint collaboration in IFFPSS meetings (occurring in Rome in 2012 and Rio de Janeiro in 2016) will help strengthen the close bonds between our two organizations.

We should be proud of our FACE TO FACE program, which was born in 1992. The first formal FACE TO FACE mission was in Yekaterinberg, Russia, September 26-October 10, 1992. We presently have three arms of this program: domestic violence, international cleft and craniofacial mission trips, and, most recently, Faces of Honor, started by Dr. Chatham. These programs help victims of domestic violence, less fortunate children abroad who otherwise might not get medical treatment, and our veterans who have suffered injury in the line of duty. FACE TO FACE allows our members to share their experience and skill with the world. As everyone who has participated in a pro bono surgery or mission trip realizes, these efforts strip away the negative aspects that often invade our daily practice of medicine and make us again keenly aware of why we chose medicine. As a person who has been involved in approximately 25 surgical mission trips, it is my goal as president to expand our humanitarian efforts and increase the size and endowment of FACE TO FACE.

Another significant goal of mine is to develop a thoughtful and concerted strategy to advance evidence-based medicine (EBM) within the AAFPRS. As practicing facial plastic surgeons, we typically have learned by careful observation and adopting the technique and traditions of our mentors. They have been our "experts." As Donald Gannon states, "Where facts are few, experts are many." Until recently, this practice model has been tacitly accepted.

However, there is a new order placed on how we practice medicine by health care payers and by our patients. Payers will demand that we conduct research and provide peer-reviewed literature demonstrating the efficacy of a given treatment or surgical

*See What We Do In the Present, page 8*



▼  
DR. ROUSSO (LEFT) HANDS OVER THE PRESIDENTIAL GAVEL TO DR. SYKES AT THE AAFPRS BUSINESS MEETING, SEPTEMBER 25, 2010 IN BOSTON.

# IFFPSS NEWS: THE INTERSPECIALTY CONFLICT IN MEXICO

By Jose Juan Montes-Bracchini, MD, Vice President, IFFPSS



Last May, during the 10th International Symposium of Facial Plastic Surgery held in Hollywood, Fla., we heard great news from Mexico. The Congress voted against a bill proposed by the main plastic surgery societies asking for regulation of cosmetic and plastic procedures to be done only by plastic surgeons all over the country.

How did we come to this? Well, like it has happened in other countries, the little problems like credentialing conflicts at regional hospitals and personal disputes among plastic, facial plastic, oculoplastics surgeons, and dermatologist became bigger.

In 2006, a congresswoman from the northern state of Nuevo Leon presented a bill on the terms previously described, funded by plastic surgeons who had a campaign originally targeted to those surgeons working out of their fields, i.e., otolaryngologists doing breast implants and general practitioners doing tummy tucks. At that time, the Executive Board of the Mexican Rhinology and Facial Surgery Society (MRFSS) studied the chances of this particular bill, asked for legal counsel, and determined that it was destined to die in the Senate—which happened a few months later.

But the same group of plastic surgeons waited for a change in the House of Representatives and the Senate and also became more greedy and wrote a new bill. This time it was more encompassing, claiming they were the only specialists trained and able to change the contour of the whole of the body, either by surgery or by medical treatments. This bill was supported by the majority and minority leaders at the

Senate and was submitted to the Health Commission last September.

This required legislative action. Once the Executive Board of the MRFSS learned about it, the national otolaryngology, dermatology, oculoplastics, maxillofacial and general surgery societies, and the Mexican Otolaryngology Board united, working on different fronts at the same time, such as responding to a media campaign well orchestrated by the plastic surgeons and lobbying the Congress, the Senate, and with leaders in the Health Commission and at the Health Ministry.

During this process, having known the history of the similar conflicts that happened in the United States over the past 40 years through the book, *Coming of Age*, by Robert L. Simons, MD, so kindly given to the MRFSS by Keith A. LaFerriere, MD, a comparable argument was presented at the Congress. Also, like Dr. LaFerriere, Ted A. Cook, MD; Tom D. Wang, MD; Paul Leong, MD; Jonathan M. Sykes, MD, and other American colleagues invited to speak at our meetings very enthusiastically joined our cause and offered to help.

Advertisements were posted in newspapers, several of our members were interviewed on radio and television shows, and several meetings with the Health Commission at the Senate and with different representatives of all the parties were held. After eight months of hard work, the result was a NO vote to this absurd bill. Even more important, it is being rewritten in a way that recognizes at the highest legal level the right of every well-trained, properly certified professional health provider to perform plastic and reconstructive surgery on specific regions of the body in accordance to their training, allowing the specialty boards (supervised by the Ministry of Health) to determine such capacities.

This is a huge win by the MRFSS and its sister societies who participated in this effort, although there is more work to be done. Meetings have been ongoing and now that a new legislative period has begun, care has to be taken to preserve this bill unmodified, and return it to the Senate, and be approved and signed by the President. We are on the right track and I am sure we will prevail.

Thank you to Ricardo Torres, MD; Fausto Lopez, MD; Frank Rosengaus, MD; Enrique Azuara, MD; Jaime Fandiño, MD; Samuel Rosete, MD; Jose Arrieta, MD; Francisco Perez, MD; Andrés Sánchez, MD; and Arturo Ramirez, MD, who helped make this happen. I am sure I have left out others, but every member of the MRFSS was present and supporting our leaders. ■

## ABFPRS CERTIFIES NINE SURGEONS

At its September 25, 2010, meeting, the Board of the American Board of Facial Plastic and Reconstructive Surgery (ABFPRS) determined that the following nine surgeons have met all of the requirements for ABFPRS certification. Their approval as diplomates brings the total number of surgeons certified by the ABFPRS to 999.

Houtan Chaboki, MD  
Kevin Howard Ende, MD  
Vu T. Ho, MD

Grigoriy Mashkevich, MD  
Jason D. Meier, MD

Vishad Nabili, MD  
Justin Howard Piasecki, MD  
Mark Samaha, MD

William Cooper Scurry, Jr., MD  
Applications for ABFPRS certification will be accepted through February 15, 2011, if accompanied by the late fee of \$300. Call the ABFPRS office for information at (703) 549-3223. ■

# ASSI® Perma Facial Implant™ Tunneler Passers and Forceps



The ASSI® Perma Implant Tunnelers and Perma Implant Forceps were specifically designed to be used with the Perma Facial Implants. The Large and Small ASSI Implant Tunner Passers are ideally suited for passage through the subcutaneous tissue or lip, and securely grasp the Perma Facial Implant. The Large ASSI Implant Tunner Passer is better for larger implants, and the smaller ASSI Implant Tunner Passer is better for the smaller Perma Facial Implant. The unique design of the jaws on both the ASSI Implant Tunner Passers and ASSI Perma Implant Forceps facilitates proper grasping of the Perma Facial Implant without causing trauma to the implant.



ASSI Perma Implant Tunner Passer Small with Perma Facial Implant



ASSI Perma Implant Tunner Passer Small, Perma Facial Implant and Perma Implant Forceps Straight

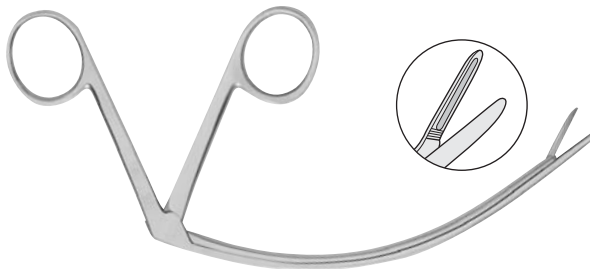


ASSI Perma Implant Tunner Passer Large with Perma Facial Implant

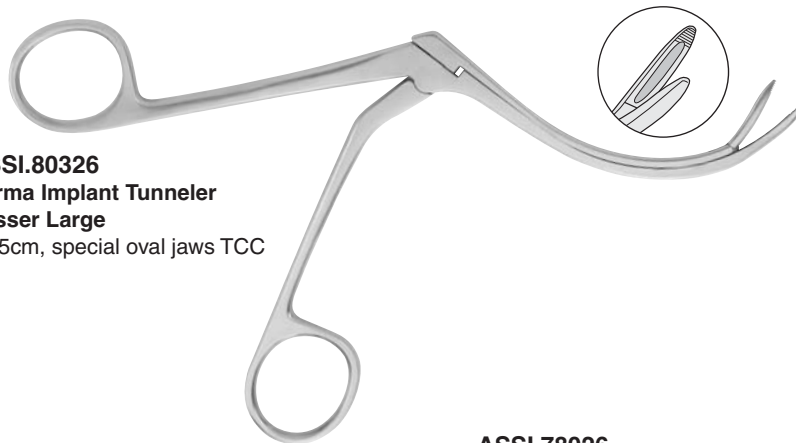


ASSI Perma Implant Tunner Passer Large, Perma Facial Implant and Perma Implant Forceps Angled

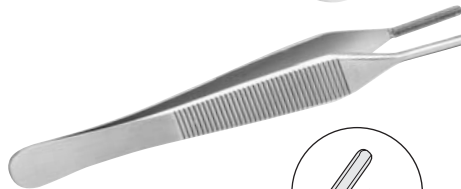
Perma Facial Implant is a trademark of SurgiSil L.L.P.



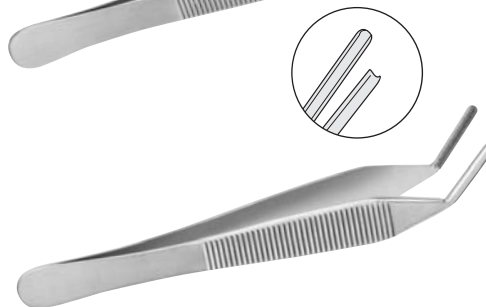
**ASSI.80320**  
**Perma Implant Tunner**  
**Passer Small**  
15cm, special oval jaws TCC



**ASSI.80326**  
**Perma Implant Tunner**  
**Passer Large**  
19.5cm, special oval jaws TCC



**ASSI.78026**  
**Perma Implant Forceps**  
**Straight**  
12cm, special oval jaws TCC



**ASSI.77926**  
**Perma Implant Forceps**  
**Angled**  
12cm, special oval jaws TCC

**assi**   
ACCURATE SURGICAL & SCIENTIFIC INSTRUMENTS®  
For diamond perfect performance™

**accurate surgical & scientific instruments corporation**  
300 Shames Drive, Westbury, NY 11590  
800.645.3569 516.333.2570 fax: 516.997.4948  
west coast: 800.255.9378 [www accuratesurgical.com](http://www accuratesurgical.com)

©2008 ASSI®

# ATTENTION ABFPRS DIPLOMATES! MOC REQUIREMENTS DUE JANUARY 15

**M**any questions have emerged regarding the Maintenance of Certification (MOC) in Facial Plastic and Reconstructive Surgery® process and John Rhee, MD, has the answers. Back in 2007, Dr. Rhee was the first ABFPRS diplomate from the class of 2001 to complete the MOC requirements. As a result, he has become something of an expert on MOC issues for facial plastic surgeons.

"I had to complete the MOC in FPRS® program early because it was a requirement for ABFPRS board members to walk the walk before we talked the talk regarding our recertification program," recalls Dr. Rhee. "But many ABFPRS diplomates who have time-limited certificates are coming up on a non-negotiable deadline to maintain their ABFPRS certification," he warns. "Our 2001 diplomate class has to register to participate and submit their applications for the MOC in FPRS® program by January 15, 2011, or their ABFPRS certification will expire by December 31, 2011," states Dr. Rhee, speaking on behalf of the rest of the ABFPRS Board of Directors.

Dr. Rhee, who is also chair of the ABFPRS Graduate Medical Education Committee, has worked with other organizations to develop MOC requirements for facial plastic surgeons who are double boarded. "ABFPRS MOC in FPRS® program requirements have been developed to represent sub-specialty recertification for facial plastic surgeons who have to maintain primary certification via the ABOto or the ABPS," Dr. Rhee explains.

"As such, the ABFPRS has tried to eliminate duplication of MOC requirements that are fulfilled via ABOto or ABPS pathways. With that in mind, maintaining subspecialty recertification requirements should be

on every 2001 and beyond certified ABFPRS diplomate's radar by now and if you haven't started the process to complete the MOC in FPRS® program," Dr. Rhee (pictured above) advises, "call or e-mail the ABFPRS as soon as possible. And if you need help, just ask any of the ABFPRS diplomates who have already completed the program," he adds. "We're all in this together." ■



ABFPRS diplomates who completed the MOC in FPRS® program:

Peter Jay Abramson, MD  
Peter Allan Adamson, MD  
Shan R. Baker, MD  
Stuart Howard Bentkover, MD  
William J. Binder, MD  
Gregory H. Branham, MD  
Donn R. Chatham, MD  
Mark V. Connelly, MD  
Minas S. Constantinides, MD  
Steven H. Dayan, MD  
Edward H. Farrior, MD  
Neal David Goldman, MD  
Michael S. Godin, MD  
Peter A. Hilger, MD  
Robert M. Kellman, MD  
Kriston J. Kent, MD  
Mimi S. Kokoska, MD  
Theda C. Kontis, MD  
Russell W. H. Kridel, MD  
Keith A. LaFerriere, MD  
Wayne F. Larrabee, Jr., MD  
Brian P. Maloney, MD F.A.C.S.  
Devinder S. Mangat, MD  
Craig S. Murakami, MD  
Ira D. Papel, MD  
Norman J. Pastorek, MD  
Stephen W. Perkins, MD  
Anna Evangelos Petropoulos, MD  
Harrison C. Putman, III, MD  
Vito C. Quatela, MD  
John S. Rhee, MD, MPH  
William E. Silver, MD  
Lee E. Smith, MD  
Jason Leonid Swerdloff, MD  
William H. Truswell, MD  
Tom D. Wang, MD  
Edwin F. Williams, III, MD

## ABFPRS MOC in FPRS® Program Requirements:

### PART I: PROFESSIONAL STANDING REQUIREMENTS:

- Prior, earned ABFPRS certificate
- Possession of current, earned certificate from ABOto or ABPS or RCPSC in otolaryngology/head-and-neck surgery or plastic surgery
- Possession of an unrestricted U.S. or Canadian medical license
- Acceptable responses to questionnaire regarding past or pending adverse action
- Satisfactory status with the FSMB and NPDB
- Documentation of privileges to practice facial plastic surgery in an accredited institution or facility
- Compliance with the ABFPRS Code of Ethics

### PART II: CONTINUING MEDICAL EDUCATION REQUIREMENTS:

- Documentation of 50 hours of CME credits every two years with 80 percent specific to the specialty (Completion of ABMS required self-assessment modules will be fulfilled via primary ABOto or ABPS MOC requirements.)

### PART III: COGNITIVE EXPERTISE REQUIREMENTS:

- Candidates must achieve a passing score on a three-hour psychometrically validated examination
- Candidates may choose from three exam modules:
  - 1) 100 percent cosmetic surgery
  - 2) 100 percent reconstructive surgery
  - 3) 50 percent cosmetic and 50 percent reconstructive

### PART IV: PRACTICE PERFOR- MANCE REQUIREMENTS:

- Submission of a 12-month sequential operative log of eligible procedures performed during the year preceding submission of the application; the sequential operative log must contain a minimum of 50 procedures
- Operative reports for the last 35 consecutive cases on the operative log

# MESSAGE FROM THE MEDICAL EDITOR: A MULTISPECIALTY PROGRAM FOR EVIDENCE-BASED PRACTICE

By David Reiter, MD,  
DMD, Medical Editor,  
*Facial Plastic Times*



**A**s described briefly by Daniel E. Rousso, MD, in the last issue of *Facial Plastic Times*, we have been working as partners for over a year on a common approach to teaching, practicing, and supporting evidence-based medicine across the full spectrum of plastic and reconstructive surgery with the American Society of Aesthetic Plastic Surgery (ASAPS); American Society of Dermatologic Surgery (ASDS); American Society of Ophthalmic Plastic and Reconstructive Surgery (ASOPRS); and the American Society of Plastic Surgeons (ASPS). The dialogue began when Monte Eaves, MD; Rod Rohrich, MD; Achilles Thoma; MD; and Foad Nahai, MD, asked us to work with them in developing and promoting a consistent, templated approach to evidence-based medicine that we could all use in our respective areas. From inception, the plan has been to include our colleagues in dermatologic surgery and ophthalmic plastic surgery and to promulgate a positive, supportive culture in which we all share what we know (and what we don't know), in order to advance the quality and safety of patient care.

We met in January for a facilitated two-day retreat; we drafted an agenda and planned the August kickoff meeting (Dr. Rousso alluded to this in his last editorial). The AAFPRS shared all aspects of the load with the ASAPS and the ASPS, and I'm more than pleased to be able to say that we achieved a level of cooperation and collegiality at this meeting well beyond that achieved by prior efforts. All of the above-mentioned groups sent leadership, and we shared re-

sponsibility for running breakout sessions that produced meaningful action plans with timelines and assigned responsibilities. We are very pleased to have the support and active participation of leading peer-reviewed journals in our fields, with Dr. Rohrich (*Plastic and Reconstructive Surgery*), Dr. Nahai (*Aesthetic Surgery Journal*), and Peter A. Hilger, MD (*Archives of Facial Plastic Surgery*) all taking very active roles and working together toward a common approach to reviewing and presenting evidence and outcomes. Unfortunately, Wayne F. Larrabee, Jr., MD, had a prior commitment preventing his attending the meeting, but he is an equal participant and was ably represented by Dr. Hilger. Of course, I represented *Facial Plastic Times* in this mix.

Issues addressed included the grading of all papers submitted to any of our journals for publication, with the goal of increasing the proportion of level one and two studies by a statistically significant amount over the next three years. We've discussed evidence-based medicine and the available evidence grading systems in multiple *FPT* editorials, so the concept should be familiar to you. Most of the participants seemed to feel that the GRADE system is an acceptable platform for all of us to use. We anticipate requiring self-assessment of the

quality of evidence supporting all submissions for presentation as well as for publication, and we urge everyone to do this voluntarily. I encourage you all to start doing this now.

Sensitivity was expressed toward the potential for sudden and dramatic demands on the quality of submissions to reduce the pool of available papers and presentations. Therefore, strong effort is being devoted to development of a coordinated program of education and support for researchers and authors, along with progressive increase in the required strength and quality of evidence that supports works accepted for publication and presentation. You can refresh your memories and orient yourselves toward grading what you read and what you write

See *Best Support*, page 20



Presented by the  
Department of Otolaryngology  
at the University of South Florida  
College of Medicine

**The 6<sup>th</sup> Annual  
Richard T. Farrow, MD  
Lecture Series in**

**Facial Plastic Surgery and Rhinology**

**February 19 & 20, 2011**

**South Tampa Center for Advanced Healthcare**

### **Guest Faculty**

Shan R. Baker, MD – University of Michigan

Edward H. Farrow, MD

Peter Hilger, MD – University of Minnesota

Stephen Park, MD – University of Virginia

### **Course Director**

Kathryn Hall, MD

For more information and registration please visit  
<http://www.cme.hsc.usf.edu>

# LIKE GANDHI SAID, *THE FUTURE DEPENDS ON WHAT WE DO*

From President's Message, page 3  
intervention. Patients will ask each of us how our personal results compare to published benchmarks.

Evidence-based medicine (EBM) is here to stay. The *British Medical Journal* honored EBM as one of the top 15 medical discoveries of the past 166 years. It is not a luxury, but an essential need for our Academy to accomplish what we want: 1) to pressure industry; 2) to educate the public; and 3) to empower our members. We must learn the language of EBM and develop a practical strategy to integrate EBM into all aspects of facial plastic surgery. If we do not do this for ourselves, someone will do it to us.

This plan will include instituting on-line EBM education and infusing EBM into our journals, fellowship programs, and board certification. We are fortunate to have Wayne Larrabee, Jr., MD, as editor of the *Archives of Facial Plastic Surgery*. Dr. Larrabee understands the need for quality research and will surely embrace the opportunity to have outcomes research become an integral part of the excellent journal that he has personally shaped and nurtured. If we don't do this for our members, someone will do it to our members.

An important ongoing role of the Academy is to continue to protect the rights of facial plastic surgeons to market our skills and practice our craft. During the past 24 months, the AAFPRS has waged battles in Oklahoma, Texas, and North Carolina, protecting and maintaining board certification status of our members. We will continue to respond to any legal challenges and appreciate the ongoing advice and advocacy of our legal counsel Tom Rhodes.

However, the political climate in plastic surgery has been changing. Our relationship with the American Society of Plastic

Surgery (ASPS) and the American Society of Aesthetic Plastic Surgeons (ASAPS) has never been better. Their respect for our skills and the road that our specialty has travelled seems genuine. This probably seems incredible to some of our senior members who remember public castigation, turf battles, and published statements referring to our members stating, "Things are never as they seem, skim milk masquerades as cream." This statement, published by plastic surgeons in 1981, referred to facial plastic surgeons as a "splinter group of the otolaryngology fraternity, blissfully devoid of any formal qualifications."

In the past few years, our interactions with the other core specialties, specifically plastic surgery, have improved and evolved into mutual collaboration designed to improve patient safety and to advance our respective specialties. The AAFPRS has had representation on the Physicians Coalition for Injectable Safety, first launched in New York City in April 2007 (Ira D. Papel, MD), at the *Facial Soft Tissue Fillers Conference: Assessing the State of the Science*, in Washington, D.C., December 6-7, 2009 (Anthony P. Sclafani, MD, Dr. Rouso, and myself), and at the recent *Evidence Based Plastic Surgery: Transforming the Specialty in Colorado Springs*, August 27-29, 2010 (Dr. Chatham; Dr. Rouso; Dr. Hilger; David Reiter, MD, DMD; and myself). In most instances, the AAFPRS was specifically invited to participate in these events by plastic surgeons.

Maybe the plastic surgery cold war is over. Certainly, for me, collaboration feels much better than jousting. I think that we are in a magical time when many members of our and other societies have finally realized that interspecialty fighting, often fueled by economic turf issues and petty jealousies, does not promote better patient care. I

want to thank many of our members, especially S. Randolph Waldman, MD, and Dr. Chatham, for helping us become an important component of PAC (Physicians Aesthetic Coalition) composed of leaders from the AAFPRS, ASDS, ASAPS, and ASOPRS. The mission of this group is to promote patient safety and physician education in the field of cosmetic medicine and aesthetic surgery through increased interspecialty cooperation and dialogue. An important goal of mine is to continue our positive interaction between the AAFPRS and other plastic surgery societies in order to promote increased cooperation.

A final goal is to improve our Academy's financial stability. Our overall mission is education and advocacy through public relations and legal protection. Accomplishing these tasks will allow us to continue attracting talented and creative young physicians to our specialty. Young, energetic members are the lifeblood of any organization. In order to put on educational programs and continue our humanitarian and advocacy roles, we must have adequate financial resources. I would like to see us become financially independent and to not have to worry about small changes in our economy or small dips in our membership. This will require increased giving from members and industry, while making sound financial investments and internal decisions.

Why should we be members of the AAFPRS? Is it for the courses, the legal and public relations services, and the educational programs? What is the value to us? Of course, each of us has to answer that question individually. For me, the AAFPRS is a diverse group of individuals—academicians and members in private practice, reconstructive surgeons and members who specialize in aesthetic surgery. We have a common calling; we

care about our work, our dedication to excellence, and about each other.

For me, the AAFPRS is a large extended family, composed of family members with whom I can share ideas and discuss problems. The concept of this organization being a family was clear to me when my younger sister passed away of a prolonged illness 18 months ago. I received e-mails and cards from approximately 200 AAFPRS and IFFPRS family members, many of whom had never met my sister Susan. An ancient proverb states, "A family is a place where minds come in contact with one another." For me, there is no better example of an extended family than the AAFPRS. For me, this is the value in my membership.

I would like to thank all of you—my family members—for trusting me and electing me to be president for one year. I pledge to you that I will serve you to the best of my abilities, and diligently try to fulfill the goals that I have outlined. Mahatma Gandhi said, "The future depends on what we do in the present." I hope that each of you can help me make a positive difference in order that our collective future is a good one.

Thank you very much.



Jonathan M. Sykes, MD

**Stock up for the holidays!**

The Products Catalog is enclosed in this issue of *Facial Plastic Times*. Order before December 15, 2010 and save 10% on your total order.

*The Face Book* is a great holiday give-away. Order five or more copies of the book and take an additional 5% off—a total of 15%.

**Edward D. Buckingham, MD**, of Austin, Texas, and **John L. Frodel, Jr., MD**, of Danville, Penn., were elected to six-year terms as directors of the American Board of Facial Plastic and Reconstructive Surgery at the recent meeting of the ABFPRS in Boston. **Vito C. Quatela, MD**, of Rochester, N.Y., and **Edward H. Farrior, MD**, of Tampa, Fla., were elected to the ABFPRS Senior Advisory Council. Re-elected to one-year terms as ABFPRS officers were: **Ira D. Papel, MD**, of Baltimore, as president; **Mark V. Connelly, MD**, of LaCrosse, Wis., as vice president; **Lee E. Smith, MD**, of Princeton, W.V., as secretary, and **Harrison C. Putman, MD**, of Peoria, Ill., as treasurer. **Shan R. Baker, MD**, of Livonia, Mich., continues as immediate past president.

**William E. Silver, MD**, of Atlanta, was elected second vice president of the Medical Association of Georgia. In addition, he received the Physician's Award for Community Service for 2010 at the Medical Association of Georgia's (MAG) 156th House of Delegate meeting held in Savannah in October. This award is given annually to a physician in Georgia who has extended outstanding service to their community and state through numerous works of volunteerism.



**Nabil E. Fanous, MD**, of Montreal, Canada, used a novel endoscopic approach for the first time in Canada, at McGill University, to remove a large dermoid cyst embedded in the upper face of Jayden Cambridge, an 18-month old child. Dr. Fanous was approached by the chief

of pediatric surgery at the Montreal Children's Hospital to lead the excision of the tumor, which was the size of a large blueberry and was sitting in a deep bony crater between the brows. It was completely buried by an ingrowth of bone over it. There was only 0.6 centimeter of bone between the bottom of the tumor and the child's cranial cavity.

Traditionally, these types of tumors are removed by cutting through the skin directly over the tumor, leaving an external scar. As well, the scar would have gotten worse as Jayden got older, especially since the little boy had dark skin.

The child was discharged about an hour after surgery and has recovered fully since.

This is the first time an endoscopic procedure has been used in Canada to remove a facial mass on a child's face through a single 1.3cm scalp incision. As well, this is the first reported case of such a tumor being covered by bone.

This case made front page news in all major Canadian newspapers such as the *Globe & Mail* and *La Presse* as well as being the top story on the evening television news including CBC World News and TVA.

DR. FANOUS IS SEEN HERE REMOVING THE TUMOR BY AN ENDOSCOPIC APPROACH THROUGH A 1.3CM SCALP INCISION.



## 2009 ANNUAL DONOR REPORT FOR THE AAFPRS

### Mission

In 1974, the Educational and Research Foundation for the American Academy of Facial Plastic and Reconstructive Surgery (AAFPRS Foundation) was created to foster, promote, support, augment, develop, and encourage investigative knowledge and charitable and humanitarian application of facial plastic and reconstructive surgery.

### 1887 Gift Circles

Each 1887 Gift Circle recognizes individuals and organizations whose philanthropic commitment to the AAFPRS Foundation is \$1,000 or more (actual cash donation) during this past fiscal year (January 1, 2009 to December 31, 2009). The year 1887 was when the first credited intranasal rhinoplasty was performed in the United States.

#### \$100,000+

Dermik, a business of sanofi-aventis U.S.

#### \$75,000-\$99,999

Allergan Medical  
Medicis Pharmaceutical Corporation

#### \$50,000-\$74,999

CareCredit  
BioForm Medical, Inc.

#### \$25,000-\$49,999

Andrew A. Jacono, MD

#### \$10,000 - \$24,999

John M. Hodges, MD

#### \$5,000-\$9,999

Cynosure, Inc.  
John Charles Finn, MD  
PCA Skin  
Mr. Larry Scheinfeld  
Edwin F. Williams, III, MD

#### \$2,500 -\$4,999

Andrew C. Campbell, MD  
Neil A. Gordon, MD  
Russell W.H. Kridel, MD  
Samieh Rizk, MD

#### \$1,000-\$2,499

Peter A. Adamson, MD  
Roger A. Allcroft, MD  
Alma Lasers  
Stephen B. Anderson, MD  
Babak Azizzadeh, MD  
Benjamin Bassichis, MD  
Mark M. Beaty, MD  
Edward D. Buckingham, MD  
Roman P. Bukachevsky, MD  
Paul J. Carniol, MD  
Michael M. Churukian, MD  
Combined Federal Campaign (CFC)  
Mark V. and Jeanne P. Connelly  
Minas Constantinides, MD

Cosmetic Patient Survey.Com

Mr. Stephen C. Duffy  
ENTrigue Surgical  
Fred G. Fedok, MD  
Andrew S. Frankel, MD  
Carla C. Graham, MD  
Mark Hamilton, MD  
Todd Christopher Hobgood, MD  
Sheldon S. Kabaker, MD  
Theda C. Kontis, MD  
J. David Kriet, MD  
Long Island Community Foundation  
Susan Isaacs and Elkan Abramowitz  
Charitable  
Fund  
Stacie D. McClane, MD  
Philip J. Miller, MD  
Mary Lynn Moran, MD  
Craig S. Murakami, MD  
Paul S. Nassif, MD  
Ira D. Papel, MD  
Fernando Pedroza C., MD  
Stephen W. Perkins, MD  
Harrison C. Putman, III, MD  
Qualas Engineering, LLC  
Vito C. Quatela, MD  
Angelo D. Reppucci, MD  
Daniel E. Rousso, MD  
Walter W. Schroeder, MD  
David A. Sherris, MD  
Robert L. Simons, MD  
Ifeolumipo O. Sofola, MD  
Fred J. Stucker, MD  
Pieter Swanepoel, MD  
Jonathan M. Sykes, MD  
J. Regan Thomas, MD  
Geoffrey W. Tobias, MD  
Christopher J. Tolan, MD  
William H. Truswell, MD  
Jeffrey H. Wachholz, MD  
John G. Westine, MD  
Joseph K. Wong, MD

### Foundation Contributors

The AAFPRS Foundation wishes to thank the following individuals and corporations for their monetary support this past fiscal year (January 1, 2009 to December 31, 2009).

### Maintainers

#### \$725-\$999

Samson J. Lee, MD  
John A. Standefer, Jr., MD

### Contributors

#### \$500 - \$724

Eugene L. Alford, MD  
Shan R. Baker, MD  
H. George Brennan, MD  
Donn R. Chatham, MD  
Ross A. Clevens, MD  
Kris Conrad, MD  
Ted A. Cook, MD  
Thomas A. Dalsaso, Jr., MD  
Steven H. Dayan, MD  
J. Kevin Duplechain, MD  
Gerald G. Edds, MD  
Karl J. Eisbach, MD  
David A.F. Ellis, MD  
Jeffrey S. Epstein, MD  
Richard D. Gentile, MD  
Jim E. Gilmore, MD  
Theodore A. Golden, MD  
Richard L. Goode, MD  
Cynthia M. Gregg, MD  
Peter A. Hilger, MD  
David B. Hom, MD  
P. David Hunter, MD  
Mr. and Mrs. Kirk Q. Jenne  
Calvin M. Johnson, MD  
Keith A. LaFerriere, MD  
Samuel M. Lam, MD  
Wayne F. Larrabee, Jr., MD  
Corey S. Maas, MD  
Devinder S. Mangat, MD  
Lawrence J. Marentette, MD  
Jon Mendelsohn, MD

## 2009 ANNUAL DONOR REPORT FOR THE AAFPRS

Donna J. Millay, MD  
Harry Mittelman, MD  
Todd A. Morrow, MD  
Steven L. Neal, MD  
Norman J. Pastorek, MD  
Louie L. Patseavouras, MD  
Steven J. Pearlman, MD  
Edmund A. Pribitkin, MD  
Sigmund L. Sattenspiel, MD  
Anthony P. Sclafani, MD  
William E. Silver, MD  
Frank Simo, MD  
Brent J. Smith, MD  
Howard W. Smith, MD, DMD  
Robert F. Tarpy, MD  
Dean M. Toriumi, MD  
Jon B. Turk, MD  
Tom D. Wang, MD  
Marc S. Zimbler, MD

### **\$250 - \$499**

ABFPRS  
David A. Abraham, MD  
E.A. Fred Aguilar, III, MD  
Jeffrey J. Colton, MD  
Douglas D. Dedo, MD  
Michael E. Jasin, MD  
Simon Levy, MD  
Maureen A. Muecke, MD  
Andrew G. Pichler, MD  
Daniel D. Rooney, DO  
Stephen P. Smith, Jr., MD  
Tory Burch, LLC  
Ivan Wayne, MD  
Seth A. Yellin, MD

### **\$100 - \$249**

Carlos Ayala, MD  
Cameron D. Bakala, MD  
Jimmy J. Brown, MD  
Ronald J. Caniglia, MD  
Theodore Chen, MD  
Jannis Constantinidis, MD  
Craig Cupp, MD  
Brad R. Czarske, MD  
Ms. Kathryn Delpizzo  
Jaimie DeRosa, MD  
Alexander S. Donath, MD  
Emirzian, Mariano & Associates  
Waleed Hazem Ezzat, MD  
John L. Frodel, Jr., MD  
Ms. Marilyn H. Ginsberg  
James M. Gaunt, DO  
Robert Alexander Glasgold, MD  
Robert F. Gray, MD  
Yael Halaas, MD

Grant S. Hamilton, MD  
G. Richard Holt, MD  
J. David Holcomb, MD  
John F. Hoffmann, MD  
James E. Kallman, MD  
Harold J. Kaplan, MD  
Alyn J. Kim, MD  
Milos Kovacevic, MD  
Derek S. Lee, MD  
Robin Williams Lindsay, MD  
Edmund S. Liu, MD  
Carlo Macro, MD  
Corey C. Moore, MD  
Laxmeesh M. Nayak, MD  
Hasmet Seckin Oksar, MD  
William M. Parell, MD  
Jeffrey Rawnsley, MD  
Ernest B. Robinson, MD  
Deborshi Roy, MD  
Ran Y. Rubinstein, MD  
Mr. Gary E. Russolillo  
Konstantin Salkinder, MD  
Mrs. Diane F. Schoenrock  
Schwab Charitable Fund  
James R. Shire, MD  
Douglas M. Sidle, MD  
Thiru Siva, MD  
Benjamin C. Stong, MD  
Farhan Taghizadeh, MD  
Scott Walen, MD  
Jeffrey B. Wise, MD  
Celeste Young, MD  
Kristina Zakhary, MD  
Matthew B. Zavod, MD  
A. Joshua Zimm, MD

### **\$5 - \$99**

Ms. Syreeta Batiste  
Ms. Lita Bond  
Ms. Lisa Cimpl  
Ms. Zelma A. Cochran  
Mr. Chad Cantrell  
Dwight M. Ellerbe, MD  
Ms. Sherry Finley  
Ms. Susan L. Fishbein  
Mr. Michael Garcia  
Myles K. Krieger, MD  
Grigoriy Mashkevich, MD  
Ms. Jacqueline R. Morris  
Ms. Lisa A. Sarrge  
Ms. Laura Smith  
David W. Stepnick, MD  
Ms. Mary S. Tetrick  
Elizabeth Whitaker, MD  
Glen Y. Yoshida, MD

### **IN-KIND GIFTS**

Eugene L. Alford, MD  
Eugene Bortnick, MD  
Donn R. Chatham, MD  
Minas Constantinides, MD  
Edward H. Farrior, MD  
Fred G. Fedok, MD  
John L. Frodel, Jr., MD  
H. Devon Graham, MD  
Robert M. Kellman, MD  
David W. Kim, MD  
Corey S. Maas, MD  
Mary Lynn Moran, MD  
Corey C. Moore, MD  
Stephen S. Park, MD  
Harrison C. Putman, III, MD  
Vito C. Quatela, MD  
Daniel E. Rousso, MD  
Jonathan M. Sykes, MD  
S. Randolph Waldman, MD  
Edwin F. Williams, III, MD  
Tom D. Wang, MD

The Development Office of the AAFPRS Foundation prepares the report of contributions made for Fiscal Year 2009. Every effort is made to ensure that the information included is accurate. If any inadvertent errors or omissions have occurred, kindly notify Ann H. Jenne, Director of Development, so that we may correct our records, [aholton@aafprs.org](mailto:aholton@aafprs.org).

# CONSUMER NEWSLETTER ADDRESSES PRESSURE TO LOOK YOUNGER

Order your digital copy of the winter issue of *Facial Plastic Surgery Today!* The Academy proudly offers its members quality content that can be used as a marketing vehicle for your practice. Let your prospective and current patients know that you care by educating them—keep copies in your waiting room and post as fresh content for your Web site.

Are you feeling the pressure to look younger? This cover title will capture readers' attention as they learn what men and women just like them are doing to combat the pressure to turn back the clock.

Inside the newsletter, help customers learn the latest on laser treatments with *Knowing the Laser Language*. This article will describe the various lasers, technologies, and techniques so that the consumer is confident in coming in for a laser resurfacing consultation.

The popular column on page three will address timely topics. The *Ask the Expert* will talk about oxygen therapy and if it helps you to heal faster. According to one of our own members, facial plastic surgeon Andrew Jacono, MD, in a study released in September 2010, hyperbaric oxygen therapy decreases bruising by 35 percent in patients undergoing facelifts, seven days postoperative. The *What's New* will share the study results that Dysport may be better than Botox for treating crow's feet. And the *Health Tip* will provide tips for taking care of your appearance during the harsh winter months.

On the back cover, an informational article on *Innovative Ways to Promote Healing* will peak the interest of a broad audience—who doesn't want to heal as completely and quickly as possible? Various techniques that may promote faster healing, such

as hypnosis, homeopathy, massage, music therapy, oxygen therapy, diet, and supplements, will be reviewed.

Order your copies of *FPST* in time for the winter issue. Your practice will benefit and your current and future patients will thank you. You will receive a CD with the newsletter in three formats: Adobe PageMaker, PDF, and Word file; you can modify, print, and post the newsletter to your Web site. Refer to the enclosed catalog for details. ■

## Attention AAFPRS Members!!!

The Academy Board and staff sends e-mails out on a regular basis—don't be left out. Make sure we have your e-mail address. Go to the Academy's Web site, [www.aafprs.org](http://www.aafprs.org). Log into the Members Only section, then click Edit My Profile on the left column. This is where you can enter or update your e-mail address. You can also make address, phone and other membership changes.

## A Letter from the OFPSA President

I would like to thank all those dedicated members who joined us this fall in Boston. It was a wonderful meeting and I enjoyed getting to know most of our members. I believe everyone learned a lot from our speakers and look forward to continuing to escalate the level of information that we provide from year to year to all our OFPSA members.

As time passes us quickly and this year begins to come to an end, I am beginning to work on every detail to ensure that next year's meeting is as successful as this year. As the new president, I welcome any feedback or suggestions that any of our members may have. It is always good to have as much input as possible so that we can hopefully satisfy everyone's needs where it pertains to health care issues for all our leaders.

I also want to take this time to thank past-president Daphne Christensen for all her dedication in making this year's meeting a great success. Although she took on other responsibilities, she made sure her job was done with the organization. She left behind all her knowledge and experience for me to take it to the next level. And with everyone's help, I am sure this upcoming year will be just as good. ReGina Simo cannot be left behind with her many years of dedication to the organization, I think none of the past board members could have done such a great job without her assistance. Thanks, ReGina.

Reminder: Please don't forget to pass the word about membership, we need to continue to grow and we can all help by spreading the word. Please feel free to contact me with any questions and or suggestions. [sandie@facial-plasticsurgery.com](mailto:sandie@facial-plasticsurgery.com); (410) 486-3400.

2010-2011 OFPSA OFFICERS  
Sandie M. Choucair-Beltran,  
President  
Tracy Drumm, Vice President  
Triste Rosebrough, RN,  
Membership Services  
Tricia Thinnies, IT Coordinator



Task Force: Marcy Simpson, Deb Scheib, Joanie Marino, and Meg Navarro  
Staff Liaison: Ann H. Jenne ([aholton@aafprs.org](mailto:aholton@aafprs.org))

a heritage of innovation

20  
YEARS

As we embark on our third decade in the business of healthy skin, our strength in science and integrity in education remain guiding forces. PCA SKIN



changed the landscape when we provided best-in-class daily care and novel blended chemical aestheticians. We are



peels to physicians and clinical excited to share the We will be delivering

fruits of our continuous improvement. new education opportunities Professionals, and consistently



to our PCA SKIN Certified bringing new Certified Professionals into practices benefit from happy patients with



our team. Your healthy skin, and from increased revenue. Most of all, PCA SKIN provides products that work. We have a legacy as a leader, not a follower,

so stay with us as we unveil the best in science...

**Call us today to find out about our latest products, or to join our team as a PCA SKIN Certified Professional.**



**PCA** skin®

pcaskin.com | 877.PCA.SKIN [722.7546]

The AAFPRS Foundation wishes to thank the following companies for their support of our 2010 Fall Meeting

Educational Grants



Non-Educational Support



## WONG AWARDED NIH GRANT

Congratulations to Brian J.F. Wong, MD, professor of otolaryngology and biomedical engineering at the University of California-Irvine, who has been awarded funding of \$3,234,417 for a grant entitled, *Diagnosis of Subglottic Stenosis and Edema in Neonates Using Optical Coherence Tomography (OCT)*.



In this five-year, clinical-translational research study, Dr. Wong will propose to design and construct high speed, high resolution OCT combined with 3-D MEMS-based probes to image the newborn and infant airways in the neonatal intensive care unit, and define the potential role of OCT in diagnosing the onset and progression of subglottic airway disease in these critically ill patients.

"Airway-nasal-pharyngeal-rhinoplasty/cleft surgery has always been a part of facial plastic surgery," says Dr. Wong. "This is a means to look at scar formation in the airway that can then be adapted for use in other parts of the body. Implicitly, this is a wound healing study, as the technology provides a novel way to determine ahead of time when changes in the tissue occur that could lead to catastrophic events. Knowing this, physicians can intervene, prevent horrible complications, and also monitor and guide therapy—both medical and surgical."

Dr. Wong is the principle investigator on the grant. ■

# PAST PRESIDENTS AND FOUNDERS CLUB DINNERS ... TRADITIONS THAT ENCOURAGE CAMARADERIE

The Past Presidents' Dinner, which is usually held during the Fall Meeting, is a time when the past leaders of the Academy gather to not only reminisce about the past, but also think of the future and welcome the newest inductee into the fold. This year they welcomed Daniel E. Rouso, MD, immediate past president. The guests enjoyed watching the activities below on Boston's bustling Boylston Street. The camaraderie that could be felt clearly illustrated that the AAFPRS is more than a medical society; it is a second family for many.

The Founders Club held their 24th Annual Meeting at the historic Fenway Park. Cocktails were held behind home plate; tours of the historic landmark were given and dinner was held in the EMC Club overlooking the ballpark. Local Boston comedian Paul Nardizzi concluded the evening with his fast-paced performance that had members laughing. Mr. Nardizzi is a Boston area favorite and a national headliner with numerous appearances on *Conan O'Brien* and *Comedy Central*. Founders Club baseball caps were set at each place setting, thanks to Dr. and Mrs. Norman Pastorek!

The Founders Club, since its birth 24 years ago, has continued to grow and now boasts of more than 150 members. Its members are devoted to the AAFPRS Foundation and the future of facial plastic surgery.

The officers of the Founders Club are Dr. Pastorek, president; Sheldon S. Kabaker, MD, secretary; Fred J. Stucker, MD, treasurer; and Jonathan M. Sykes, MD, advisor.

For more information on the Founders Club or if you are interested in joining, please contact staff liaison Ann H. Jenne at [aholton@aafprs.org](mailto:aholton@aafprs.org).



**T**hink you need a publicist? Think again! Green Room PR launched the On-line PR Tool Kit at the Fall Meeting in Boston showing members how to take advantage of this easy-to-use, do it yourself PR tool.

The tool kit gives members everything they need to secure their own media placements. The tool kit includes templated materials, allowing members to tap into press releases, media lists, and other tools to reach out to the media and keep them abreast of industry trends and raising awareness of the Academy and its areas of expertise. Media exposure can also help raise the profile of Academy members as thought leaders in facial plastic surgery.

To encourage members to use the tool kit, Green Room PR hosted a breakfast seminar. More than 50 people attended the seminar to learn how to use the tool kit in their own practices. One of the benefits is that it is constantly updated with timely news angles to keep the content fresh and friendly for media. For example, in October, Green Room PR added a press release to talk about the Academy's FACE TO

FACE program during October's Domestic Violence Awareness Month and to elevate awareness of the program in the media. Since the Fall Meeting, Green Room PR also has added several other new items to the tool kit including a photo release form for patients, as well as an Academy logo use agreement.

The On-line PR Tool Kit is accessible through the Members Only section of [www.aafprs.org](http://www.aafprs.org), and can be located by clicking on the link: On-line PR Tool Kit. For questions about the tool kit, please e-mail Green Room PR at [aafprs@greenroompr.com](mailto:aafprs@greenroompr.com).

### Local media campaign

The AAFPRS is regarded as a credible source by the media when journalists are looking for new story ideas and trends. Green Room PR was able to capitalize on this by conducting local media outreach in cities nationwide to promote Academy members. Interest from media was very strong, resulting in television, radio, and print placements in six markets to-date including Memphis, Phoenix, and Seattle. Interviews showcased current trends in facial plastic surgery and members promoted

the Academy as a resource for patients considering any procedures involving the face, head, and neck.

### FACES OF HONOR stories wanted by the media

As many of you already know, *People* magazine has expressed interest in doing a story featuring physicians and patients who have participated in our FACES OF HONOR program. Green Room is looking to build a database of patient stories of servicemen and women that have come through the FACES OF HONOR program that may be willing to share their stories with the media. If you have a FACES OF HONOR success story to share, please contact Green Room PR at [aafprs@greenroompr.com](mailto:aafprs@greenroompr.com).

### Other news

In honor of his appointment as president of the Academy, Green Room PR conducted trade and local media outreach in the Sacramento area, where Jonathan M. Sykes, MD, practices. Several outlets have expressed interest in covering the story about his new appointment to the Board, including *PSP: Plastic Surgery Practice*, KCRA-TV (Sacramento's NBC television affiliate) and *Beautyinthebag.com* (widely-read beauty industry blog).

In addition, Green Room PR took a unique approach to promote the Academy to the media for this year's Fall Meeting. Green Room PR wrote a press release highlighting data from a paper presentation comparing Dysport™ to Botox® Cosmetic. The press release was distributed to target trade and consumer media contacts. Media response was overwhelming, resulting in 233 on-line placements, two original on-line articles, and two pending by-lined articles. Top placements included About.com, Reuters, Yahoo! News, and American Health & Beauty. ■

## Membership Directory Order Form

The *2011 Membership Directory* will be mailed to AAFPRS members by the end of the year. If you would like to order extra copies for your front office, please complete this order form and mail or fax it to Michelle Busey at the Academy office, (703) 299-8898. Mail checks to: AAFPRS, P.O. Box 759019, Baltimore, MD 21275-9019.

No. of copies needed at \$75 each \_\_\_\_\_ Total cost \$ \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Check (made out to the AAFPRS)  Visa  AMEX  MasterCard

Card No. \_\_\_\_\_ Exp. \_\_\_\_\_

Security Code \_\_\_\_\_ Signature \_\_\_\_\_

Name on Card \_\_\_\_\_

# FDA APPROVAL OF BOTOX FOR MIGRAINE TREATMENT ATTRIBUTED TO RESEARCH BY WILLIAM BINDER, MD

"This is such positive news!" extols William J. Binder, MD, ABFPRS diplomate and AAFPRS member. Dr. Binder is referring to the recent October 15th announcement by the Food and Drug Administration (FDA) that BOTOX has finally been approved for prevention and treatment of chronic migraine headaches.

"Over three million people suffer from chronic migraines and it is estimated that there are over 28 million migraine sufferers in the U.S. alone. The FDA approval of BOTOX for this debilitating condition means that there is finally a viable treatment option," he notes.

Dr. Binder (pictured to the right) is credited with discovering

the effectiveness of BOTOX to prevent the onset of migraine headaches back in the early 1990s. After the drug's introduction into facial plastic surgery practices for treatment of facial wrinkles, Dr. Binder had several patients comment that their migraine headaches disappeared after they had received BOTOX injections. Dr. Binder realized that he might be onto something remarkable.



He began a series of clinical trials that culminated in his discovery that BOTOX, when administered properly, could effectively prevent migraine episodes for up to three or more months in 80 percent of his patients. The injections also provided relief from migraine's sister symptoms which include nausea, vomiting, and sensitivity to light. Dr. Binder's colleagues, Andrew Blitzer, MD; Mitchell Brin, MD; and Larry Schoenrock, MD, also participated in the early clinical studies.

During the course of his clinical trials, Dr. Binder developed the injection protocol that served as the basis for the current FDA approved BOTOX migraine treatment. He went on to present his findings to neurological and surgical academies across the U.S. and Britain and was awarded a U.S. patent for his discovery.

Dr. Binder's groundbreaking research, analysis, and ultimate FDA approval of his findings are yet another distinguished reflection on our specialty's continuing contributions to the field of medicine.

*Editor's Note: This article was written by Laurie Wirth, ABFPRS Executive Director.*

## IFFPSS ANNOUNCES NEW AWARD FOR ACADEMIC ACHIEVEMENT

President of the International Federation of Facial Plastic Surgery Societies (IFFPSS) Wayne F. Larrabee, Jr., MD, announced the formation of a new honor to be awarded to the Unified International Certification in Facial Plastic Surgery (UIC in FPS) candidate who achieves the highest score on the ABFPRS certification examination. Dr. Larrabee made the announcement with IFFPSS past presidents Gilbert Nolste Trenite, MD, and Roxana Cobo, MD, during the ABFPRS Board of Directors meeting in Boston this past fall.

"The UIC in FPS certification program is surging ahead," Dr. Larrabee notes, "and we have many academically gifted international surgeons who are seeking this prestigious certification. The IFFPSS and the ABFPRS Board of Directors thought it was only fitting to recognize the UIC in FPS candidate who achieves the highest score on the examination," he adds.

To help UIC in FPS candidates prepare for the examination, (which is only one of the requirements necessary to complete UIC in FPS certification) the AAFPRS is making its

Curriculum Bibliography available to any physician studying for the ABFPRS examination. These study materials can be accessed by going to: [www.aafprs.org](http://www.aafprs.org), and clicking on *Physician Navigation, Fellowship Program* and finally, *Bibliography*. Surgeons can then download a PDF file to find article titles listed according to subject category.

The IFFPSS Board of Directors plans to present this award for the first time during the ABFPRS awards ceremony at the next Fall Meeting in San Francisco. To find out more about the UIC in FPS program, go to: [www.iffpss.org](http://www.iffpss.org). The deadline for submission of UIC in FPS applications for the 2011 cycle is December 15, 2010.



IFFPSS PRESIDENTS, PAST AND PRESENT, MET IN BOSTON DURING THE AAFPRS FALL MEETING. FROM LEFT ARE: GILBERT NOLST TRENITE, MD, ROXANA COBO, MD, AND WAYNE F. LARRABEE, JR., MD.

## End of the Year Gifts are Needed

Annual giving at the AAFPRS Foundation generates needed operating funds for many of your valued activities:

Scientific Meetings  
Fellowships  
Learning Center  
Awards and Grants  
FACE TO FACE

**Your participation is key to a successful annual giving program.**

Your gift does make a difference!

The Development Office created the 1887\* program to recognize individuals and corporations whose philanthropic commitment to the Educational and Research Foundation for the American Academy of Facial Plastic and Reconstructive Surgery is \$1,000+ (actual cash donation) during a fiscal year (January 1 - December 31).

Is your name listed below for 2010? \*\* If not, please contact Ann Holton Jenne, director of development, at aholton@aafprs.org or (703) 299-9291, ext. 229 and/or please make an end of the year contribution in the enclosed annual giving envelope.

\$100,000+

Dermik, a business of sanofi-aventis, US

\$75,000 - \$99,999

Allergan Medical  
Medicis Pharmaceutical  
Corporation  
Synthes Maxillofacial

\$25,000 - \$74,999

CareCredit  
Merz Aesthetics  
PCA Skin

\$10,000 - \$24,999

Samieh Rizk, MD  
David Rosenberg, MD  
and Jessica Lattman, MD

\$5,000 - \$9,999

Lumenis  
Sandstone Medical  
Stryker Craniomaxillofacial  
Syneron and Candela  
Edwin F. Williams, III, MD

\$2,500 - \$4,999

John F. Hoffmann, MD  
The University of Texas  
Health Science Center  
at San Antonio  
Jeffrey H. Wachholz, MD

\$1,000 - \$2,499

Peter A. Adamson, MD  
Min S. Ahn, MD  
Roger A. Allcroft, MD  
Benjamin Bassichis, MD  
Edward D. Buckingham, MD  
Andrew Campbell, MD  
Donn R. Chatham, MD  
Michael M. Churukian, MD  
Peter D. Costantino, MD  
Terry L. Donat, MD  
John Charles Finn, MD  
Neil A. Gordon, MD  
Carla C. Graham, MD  
Timothy M. Greco, MD  
J. David Holcomb, MD  
J. David Kriet, MD  
Jon Mendelsohn, MD  
Mentor Worldwide LLC  
Paul S. Nassif, MD  
Ira D. Papel, MD  
John W. Pate, Jr., MD  
Harrison C. Putman, III, MD  
Ms. Andrea Rosenthal  
Robert L. Simons, MD  
Gary M. Snyder, MD  
Fred J. Stucker, MD  
Christopher J. Tolan, MD  
William H. Truswell, MD  
Jeffrey H. Wachholz, MD

*\*1887 was the year that the first credited intranasal rhinoplasty was performed in this country. \*\* List as of October 26, 2010*

## AWARD GIVEN TO DYNAMIC DUO

The first credited intranasal rhinoplasty was performed in the United States in 1887. Members of the 1887 program are individuals and organizations whose philanthropic commitment to the AAFPRS Foundation is \$1,000 or more (actual cash donation) during a fiscal year. The Distinguished 1887 Award is given to individuals who have gone the extra mile for the Development Office. They have helped the annual giving fund and participated in activities that would not have been the same without their involvement.



According to Ann Jenne, director of development, this year's awardees have always been there for the AAFPRS Foundation. They are supportive of the Foundation activities and are always willing to assist. This husband and wife team always calls before an event to see how they can help and what level of donation is needed. Their calls and e-mails are always uplifting and their love for the Foundation is apparent at all times.

This year's award went to Marcia and Sheldon Kabaker. Thank you for making a difference in 2009.



## When is a filler not an injectable?

To look youthful, an aging face needs volume in the right places. This means envisioning your outcome, and then using appropriate skills and material to make it happen.

Frequently, however, a licensed clinician simply injects the patient with filler. The material is eventually absorbed – sometimes unevenly – and injections must be repeated.

However, with your surgical skills, you can give your patients a *permanent*, symmetrical solution that looks and feels more like natural bone structure. One that's an excellent foundation for face lifts or wrinkle removal.

Choose *Conform*™ facial implants as the ideal midfacial filler, or select from assorted chin implants for an attractive jaw line. Your patients will enjoy the lasting aesthetics – your practice will enjoy the loyalty and referrals.

Benefit from your surgical edge.  
Contact Implantech today.



*Elevate patient satisfaction with Implantech*

**Implantech**<sup>®</sup>  
Superior Patient Aesthetics

CIMEOSIL | ALLIED BIOMEDICAL | GELZONE

800/733-0833 | [implantech.com](http://implantech.com)

## CME UPDATE

Annual transcripts will be e-mailed by December 31, 2010, after which, transcripts will be available at any time via the *Members Only* section of the Web site.

**FREE On-line CME**  
Members who read *Facial Plastic Surgery* (Thieme) can now get free CME credit on-line. Visit [www.aafprs.org/education-meetings.html](http://www.aafprs.org/education-meetings.html).

**Fall Meeting 2011**  
Call for Courses  
Submit your courses for consideration no later than December 1, 2010 on-line at: <http://76.76.218.123/remark/rws5.pl?FORM=InstructionCourseAp>.

## PRACTICE OPPORTUNITIES

Seeking a physician for a Plastic Surgery Office in Bellevue. Please call (425) 990-3223.

Busy metro Seattle area—facial plastic surgeon wants associate to take over practice. Very desirable area.

Facial plastic surgeon needed to take over practice in the south metro area of Denver with in-office operating room and well designed office space. Candidate must be fellowship trained and board certified in facial plastic surgery and otolaryngology with strong surgical experience.

Interested parties for the latter two may e-mail Rita Chua Magness at the AAFPRS office, [rcmagness@aafprs.org](mailto:rcmagness@aafprs.org).

Enclosed in this issue of *Facial Plastic Times* are the *Products Catalog*; *Rejuvenation of the Aging Face* and *Advances in Rhinoplasty* meeting brochures; Web Link Form; Awards and Grants; Committee List; and Annual Fund Envelope.  
All ads in this issue are paid ads.



# FACIAL PLASTIC TIMES

## NOVEMBER/DECEMBER 2010

### 2010

#### NOVEMBER 12-15

##### THE ART OF RHINOPLASTY

Director: Leslie Bernstein, MD, DDS  
San Francisco, CA

### 2011

#### JANUARY 19-23

##### REJUVENATION OF THE AGING FACE

Co-chairs: Vito C. Quatela, MD; David W. Kim, MD; and Mary Lynn Moran, MD  
San Diego, CA

#### MAY 4-7

##### ADVANCES IN RHINOPLASTY

Co-chairs: Stephen W. Perkins, MD; Stephen S. Park, MD; and Minas Constantinides, MD  
Chicago, IL

#### JUNE 18-19

ABFPRS EXAMINATION  
Washington, DC

#### SEPTEMBER 8-11

##### FALL MEETING

Co-chairs: Steven J. Pearlman, MD and Richard E. Davis, MD  
San Francisco, CA

MARK YOUR CALENDARS FOR THE 7th INTERNATIONAL MEETING IN FACIAL PLASTIC SURGERY

#### MAY 9-12, 2012, Rome, Italy

Co-Sponsors: IFFPSS, EAFPS, and AAFPRS

## BEST SUPPORT IS INTERACTION

*From Medical Editor, page 7*  
at <http://www.bmj.com/content/328/7454/1490.full>.

I strongly support this effort and am extremely grateful to Dr. Eaves, Dr. Rohrich, Dr. Nahai, and Dr. Thoma for reaching out to us, to AAFPRS leadership for embracing and supporting the effort, to each society represented in this effort, and to all who attended the meeting for their consistently positive approach. This is the best—and perhaps the only—way we can keep the full spectrum of plastic and reconstructive surgery and all those who practice within it at the forefront of medicine and medical education. The best available evidence is the best support for us in our interaction with patients, payers, regulators, legisla-

tors, and litigators. Let's join together to require, generate and use high quality evidence in our practices, our research and the education of our colleagues and successors. ■

### Web Link?

Do you have a Web site? Is it currently linked on the AAFPRS Web site's *Find A Surgeon*? If not, you are missing out on the possibility of increasing your exposure on the Web and a patient referral. The initial fee is \$350; it is \$250 yearly to maintain your link.

Please refer to the enclosed form to start your link today.