

## Letter to the Editor: Board Certification in Cosmetic Surgery: An Evaluation of Training Backgrounds and Scope of Practice

Nov. 20, 2020

Sir,

I read with great interest the article, “Board Certification in Cosmetic Surgery: An Evaluation of Training Backgrounds and Scope of Practice”<sup>1</sup> claiming dermatologists are “non-surgeon physicians” unqualified to perform various surgical procedures (“excluding Mohs surgery or skin lesion excisions”).

While I whole-heartedly agree on the importance of patient safety and truth in advertising,<sup>2</sup> the article is inaccurate and falsifies the history of cosmetic surgery. Dermatologic surgeon pioneers “have contributed significantly to the history of reconstructive and cosmetic surgery” and “have been leaders in advancing this field.”<sup>3</sup> Data proves dermatology was identified as the leading specialty for the majority of non-invasive and minimally invasive cosmetic procedures and provided the greatest contribution to botulinum toxin treatments for rhytides, injectable fillers, laser treatments, chemical peels and noninvasive body contouring.<sup>4</sup> Further, for seven consecutive years, dermatologists have ranked as the number one influencer among 15 factors that impact consumers’ decisions to have a cosmetic procedure and the physician of choice in five of 10 treatment categories.<sup>5</sup>

I feel it’s necessary to clarify the definition of “surgery” and “board certification.” Referencing the American College of Surgeons definition:<sup>6</sup> *Surgery is performed for the purpose of structurally altering the human body by incision or destruction of tissues and is part of the practice of medicine. Surgery also is the diagnostic or therapeutic treatment of conditions or disease processes by any instruments causing localized alteration or transportation of live human tissue, which include lasers, ultrasound, ionizing radiation, scalpels, probes, and needles. Patient safety and quality of care are paramount, and the College therefore believes that patients should be assured that individuals who perform these types of surgery are licensed physicians (defined as doctors of medicine or osteopathy) who meet appropriate professional standards.* This definition applies to board certified dermatologists, especially dermatologic surgeons and the cosmetic and laser subspecialty as approved by the American Medical Association.<sup>7</sup>

The ASDSA Position Statement on Truth in Advertising defines board certification as:<sup>2</sup> *A medical doctor or doctor of osteopathic medicine may not hold oneself out to the public as “board certified” unless the following criteria are satisfied:*

- (a.) *Successful completion of a postgraduate training program approved by the Accreditation Council for Graduate Medical Education (ACGME) or the AOA that provides complete training in the specialty or subspecialty certified by the non-ABMS or non-AOA board; and*
- (b.) *Certification by an ABMS or AOA board for that training field that provides complete ACGME or AOA-accredited training in the specialty or subspecialty certified by the non-ABMS or non-AOA board; and*
- (c.) *Successful completion of examination in the specialty or subspecialty certified by the non-ABMS or non-AOA board.*

Since this article challenges the definition and scope of practice around board certification requirements, I believe this study should have focused on the non-medical and non-Core Four practitioners who offer cosmetic treatments and the significant patient safety issues involved.<sup>8</sup> Instead, this study purported to analyze the extent of physicians “who market themselves as board-certified cosmetic surgeons.”

Board certified dermatologists have a minimum of seven years of medical training and have pioneered many aesthetic procedures. Tumescent liposuction was developed by a board certified dermatologist, ASDS member Jeffrey Klein, MD, in the early 80s with local tumescent anesthesia, and it “has been shown to be the safest method of fat removal.”<sup>9</sup> To say dermatologists “perform complex aesthetic procedures outside the scope of their primary residency training” is simply untrue and sweeping mischaracterization.

Dermatologists certified by the American Board of Dermatology, the American Osteopathic Board of Dermatology and the Royal College of Physicians and Surgeons of Canada – along with facial plastic surgeons and oculoplastic surgeons – are recognized as part of the Core Four specialties that are, like plastic surgery, involved in the science, practice and teaching of aesthetic surgery. I disagree with the statement that dermatologists are practicing out of scope if they perform a blepharoplasty, liposuction or rhytidectomy.

As stated above, scalpels are not the only instrument used in performing these surgical procedures. Dermatologists led the development of devices, like fractional ablative CO<sub>2</sub> laser, as an excellent scalpel-free eye-lift (blepharoplasty) procedure.<sup>10</sup> Dermatologists have also pioneered significant advances in combined laser-assisted liposuction and minimally invasive skin tightening treatments improving skin laxity of the face and neck (rhytidectomy) with excellent safety and efficacy.<sup>11</sup>

Referencing the Accreditation Council of Graduate Medical Education (ACGME) guidelines,<sup>12</sup> dermatology resident training includes techniques for botulinum toxin injections, soft tissue augmentation, repairs of cutaneous surgical defects using flaps and grafts, and the use of light, laser and other energy-based modalities, and elective cosmetic dermatology procedures including chemical peels, dermabrasion, hair transplants, invasive vein therapies, liposuction, scar revision and sclerotherapy. Additionally, most dermatology residency programs teach plastic surgery residents how to use lasers.

On consumer-facing communications, board certified dermatologists appropriately call their work “cosmetic surgery” or “aesthetic surgery.” I have not seen dermatologists “marketing themselves as plastic surgeons” and neither has this study.

The American Society of Plastic Surgeons is a participating partner of the Truth in Advertising Coalition, along with:

- American Society for Dermatologic Surgery Association
- American Academy of Dermatology Association
- American Academy of Facial Plastic and Reconstructive Surgery
- American Academy of Ophthalmology
- American College of Emergency Physicians

- American Medical Association
- American Osteopathic Association

I encourage your continued collaborative support in promoting truth in advertising legislation about board certification to inform and protect the public.

### **Acknowledgements and Disclosures**

Mathew M. Avram, MD, JD, is President of the American Society for Dermatologic Surgery. His disclosures include:

- *Sciton*: Medical Advisory Board
- *Soliton*: Scientific Advisory Board
- *La Jolla Nanoparticle*: Consultant
- *Cytrellis, Inc.*: Scientific Advisory Board, intellectual property, royalties, stock options
- *Allergan, Inc.*: Scientific Advisory Board (Zeltiq), consultant

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