

facelift of the future

Cosmetic surgery's most promising new technique has the power to turn back time—no scalpel required. By Dodie Kazanjian. Photographed by Irving Penn.

Dido is waiting for me in the dining room of the Mark Hotel. As usual, she's the most spectacular-looking woman in the room, a statuesque figure in a long Jil Sander coat whose black fur collar accentuates her porcelain skin and white-blond hair. Dido's full life straddles the art world, the opera, the stage, and several other passionate interests, and today she has something to tell me that just can't wait. "Hello, darlin'," she says in her warm N'Orleans drawl. "Sit down and let me tell you about ThermoCool."

For several years now, Dido has been my mentor in the struggle to outwit time. ThermoCool, she explains, is the very latest rejuvenating tech-

nique, a "facelift without surgery" that you can do during your lunch hour. That's right: no cutting, no bleeding, no bruising, no downtime. She herself is having it done in two weeks, and she thinks it might be the perfect thing for me. (I'm often tempted by cosmetic procedures, but too scared of needles and knives to take the plunge.) Naturally, Dido is going right to the source: Roy Geronemus, M.D., the president of the American Society for Dermatologic Surgery, who also happens to be one of the first doctors to use this new technology. "Why don't you come with me," she says, "and see for yourself."

It's an invitation I can't refuse. I detest my smile lines (known in the trade as nasolabial folds) and those ravines dropping down from the corners of my mouth ("marionette

GRID SYSTEM

ThermoCool—during which sections of the face may be treated square by square—could replace or at least postpone traditional surgery. Hair, Dennis Devoy at www.thewallgroup.com; makeup, James Kaliardos.

Sittings Editor: Phyllis Posnick.

lines” to the pros), and I’m really intrigued by the notion that I could get rid of them by what Dido describes as deep-heat therapy. “They say it’s no more painful than the CoolTouch laser skin treatments I’ve been getting once a month from Dr. Geronemus, which just feel like a lot of little pinches,” she says encouragingly.

I meet her at the doctor’s office at 2:00 P.M. on one of those heavy-snow days in December. She has to sit for an hour in the pre-procedure waiting room, her face and neck smothered with a frothy white anesthetizing cream, and while she does so, I go in for my scheduled interview with Dr. G. He tells me that the technique uses radio frequency (not laser) to heat beneath the skin’s layers, causing the skin’s natural collagen fibers to shrink; this stimulates the growth of new collagen, and the result is a tightening and firming of the surface layer that, quite simply, wipes away wrinkles. The hand-held device that he uses to deliver the energy contains a cryogen spray, which cools the skin’s surface before, during, and after each radio-frequency pulse, and supposedly prevents it from burning the subject—hence the brand name ThermaCool. If it’s done right, there’s a slight redness but no blistering afterward, and, best of all, there’s no recovery period involved—you can go right back to work the same day. (Dido has dinner plans at seven this evening.) Naturally, there’s a catch: The results are not apparent for quite some time. It takes four to six months for the tightening and smoothing effects to really kick in.

Geronemus is calm, academic, and low-key. Although it’s clear that he’s very excited about ThermaLift (the official name for this procedure), he’s not a salesman. “You would get some benefit from ThermaLift,” he says after carefully examining my face, “but you’re a better surgical candidate. An upper-eyelid blepharoplasty would be your best bet.” His candor is reassuring, if somewhat deflating. ThermaLift, he says, would probably help most on the lower third of my face, softening the smile lines and giving more definition around the jaw. “It depends on what you’re looking for. A facelift would be the most dramatic response, but if you don’t want surgery and you’re looking for a more modest degree of improvement, then ThermaLift would be of value.” The cost of a ThermaLift, by the way, is around \$2,000 to \$2,500 (per session) as opposed to \$20,000 and up for a facelift. “This is not meant to replace a facelift,” he goes on to say. “It’s meant to catch those early patients who really don’t need significant lifting and don’t want that tightened look. It results in a much more natural appearance compared with most surgeries.”

I rejoin Dido in the waiting room. A nurse has just given her Percocet, a powerful painkiller, to prepare her for this supposedly non-painful procedure. Fifteen minutes later, the nurse takes her away. After about an hour, the same nurse hurries out and fills a cup of water from the cooler to take to Dido. “She’s not a happy camper right now,” she confides nervously. Dido appears a few minutes later, looking stunned. Her face is unmarked—no redness, no blistering—but she admits that the process hurt like hell. On the operating table, her eyes protected by dark goggles, she felt sharp, pricking sensations all over her face and neck. “like being sprayed with aerosol in the most intense way,” she says. “After a while, I was crying, but Geronemus said, ‘If you can hang in there, there’s not much more to do.’” Some doctors who do this operation lay down an inked grid on the patient’s face and work methodically from square to square, being careful not

to direct excessive energy in any one spot. Dr. G., who has done a couple of hundred ThermaLifts, works without a grid. “He’s gentle,” says Dido. “He gives you the courage to keep going.”

After sitting with me for just a few minutes, Dido gets up and inspects her face in the mirror. “I’d do this again anytime,” she says gamely, “rather than go through the downtime of another facelift.” (She had that done four years ago, when she was 49.) “But next time I want to be on Pluto.” As in anesthetized, knocked out, on another planet. On the way uptown in her limo, clearly recovered from the initial shock of the treatment, she tells me she’s thinking about having Dr. G. tattoo her eyebrows. “Genevieve, who does my makeup [and also Susan Sarandon’s, Julia Roberts’s, and Debra Messing’s], says your eyebrows tend to disappear as you get older, and most people draw them on badly—a dead giveaway for aging.”

A few days later, wanting to learn more about the wonders of radio-frequency therapy, I check in with Javier Ruiz-Esparza, M.D., the San Diego dermatologist who pioneered ThermaLift. “Radio frequency is a form of electricity that heats the tissue uniformly and sustainably, and very, very intensely,” he says. “This machine actually contracts tissue. Tissue tightening has been the Holy Grail of dermatologic surgery for a long time. Lasers became very popular in cosmetic procedures because they were non-invasive, but lasers could not penetrate the skin well enough or produce sufficient heat to do significant tightening. To be able to tighten tissue without burning the skin—that’s a breakthrough.” Surgeons have used radio frequency for many years, to control bleeding during operations, but (beginning in November 2000) Ruiz-Esparza was the first to use it for cosmetic improvement. He has treated about 400 patients since then. The procedure has been approved by the Food and Drug Administration for the upper third of the face only; approval is pending for the lower face. It has also proved effective in firming the neck and jowl area, he says. In fact, he has even used it to lift buttocks and breasts, and to cure acne. (This is beginning to sound like one of those all-purpose kitchen spatulas they advertise on TV, for \$19.99.) Who knows where it’s headed? Look at Botox, the deadly toxin that is now being touted as mother’s milk for everything from migraine headaches and stuttering to morbid obesity and tennis elbow.

Unlike Geronemus, Ruiz-Esparza doesn’t hesitate to make large claims for his brainchild. When the technique is used on the forehead, he tells me, “you can actually lift the eyebrows, so that the eyes look more open, refreshed, less tired, and it appears to be a permanent change.” Permanent in this case means at least fourteen months, which is as long as he has tracked his earliest patients. At this point, nobody knows how long the effects will last. “When I do it on the skin in front of the ears, it tightens the cheeks and makes your smile lines softer, and that’s where the money is. That’s what’s been so difficult to improve, except with a surgical facelift.” The only side effects he’s seen are some minor skin burns in the early trials, while the technique was evolving. “It’s a gradual thing,” he

says. "It doesn't give you the radical improvement right away that you get from a facelift, but on the other hand, nobody has to know about it. It reverses time, but gradually."

Not surprisingly, a lot of plastic surgeons are skeptical. "From what I've seen so far, the changes are so small as to question the value of the therapy," says James Wells, M.D., the president of the American Society of Plastic Surgeons. "There's such a big rush to be the first on the block with the newest tool. It's on the early side for ThermaCool—we need more time to evaluate it. I'm not convinced." I have to say that in looking at some of the before and after photographs of ThermaLift patients, I had trouble telling the befores from the afters; but everybody says that it takes three to six months for the benefits to show up. Craig Foster, M.D., one of New York's most respected plastic surgeons, tells me, "If something sounds too good to be true, it usually is. The big unanswered question is, how long will it last? You need a 200-patient study and a few years to see that. If it turns out to work, I'll be doing it myself."

Foster is one of a relatively few New York City physicians authorized to use Radiance, a synthetic form of the calcium in bones and teeth, which was recently approved for facial in-

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jections. Radiance had been used for years in dental surgery; what makes it so exciting as a cosmetic filler is the manufacturer's claim that it can last for five to seven years—as opposed to three to six months in the case of collagen. The fact that promising, even miraculous new cosmetic treatments seem to debut every week or so (Restylane, Zyderm, Cosmoplast, and Cosmoderm, all fillers, are among the recent arrivals) suggests how huge the demand has become for eternal youth. More than 7.3 million cosmetic procedures were performed in the United States in the year 2000, a 60 percent increase over 1998, and more than 12 million are predicted for 2004. With a baby boomer turning 50 every eight seconds, this market isn't going to dry up anytime soon. But I might, if I don't do something fast. Am I being hopelessly superficial to worry about this when my husband loathes the whole idea and the world is reeling toward catastrophe? I am, of course, but something John Cage once said sticks in my mind: "The surface is part of the depth."

With that, I make an appointment to see Karyn Grossman, M.D., a 36-year-old, bicoastal dermatologist who's one of the early ThermaLift practitioners. She's had a ThermaLift herself, which she says rendered the surgical brow lift she'd been planning to have unnecessary—her before and after pictures, I must say, are quite convincing. Grossman feels that people will probably need more than one ThermaLift treatment to get the best results, and that some will benefit more than others. She also talks frankly about (theoretical) adverse side effects, such as burn scars or damage to facial nerves or blood vessels. She hasn't seen any so far, but "if you use too much energy, you do risk some of those things." As for me, she says, my face is both sagging and sinking (oh, joy), and what I real-

ly need is everything—first ThermaCool for my sagging, then fat injections for my sinking, and Botox for good measure. The prospect hardly thrills me.

In my mind, the dean of dermatology in New York is Pat Wexler, M.D., so I go to see her. A petite, 51-year-old dynamo with a warm manner and perfect skin (no visible sagging or sinking here), she's been doing liposuctions all day, but she's still full of energy. She's recently added ThermaLift to her repertoire. "It's excellent for certain parts of the face," she says. "It really gives a lift to the brow and eyelid, and I think it's great for the lower third of the face, too, especially the jawline and the neck. Is it the same as a neck lift? No. You're not going to replace scalpel procedures with non-ablative procedures. Absolutely not. But if you could be satisfied with 75 percent of what a facelift would give you, there's a big difference in cost, risk, and recuperation time. It's really wash-and-wear."

What about the pain factor? I ask. "It's definitely a painful procedure. Anyone who says it isn't, is marketing." She has an anesthesiologist who gives Valium intravenously to patients who want it, because "I don't believe in people being uncomfortable." Sounds good to me. But she doesn't recom-

mend ThermaLift for my problems. What she recommends is fat injections. "Definitely fat. The only difference between your face now and your face ten years ago is you've lost fat in it." Would I do better with a facelift? "That's an interesting question. You have a tiny face. When you lift a tiny face, the face gets even smaller. And then you wind up with what I call the *Beetlejuice* phenomenon: a little head on a bigger body."

Story of my life—whenever I investigate doing anything about my face, I get bogged down in the surfeit of options. Why can't I be like Dido? Dido makes decisions and never looks back. She had a bad time the night of her ThermaLift. The Percocet made her

so woozy that she had to desert her dinner partner in mid-sentence and go home, but two weeks later she told me ebulliently that Genevieve, her makeup guru, had asked, "What did you do to your skin? It's so firm."

It's now three months since the procedure, and she feels tightness in her neck. "the very same tightness I felt after my plastic surgery. It happened within the first month, and it feels great." To me, there's a slight but definite improvement in her lower cheek area, a banishment of the barely visible smile lines that had been there three months ago. It's so subtle and so gradual that most people wouldn't really notice, but the fact is, she's getting younger day by day. She's still using the special Green Cream that Nia Terezakis, M.D., her New Orleans dermatologist, developed ten years ago ("If you don't prime the canvas," says Dido, "you're never going to have a good painting"), and she's thinking about some additional eyelid surgery, and not so far down the road, she'll probably be having another ThermaLift. "ThermaLift is just part of the maintenance program," she says festively. "It's fine-tuning. All you can do as you age is fine-tune." □