

A HIGH PRICE for Beauty

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A HIGH PRICE FOR BEAUTY

The Commoditization of Cosmetic Surgery

Scary, Yet Legal Trends & the Facts You Need to Know to Protect Your Safety

By Sherri Roberts

It's a safe assumption that most of us wouldn't choose an eye doctor to conduct the prenatal care and delivery of our children or an obstetrician to perform retina surgery on the delicate structures of our eyes, talented though they may be within their respective specialties. However, you might be surprised to learn that in most states, any doctor with a medical license legally can perform any surgery a patient desires, even if it is not the area in which the physician is trained.

Lax state regulations regarding provider and facility requirements combined with the surging popularity of cosmetic surgery procedures and shrinking insurance reimbursements to physicians have created what many health care leaders and media reports are warning is a Wild West-like landscape in cosmetic surgery. In increasing numbers, physicians with widely varying backgrounds and levels of training—are drifting into performing more financially lucrative aesthetic procedures such as liposuction, sometimes after completing only a weekend training course. Patients may receive mediocre or botched results, but others have suffered serious health issues or, tragically, paid the ultimate price of their lives—an alarming incidence that's brought the topic widespread attention in the media. Though risk is inherently present in any surgery, most of these tragic stories

involve common variables: doctors who lacked the proper training, equipment, or understanding of anesthesia principles to safely and skillfully carry out the procedures.

Appealing advertising, bargain prices, and seemingly trustworthy credentials all can attractively mask such a provider, making it incumbent on consumers to do their homework and understand the crucial information to know in order to make good choices.

Look Behind the Boards

While many doctors claim to be board certified cosmetic surgeons, this credential is not necessarily an indicator of a doctor's competency to perform a cosmetic plastic surgery procedure. Because numerous boards with greatly varying standards exist, not all board certifications are created equal. They range from those recognized for upholding the highest, most rigorous of standards to boards with much lower requirements. In addition, the board certification of many of those who call themselves cosmetic plastic surgeons is in a medical specialty other than plastic surgery, meaning that oral surgeons, foot doctors, pediatricians, and other types of doctors are performing breast augmentation, tummy tucks, and liposuction among a menu of other cosmetic surgery procedures.

The American Board of Plastic Surgery (ABPS) is the only board accredited

by the American Board of Medical Specialties (ABMS) that recognizes expertise in plastic surgery. Physicians who achieve ABPS certification, which is considered the “gold-standard” for physician certification because of its rigorous and comprehensive evaluation methods and requirements, have completed an approved intensive residency training program for the essential disciplines of surgery with in-depth training in aesthetic and reconstructive surgery. You can find out if a doctor is board certified and in what specific area by visiting certificationmatters.org.

In an article series published by *USA Today* last year, reporter Jayne O'Donnell chronicled some of the potential pitfalls related to inadequately trained physicians performing plastic surgery, including the experience of a once successful Dallas real estate broker, Irma Carabajal LeCroy, who was left wheelchair-bound and out-of-work by what she thought was going to be a minor cosmetic surgery procedure.

After undergoing a liposuction and fat transfer surgery with internal medicine doctor Hector Molina, the doctor and the physician assisting him abandoned LeCroy in his office without any supervision or monitoring, according to an expert witness report. When a friend discovered her short of breath and in severe pain, LeCroy was rushed to the emergency room and transferred to a



How do ACPS surgeons walk the line between achieving great results and preserving patient safety?

By Dr. Germán Newall



In performing challenging procedures, we push the limits to achieve great results by using a smart, scientific approach. The bottom line, like anything in the world, is experience, training, and repetition.

In residency, you're exposed to all possible issues that could occur. I've seen every potential complication in my lifetime. We were trained to avoid them, and if we did have one, to treat it—and that is key.

Because of this, we can readily identify potential problems before surgery as well as any issues that might arise during surgery. No surgeon is in a position to say he/she has never had a complication. Even the best of the best physicians can have a complication.

The important thing is to know how to treat them, treat them fast, and go through the safety algorithm that's been ingrained in us through years of training and experience."

A crucial element in the safety equation is to have a team that does these procedures routinely. At ACPS, we have a team in place starting with the preoperative care of patients. And, very importantly, we have a team for the postop recovery phase. Together with the plastic surgeons and anesthesiologists, we combine our efforts to ensure the entire surgical process goes smoothly.

We have it down to a science because we do so many of these surgical procedures. It's like a tennis player who practices every day versus one who practices only on the weekends.

trauma center. She was left permanently disabled as a result of massive infection and nerve and muscle damage that set in due to complications that quickly arose after her procedure—a dire situation that Molina failed to diagnose, according to the report.

A Texas medical disciplinary panel found that Molina's training for the procedure he performed on LeCroy consisted of reading a book provided by the company that sold him the liposuction machine, completing a two-week program online, passing an online exam, and performing one procedure under the supervision of another surgeon.

Plastic surgery experts decry the quickie-style cosmetic surgery courses that have sprung up around the country to meet the growing demand from doctors trained in other specialties as dangerously inadequate to equip participants with the exhaustive body of knowledge, training, and experience that is necessary to safely and skillfully perform these procedures.

ACPS surgeon Dr. Chris Patronella said, "You cannot gain the critically important comprehensive understanding of anatomy that is necessary to perform these procedures safely unless you've seen it thousands of times, and you only get that from repetition and training—not a weekend course. Without this knowledge, it is exceedingly easy to get into a situation where you don't

understand the anatomy, and an important structure in the body such as a vessel, nerve, or an organ is damaged."

Most plastic surgeons complete a minimum of 6 to 8 years of intensive surgical training and plastic surgery training before they are in practice to perform the procedures on their own. In addition to learning the proper use of techniques, a heavy focus is placed on recognizing and learning how to correct potential complications of surgery in order to achieve a positive outcome. As part of the surgical training program, physicians learn the basics of surgery: surgical techniques, how to handle live tissue, recognize anatomy, and avoid bleeding and damage to critical structures.

"But just as importantly, they receive a comprehensive education in managing the care of the patient before, during, and after surgery," Dr. Patronella commented. "The experience and education that comes from managing thousands of patients during the whole surgical process along with the various surgical and medical issues related to each stage simply cannot be replaced in a weekend course."

Dr. Patronella added "Physicians in a surgical program are typically required to observe hundreds of cases before they are permitted to perform surgery. And even once this milestone is reached, they are supervised for years before

they complete one on their own. This intensive, long-term supervision and feedback is a critical element of the learning process. Without this active critiquing, you could be performing a procedure poorly, and you wouldn't know it."



"You cannot gain the critically important comprehensive understanding of anatomy that is necessary to perform these procedures safely unless you've seen it thousands of times, and you only get that from repetition and training—not a weekend course. Without this knowledge, it is exceedingly easy to get into a situation where you don't understand the anatomy, and an important structure in the body such as a vessel, nerve, or an organ is damaged.

Dr. Chris Patronella

"In the rare event that a medical emergency were to arise, we have at least two doctors present to manage the patient's medical care: the surgeon and the physician anesthesiologist, with each providing his/her respective skills. I've worked in many other medical settings where the individuals who administered the anesthesia were not board certified anesthesiologists, and it was nerve-wracking for that reason.

"The use of physician anesthesiologists in the ACPS SurgiCentre adds more to the surgeons' and patients' overall surgical costs, but it ensures the highest safety protocols are in place to protect our patients. From experience, I can tell you that this benefit is far worth the added expense."

*Billie Jo Fifield, RN
ACPS SurgiCentre Director*



"Plastic surgery is real surgery, and it involves risks. If you're going to be jumping out of a plane, you don't want a cheap parachute."

Dr. Henry Mentz



our patients where you have patient coordinators, a garment bag that includes all the supplies you will need for your postoperative recovery at home, and a home visit a day or two following surgery from one of our health care professionals to monitor our patients recovery from surgery."

Dr. Mentz added, "You don't get safety cheap. It requires more effort to keep our patients as safe as possible. We continue to strive to make surgery more and more safe for patients by continuing to evolve in our techniques and to do research that everyone can use to make patients safer."

performing an after-hours tummy tuck for a friend—a hospice nurse who succumbed to complications from the local anesthesia that the doctor administered into her abdomen.

In contrast, board certified anesthesiologists typically complete a four-year residency program in anesthesia after graduating from medical school. Thereafter, they undergo an oral and written examination process in order to receive the board certification which signifies their knowledge and expertise to perform this specialty.

Anesthesiologist Dr. Paul Sobiesk noted, "Patients are often more concerned with the anesthesia aspect of surgery than with the procedure itself. My goal is to allay their fears."

Step one is making sure a person is in optimal condition to undergo a procedure. "Our preoperative screening criteria is pretty rigid," commented Dr. Sobiesk.

In choosing to have surgery—a move that often is "one of the biggest decisions of their lives," patients can be at ease with their decision to come here, said Dr. Sobiesk. "We have state-of-the-art equipment, and patients have a board certified anesthesiologist with them at all times in the operating room.

During the surgery, the anesthesiologists are monitoring patients' vital signs and anticipating the best way to move them through the process as safely and comfortably as possible.

"At ACPS, we have a core group of physicians that work together," noted Dr. Sobiesk. "Because of that, we are thoroughly familiar with the procedures the surgeons do, and we're able to anticipate their needs. We work well as a team, and that is a big advantage of coming here for surgery."

Cosmetic Surgery Bargains Why the Cheaper Option Might Not Be a Good Deal

In economically challenging times, most of us are looking for ways to cut costs and stretch our dollars. Cosmetic surgery is not inexpensive, so cost is an understandably important factor to weigh in making the decision to pursue it. However, in doing so, it is important to consider that cosmetic surgery, though elective, is serious surgery that involves numerous components to achieve high-quality results and the safest possible outcome. These elements will be reflected in the price you pay, so be wary of using this as the sole criterion that influences your decision. A reputable, skilled plastic surgeon will not cut corners to save costs at the expense of compromising your health and aesthetic results.

The qualifications and skillfulness of the surgeon and staff; the care you receive before, during, and after surgery; and the quality of the surgical facility are just some of the factors that determine the price you pay. ACPS surgeon Dr. Henry Mentz commented, "It costs more money to have a staff that is CPR-trained, to have only board certified anesthesiologists administering anesthesia and monitoring patients, and to have physicians who are board certified plastic surgeons. It costs more to have a comprehensive plan for

Why We Use Only Board Certified Anesthesiologists

Disturbingly, unqualified cosmetic surgeons sometimes take on the dual role of providing anesthesia and performing surgery. Because they may not be legally allowed to administer general anesthesia, some of these providers resort to using higher levels of the local anesthetic lidocaine, which can be fatal in excess doses.

In O'Donnell's article exposé, lidocaine toxicity was the cause of death for at least three patients who received liposuction from doctors who were not board certified plastic surgeons—a travesty which showed "a basic misunderstanding of the principles of pharmacology and patient safety," according to expert testimony for one of the cases. The physician who performed two of these procedures offered 3-day courses at his office to other doctors on the liposuction method he developed, marketed as a minimally invasive procedure that can be performed in office under local anesthesia.

In another story that made national headlines in 2012, an Oregon doctor who was licensed in internal medicine was charged with manslaughter after

Safety is not something that is an abstract concept. It's the foundation upon which everything is built. I think the reason that plastic surgeons are so safety conscious is because it was the guiding principle that permeated every aspect of our education and training—we learned that when safety is compromised, disaster is just around the corner. You know it's the right thing to do, and you know what can happen if it is compromised.

Safety is something that needs to be prioritized even if it's inconvenient; otherwise, it's a compromise of principle. As plastic surgeons, we are looking out for the patient every step of the way. For example, the patient may want to do all of the surgeries they desire in a single operation rather than staging them as separate surgeries or, from a health point-of-view, they may not be ready to have a procedure done. It takes discipline not to cave in to the

desires of patients when it is not in the best interest of their safety.

Another perfect example of upholding the highest standard is the commitment to operate a licensed, accredited surgical facility. An operating room is not cheap to run; it's the most germ-free environment a doctor can create to help prevent infection. Many will do surgery in less sterile environments in order to save money.

One of the biggest problems I see today is a lack of knowledge about these issues, where many believe that everyone who claims to be a cosmetic surgeon is actually qualified. In reality, the real plastic surgeons are far outnumbered by the so-called cosmetic surgeons. The internet has been so great in dispersing education, but it can be a double-edged sword, discerning between good, true information and that which is misleading or incorrect.



Why A No Compromise Approach to Safety Means Sometimes Saying "No"

By Dr. Paul Fortes

Surgery Center Safety: What Matter Most

Even if a physician performs cosmetic surgery procedures in a private surgical facility or an office setting, it's important to check that they have hospital privileges. This means that the doctor can treat you in a hospital should a complication arise. But beyond this, it gives you an indicator of the surgeon's qualifications to perform your procedure.

In order for a doctor to receive hospital privileges, his/her application must be reviewed and approved by a hospital committee that is composed of physicians. These credentialing committees evaluate physicians to make sure they are qualified to operate at the hospital. For this reason, hospitals have functioned as gatekeepers for many years, helping to ensure that physicians are operating within the realm of their training.

However with the advent of many doctors performing surgery

in offices, private surgery facilities, and med spas, this gate-keeping feature can now be easily sidestepped by less qualified doctors. You might be surprised to learn that only about half of all states require medical offices where surgery is performed to be licensed and/or accredited.

It's important to make sure that any facility where surgery is performed is licensed by the state and accredited by one of the following: The American Association for Accreditation of Ambulatory Surgery Facilities (AAAASF), the Accreditation Association for Ambulatory Health Care (AAAHCO) or the Joint Commission on Accreditation of Healthcare Organizations.

ACPS is accredited by the American Association for Accreditation of Ambulatory Surgery Facilities (AAAASF), which means it adheres to the AAAASF's stringent requirements for equipment, operating room safety, surgeon and personnel credentials.



THE RISE OF REVISION SURGERY

As the number of unqualified doctors performing cosmetic surgery increases, ACPS surgeons are seeing a corresponding surge in patients who are seeking revision surgery to correct the botched results they received elsewhere.

ACPS surgeon Dr. Rolando Morales said it's a growing trend he noticed as a plastic surgery resident and one that has comprised many of the cases he's seen in his practice at ACPS. "In residency, I saw a lot of patients who'd had breast surgery with a doctor who was trained in dermatology, and the reason they had problems was that he was not a plastic surgeon," said Dr. Morales. Since joining ACPS last year, Dr. Morales has completed revision surgery for patients who'd had liposuction that was performed by family doctors at med spas. "The temptation for these doctors is that cosmetic surgery work pays well, and spas are willing to hire them to do these surgical procedures," Dr. Morales noted. In many cases, there is little to no preoperative evaluation, counseling about the procedure, or follow-up care of the patient, Dr. Morales commented.

"It's a total commodity."

As physicians feel the financial pressure of decreasing insurance reimbursements, many of them are struggling to support the cost of running a practice, said Dr. Morales. As a result, more ob-gyns, dermatologists, and family doctors will be doing breast augmentation and tummy tucks. "I'm already seeing that," he said.

For those patients who receive disappointing results, revision surgery is often the next step. While improvements can be made in many cases, unsatisfactory results such as irregular contours left behind by excessive liposuction and poorly positioned scars can be difficult to correct. "These correction procedures are not cheap, and they are challenging," said Dr. Morales. It's far better to pay for the skill and expertise to have it done right the first time.

A PERSONAL GLIMPSE

What is one of the best pieces of advice you've ever received?



Dr. Chris Patronella with Dr. Thomas Biggs



Dr. Henry Mentz with his father, Henry

DR. HENRY MENTZ

"My father taught me to be as well trained as possible in whatever career I chose to pursue and to spare nothing in the pursuit to enhance my education. He believed it was important to be as complete of an expert as possible in one's profession of choice. He would say, 'If you're going to do it, you ought to do your best work.'"

"For him, these words were not just platitudes—he exemplified them in his own life as a brave, decorated hero of World War II and, in later years, as a federal

judge who was appointed by President Ronald Reagan for a Louisiana district court. He was a straight up guy, and everyone trusted him.

"His example and advice largely influenced my decision to pursue board certifications in three separate medical specialties. I believe that the combination of the skills and training I learned in each one, gave me the richest education possible for my work as a plastic surgeon."



Dr. Germán Newall with his father, Carlos

DR. GERMÁN NEWALL

"Navigating through this difficult path of life makes one reminisce about the pieces of advice that have carved your present position. In my case, ever since I can remember, I could hear the voice of my father exclaiming, 'Whatever you choose to do in life, aspire to become the best at it.' It did not matter to him what my professional choice would be, but he wanted me to go at it like there was no tomorrow.

"I think that is the single most helpful piece of advice that molded the way I would carry myself in my professional endeavors. Medicine happened to be my choice, and plastic surgery fit my formula in the best way, combining my artistic inner self with my professional love of medicine".

DR. CHRIS PATRONELLA

"As a young resident in plastic surgery, I received a piece of advice from Dr. Thomas Biggs, an esteemed leader in plastic surgery who I was fortunate to have as a mentor. I was surprised when this legendary surgeon told me 'I've never done a perfect operation'.

"Dr. Biggs' comment showed a great depth of wisdom, an understanding of his skills and abilities but also the limitations of his humanity.

"The message he was attempting to transmit to us as residents was that there is a certain level of prudence and

judgment that each plastic surgeon must implement so that the desired results are achieved without taking certain risks in a effort to make the results a little better when this could be potentially harmful.

"I think about his advice every day. When I'm performing a procedure, I ask myself, 'Is this the best I can do? Is there something I can do to make it better, or is there something I'm going to do that could make it worse?' If you don't go through these questions every time, you might miss that balance. You can always do more, but you must determine the limitations of what you can do as a surgeon.

"While we aspire to be perfect in the work we do as plastic surgeons, perfection is a very elusive goal. As a plastic surgeon, you have to be humble in your understanding of how much you realistically can do to transform, improve, and or adjust one's aesthetic appearance.

"Both the surgeon and patient must have realistic expectations. It's better at the time of the consultation to set that expectation, communicating, 'This is what I can do and what I can't do' instead of promising something that you can't accomplish or that will compromise the patient's safety."



Dr. Rolando Morales with his mother, Rosie

DR. ROLANDO MORALES

"My mom has always told me, 'Everything happens for a reason, mijo. You might not understand it, but God has a plan for you.' I can't tell you how right she is. It's funny because she still tells me to this day, like I've never heard it.

"When I was younger, I just didn't get it. But, I started to realize, it's about making good decisions. He gives us choices. We just have to figure out which choice will make the upcoming road more or less bumpy. I can tell you that, at times, bad things

happened, and I couldn't imagine how it would be better. But, as one door closed, another better door eventually opened.

"Thirty-four years later, here I am. Life is great. I have the dream profession that I chose and have pursued since childhood, an amazing wife of 15 years, two beautiful children, and great friends and family.

"I am where I am today because of the amazing people I've met who've given me great advice. The hard part, I think, is to listen to what they are saying. Listening is the key."

DR. PAUL FORTES

"Always follow your instincts about the path that you are meant to follow and not what you or others think you should do; otherwise, you'll never be truly happy or fulfilled. Figuring this out takes complete honesty with yourself. We can fall into a trap of putting limitations upon what we are capable of doing. It's about knowing the path you should follow and putting your fears aside.



Dr. Paul Fortes with his parents Pablo and Maria at his graduation from medical school

"While going through medical school, I thought I would be a good internist. I had a bias against surgeons, believing them to be arrogant, and this perception didn't fit the mold of who I saw myself to be. That changed when I actually began working with surgeons and saw that surgery was one of the most exciting fields in medicine. Plastic surgery was an extension of my love for surgery and a natural fit for me because it put together two aspects that bring me the greatest fulfillment: artistry and medicine."

ACPS is headed to New York!

Group's study will be a **HOT TOPIC** at National Plastic Surgery Meeting



By Sherri Roberts

A revolutionary new medication that's dramatically improving plastic surgery patients' postoperative recovery experience will be a hot topic for plastic surgeons at the 2013 American Society for Aesthetic Plastic Surgery (ASAPS) conference in New York this spring. At the meeting, ACPS plastic surgeon Dr. Rolando Morales will present the overwhelmingly positive results he and his colleagues at ACPS experienced in using Exparel®—a long-acting pain medication—to help patients recover more quickly and comfortably from tummy tuck surgery. With this presentation, ACPS will be the first plastic surgery group in the nation to formally present its findings with Exparel®, which was approved by the United States Food and Drug Administration in 2011.

"We've noticed a night and day difference in our abdominoplasty patients' recovery experience since we began using Exparel® in mid-2012," said Morales. The anesthetic's marathon-like effectiveness in relieving pain for up to 72 hours following surgery has drastically reduced patients' need for prescription narcotic pain medication during the 10 to 14 day recovery period, he added. As a result, tummy tuck patients are returning to driving and other daily activities more quickly—a factor which often promotes

swifter healing and recovery. In addition, Exparel® eliminates the need for patients to tote around a pain pump, a bulky device that infuses anesthetic over the muscles via a catheter that's attached to the patient.

The introduction of Exparel® significantly diminishes what has long been one of abdominoplasty's greatest drawbacks—its reputation for producing one of the more physically uncomfortable recovery periods among cosmetic plastic surgery procedures.

Because Exparel® is injected into the abdominal muscle wall during the procedure, pain relief is delivered directly to the area that is usually the greatest source of postoperative discomfort. In the majority of these cases, the muscle wall is tightened and loose skin is removed to restore a flat, sleek contour to the abdomen. For this reason, it's one of the most popular cosmetic plastic surgery procedures among women who want to have the more youthful, fit look of their pre-pregnancy figures restored to reverse the residual physical effects of childbirth.

Despite its merits, Exparel® has yet to achieve widespread use among plastic surgeons, a circumstance Morales attributes to its cost, which can make it

"We're excited to be on the forefront of new technology in medicine. It is going to drastically change the way we do plastic surgery."

an impractical option for small practices and for less extensive surgical procedures. The large volume of procedures ACPS surgeons perform enables the group to purchase Exparel® in bulk and provide this benefit to their tummy tuck patients. Morales predicts the development of a smaller, more cost-effective 10 cc vial-size of the product—a measure he is discussing with the medication's manufacturer, Pacira Pharmaceuticals—will rapidly increase its use for a broader-range of procedures such as liposuction and breast augmentation surgery in addition to expanding its use within other medical specialties such as orthopedic surgery.

In sharing his group's findings at the national ASAPS conference and through a comprehensive 7-page paper that he hopes to have published in the *Aesthetic Surgery Journal*, one of the most respected and widely-read plastic surgery publications, Morales said ACPS surgeons are enthusiastic to share their experience and recommendations with the groundbreaking product and to provide helpful instruction through a video which demonstrates Exparel® being injected during a live operative procedure.

ULThera Featured on Entertainment Tonight



Gorgeous actress Courtney Cox recently revealed one of her facial beauty secrets: Ultherapy! We're happy to offer this—the only nonsurgical treatment that's FDA-approved to tighten the skin of the face and neck for women and men. E-mail donna@mybeautifulbody.com or call us at 713-799-9999 for more details.



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Each ACPS surgeon has his own Facebook fan page. Visit and "like" your surgeon's page to stay updated on all the latest news at ACPS and plastic surgery, special events, and promotions.

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Dr. Germán Newall [facebook.com/DoctorNewall](https://www.facebook.com/DoctorNewall)

Dr. Paul Fortes [facebook.com/DoctorFortes](https://www.facebook.com/DoctorFortes)

Dr. Rolando Morales [facebook.com/DrMoralesPlasticSurgery](https://www.facebook.com/DrMoralesPlasticSurgery)

The Race to D'Feet Breast Cancer



Dr. Rolando Morales and his patient coordinator, Adelina



Dr. Rolando Morales organized and led the ACPS team for the 2012 D'Feet Breast Cancer race in Galveston. The group, one of the largest teams at the event, had a great time raising money for a good cause, and afterwards, everyone enjoyed relaxing on the beach at Dr. Mentz's house.

STRONG LIKE KARA

By Sherri Roberts

April 2012

November
2008



It's often said, "a picture is worth a thousand words." When Kara Saha sees the photos a cousin shot to chronicle Kara's journey from obesity to a fitter, stronger body, she's reminded of how far she's come in just a few years. Obese for most of her life, Kara's modest goal to shed 20 pounds before a friend's wedding sparked a transformation in her life, evolving into the loss of more than 120 pounds and a newfound passion for fitness. Today the 26-year-old runs 5ks and shares ideas to promote a healthy lifestyle with the 1000+ members of her Facebook fan page, Strong Like Kara.

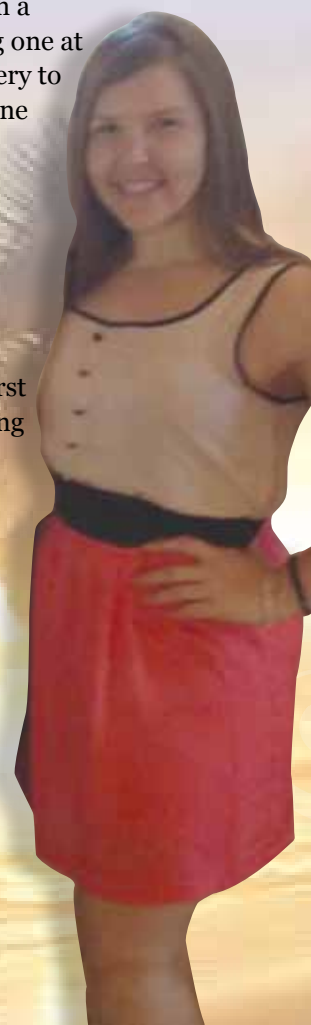
Like many who've experienced large weight loss, Kara was left with folds of loose, hanging skin—a disappointing reflection to behold after the years of hard work and self-discipline she'd invested to reach her goals. "I'd grown to love exercising and participating in fitness competitions, but I had to wear tight clothing in order to hold my loose skin in," said Kara, joking that her skin could "do it's own wave."

Impressed by the positive results a relative had experienced with breast augmentation surgery, Kara began researching the procedure for herself, inadvertently stumbling across body contouring surgery information in the

process. Excited by the prospect of a solution for her excess skin, she consulted with a number of plastic surgeons, including one at ACPS who'd performed revision surgery to correct a breast implant rupture for one of her friends.

"I was sold at my first consultation with him," said Kara. While the other doctors with whom she'd consulted had focused on communicating their recommendations to her, Kara appreciated that her ACPS surgeon first listened to what she wanted, explaining her aesthetic goals back to her in scientific terms. She also was glad he would be able to perform the procedures in a single operation rather than dividing them into separate surgeries as other surgeons had advised.

Four months later, she underwent a full body lift, tummy tuck surgery, an arm lift, and breast augmentation at the ACPS SurgiCentre. During the two-week recovery period, Kara followed her surgeon's instructions carefully, noting, "Everything went exactly as he had discussed with me.



"Strong is the new skinny. For me, this journey has never been about being skinny."

Kara Saha

Kara, 6 weeks after her surgery



As hard as it was, I would do it again in a heartbeat. I'm happy with the results, and I had the best care—it was beyond what I expected."

While body contouring surgery often serves as the final rewarding step of a monumental journey for those who achieve their large weight loss goals, for Kara, it marks the beginning of a new life chapter. After fulfilling her 2012 New Year's resolutions to run a 10k, lose 20 more pounds, and rid herself of the loose skin left over from her weight loss, Kara turned her focus to a new goal: to become a certified personal trainer—an achievement she accomplished in February 2013. It's a natural fit for the woman who—after two decades of struggle with her own weight—went on to become a voice of inspiration to others seeking to live a healthy lifestyle.

While growing up in Texas, Kara's upbeat, outgoing personality and acceptance among a wide circle of friends helped her largely to avoid the bullying and sting of self-consciousness that many overweight children experience. "I was the fat, happy kid growing up," said Kara, who weighed more than 200 pounds by the time she'd reached sixth grade. "My stature was accepted by me and by others around me; my size had become a part of who I was."

Though she'd experienced temporary success at slimming down through

short-lived diets and gym memberships, most of her efforts followed the same pattern: lose weight and gain it back along with additional new pounds. This continued into college, where her habit of skipping meals and consuming cheap fast food coupled with a busy course load, active social life, and sporadic sleeping schedule overtook the physical benefits she gained from intermural sports and walking across campus to classes.

It was a phone call from friends in January 2009 inviting her to be a bridesmaid in their wedding that produced a turning point in Kara's life, motivating her to join a gym and get into better shape. Her enthusiasm soon turned to devastation when she learned her body's measurements: 305 pounds, a 56.5 inch waist, 60.5 inches around the hips, 18 inches around her arms, and a body fat percentage of almost 50 percent. But the jolting numbers compelled her to make lasting changes.

Under the guidance of a trainer, Kara watched her strength and stamina multiply as she improved her eating habits in conjunction with exercise to strengthen and tone her body, helping her to lose the excess weight and more than 60 inches off her frame.

"The best part of this approach was I never felt bad because I didn't shock or deprive my body through a crash diet; I lost by taking baby steps: once I fixed one thing, I would then move on to the next small improvement I wanted to make," said Kara.

When an online virtual fitness trainer in Boston invited Kara to share her story through a series of blogs, Kara was surprised to find herself inundated with Facebook friend requests from readers who'd been encouraged and energized by the insights she shared.

This outpouring of interest led Kara to create a Facebook fan page where she and others could share topics related to the pursuit of healthy living. Filled with inspirational quotes, nutrition and exercise tips, and healthy living challenges, members of the page receive motivational updates such as, "You'll get a lot more compliments

for working out then you will for sleeping in," alongside the photo of a runner, and, "If all you can do is crawl, start crawling," from the poet Rumi.

Kara commented, "I encourage people to attain the weight loss and healthy lifestyle improvements they desire by taking baby steps; it's not an overnight fix." For Kara, that involved learning what and how much her body needs and fine-tuning her nutrition accordingly. "I look at food as fuel. If I'm going to be lifting weights, I plan ahead by reminding myself, 'I need to eat something.'"

Through her Facebook fan page and role as a personal fitness trainer, Kara hopes to help others set their own goals and conquer them, one at a time. She'll tell them that struggles were as much a part of her story as the successes she achieved.

She's reminded of that every time she sees the photos that capture her journey and "keep her accountable" to the commitment she's made to herself. It's a message she considers vital for others to understand—the one that spurred her on when she felt like giving up: while almost anything can be attained with the right mix of determination and discipline, the race to succeed in any worthwhile endeavor is most often a marathon rather than a sprint.



Six months after having surgery, Kara completed her first postoperative 5k race. As she continues to move toward her goal to attain her ideal body fat percentage, Kara recently fulfilled her dream to become a certified personal trainer in February 2013.

ACPS 2012 Christmas Party



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The Aesthetic Center for Plastic Surgery

713.799.9999

mybeautifulbody.com

12727 Kimberley Lane, Suite 300
Houston, TX 77024

4400 Post Oak Parkway, Suite 2260
Houston, TX 77027



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713.799.9999
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