

Is it Possible to Inject Your Way to Happiness?

Perhaps it is possible to inject your way to happiness as a patient and as a physician in ways that are unintended. This is a strange time when people are worried about losing their homes, retirement accounts, and jobs. Why would they think about spending money on fillers instead of food? These are times when physicians are terrified of what is next for medicine and of nonphysicians encroaching on their turf. Why would they want to spend more, rather than less, time with their patients? The answers to these questions reveal some opportunities that suggest one might be able to inject his or her way to a happier place.

I cannot recall how many patients have recently told me that they cannot live without their fillers. Despite what is said on the news, the sun rises each morning and patients still come in for cosmeceuticals and lasers. They may be coming in less frequently, but they still come. The present economy presents challenges as well as opportunities for patients trying to look and feel better about themselves. We, as dermatologists and plastic surgeons, need to be aware of them.

One challenge includes price competition with salons, medispas, and with noncore physicians dabbling outside of their specialties. Opportunities abound, but one needs to work hard to realize them. Bonding with patients is one benefit that will make both patients and physicians happier and provide more meaningful interactions. For me, this offers the chance to speak with patients, learning more about new patients and reconnecting with old ones.

My patients receiving treatment with fillers or lasers tell me that the treatments are one way of helping them maintain control in an uncertain environment. This sense of empowerment has fostered the feeling of having their hand on the tiller, allowing patients to guide themselves. Their self-esteem rises and their perception of their job performance also increases.¹ Patients look and feel more competitive and self-assured. Control and confidence become a self-fulfilling cycle once there is some modicum of change.

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Does this mean that patients are injecting themselves to happiness? Perhaps it does because many certainly feel better. Far from being a psychiatrist, I would not hazard a guess as to the efficacy of these treatments nor speculate whether they compare favorably with traditional methods. However, I think that there is something to this and that it correlates with exerting control over one's body.

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As for the cost of these treatments, there is little doubt that they are expensive. Nonetheless, compared with other luxuries, they are relatively cost effective. Many of our patients indulge in expensive coffees that cost \$4 or more per day. This translates to approximately \$200 per month, or \$800 per 4-month cycle. Instead of buying the expensive coffee, many individuals would choose to buy less expensive coffee and receive treatments that enhance their appearance. There is no doubt that choices are being made now regarding spending priorities. However, unlike the time at the inception of the recession, people are now taking a deep breath to figure out what they can and cannot do without.

Another fallacy that seems to be prevalent in the media is that medispas and salons are reaping the rewards of the recession. My sense is the opposite. I see patients coming to my office with scarce resources, wanting to make sure they see a result when they invest in themselves. As with treasury bills, there is a flight to quality that brings patients to physicians they know and trust.

My cosmetic practice has increased every year, including the one in West Palm Beach, Florida. Patients send their friends and family to me, and I think my style of practice has evolved in response to this. I know about patients' trips and what their kids are doing. My staff and I take more photographs and spend more time

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speaking with patients and I think that this is a great change. It makes the experience more pleasant for all involved. I would bet that the number of holiday gifts that are brought to me and my staff will increase this year. For me, this is a great barometer of how we are doing as a practice.

In a good or bad economy, I always publish, teach, and conduct research. In this economy, these activities are helping patients find me in various publications as they make their way into the public domain via the Internet. Another evolution that has occurred is that as patients are spacing out their visits, they are getting more done during each visit. This increases the understanding of my level of care and expertise and makes the visit more fun for me as well. With a better understanding of their goals and their fears, I can better address patients' needs.

I have not responded to the herd mentality by discounting my fees because what I offer is not a commodity. Although patients initially do not understand that they are not simply buying a syringe of botulinum toxin type A, I try to explain that these fillers are expensive and that dosing needs to be based on muscle mass and the area being treated. Many other facets of the treatment are bundled into the price and we need to make sure that

patients understand this as well. For instance, the consultation is included in the price of the procedure so long as the procedures are performed at the same visit. Topical and injectable anesthetics are included when appropriate. I perform all my injections and do not delegate them to my physician's assistant. When patients understand these points, they tend to be grateful and no longer take them for granted.

Helping patients assert control in an uncertain environment is a good thing. We, as physicians, should be grateful to help patients improve their self-esteem. We are lucky to have better patient relationships and to enjoy coming to work, which not all of our colleagues have. So, can people inject themselves to happiness? This may or may not be true, but we can definitely use the opportunity of the visit to increase the enjoyment that patients and physicians derive.

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Reference

1. Cox SE, Finn JC. Social implications of hyperdynamic facial lines and patient satisfaction outcomes. *Int Ophthalmol Clin.* 2005;45:13-24. ■