# Establish Boundaries With Cosmetics Patients

BY BETSY BATES
*Los Angeles Bureau*

PORTLAND, ORE. — Getting an early read on the personalities and motivations of cosmetic dermatology patients will help avoid negative outcomes, unfair refund requests, and, perhaps most importantly, patients with body dysmorphic disorder, said Dr. William Philip Werschler at annual meeting of the Pacific Northwest Dermatological Society.

He draws parallels between cosmetic dermatology patients and car buyers: There's the brand loyalist, a great kind of patient to have, since he or she always comes to you for care. Better the brand loyalist than the negotiator or the tire kicker.

Status seekers fill your waiting room on their way to the local Jaguar dealership, and they can be good patients as long as they are not unduly influenced by the society maven down the street or the cover model on Vogue, said Dr. Werschler of the department of dermatology at the University of Washington, Spokane.

The special event buyer, on the other hand, has you scheduled in her preweding or reunion planning book, not unlike the 50th-birthday Ferrari shopper.

Once you've sorted them all out, Dr. Werschler suggests guarding against the one thing that is the bane of the car dealer's existence and which could be a common occurrence: buyer's remorse.

"It's not a tent at Cabela's [camping outfitters]," Dr. Werschler said. "You can't suck it back out and give them a refund."

Buyer's remorse can be short circuited before the procedure by underpromising and overdelivering results, charging fair prices, and turning down patients who exhibit signs of bad consumer behavior or body dysmorphic disorder.

"It's okay to say no," he said. "Plastic surgeons do it all the time."

Another tip that dermatologists could borrow from plastic surgeons concerns refunds, which Dr. Werschler said should never be offered just to get a difficult patient out of the office.

When he encounters a patient who is dissatisfied with objectively good results, Dr. Werschler said he is quick to express empathy without accepting blame. For example, he'll say, "I've done my best. The laser did its best. I know you did your best."

He then describes possible alternative procedures the patient could invest in to achieve more pleasing results.

However, he won't operate on patients with body dysmorphic disorder, a somatoform disorder in which a person perceives deficits in physical traits that are actually within normal limits.

Clues to identify such patients may include the lack of visible problems upon examination, incessant self-grooming during the visit, and, especially, a history of unnecessary dermatologic and/or plastic surgery procedures.

Dr. Werschler says he believes in using a direct approach with patients who have an underlying psychiatric disorder that drives them to seek repeated procedures.

By asking if they believe they might have a problem, dermatologists may help these patients get off "the merry-go-round" of procedure after unfulfilling procedure, he said. ■



## Thinking About Adding Aesthetics?

1. Are you sufficiently interested to keep up with the field? Cosmetic procedures fall into the category of "fast-moving consumer goods," like perfumes and hair products, Dr. Werschler said. You need to offer the newest procedures.
2. Are you capable? Do you have steady hands and good hand-eye coordination? Precise surgical skills are needed to achieve excellent cosmetic results.
3. Do you have a good aesthetic sense? Can you subjugate that sense, even when the patient's aesthetic sense is shaky at best?
4. Can you handle whiners? Cosmetics patients can be demanding and difficult to please.
5. Can you say no? No cosmetic practice can succeed unless the physician turns away impossible-to-please patients and refuses to cave in to frivolous refund requests.

Source: Dr. Werschler