

# Hot Topics: One Surgeon's Perspective

by Steve Teitelbaum, MD

*Note: This is an abridged version of the presentation Dr. Teitelbaum gave at this year's Hot Topics session.*

This is the hot topics course—it is not the safe and effective topics course. That sounds trite, but it is important. My grandfather taught me to fish. But when I complained that I wasn't catching anything, he said "it's called fishing, not catching."

The same is true here—all it takes to be presented is that a topic is Hot. What does HOT mean?

In this context, it can mean several things—it can be cutting edge and purely experimental basic research—hot can mean that it has a buzz and is being spoken about...some of the topics are already being used, but still undergoing scrutiny and improvement. But whatever they are, our job as listeners is to evaluate whether they will become, safe, effective, and proven topics.

## What makes something hot?

There are four players here.

- It begins and ends with the patient wanting to look better.
- The doctor wants to find the best way to meet that need.
- The media wants to describe that to the patient.
- The manufacturer has invested in something for the patient's benefit.

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But there is also a dark side to the cycle. It again begins with the patient, whom, often, in my opinion, has a largely uncritical demand for anything new, and gullibility for the wildest claims, whether proven or not...there is the desire for anything that is techno with the word "laser" or "ultrasound." Newer is always better, and they demand only "the latest." The individual doctor, in turn, is compelled to respond to that demand. Doctors may also want to seek a technique that will give them an "edge" over their peers. What choice do the media have but to satisfy their audience's insatiable thirst for the latest gadget and the most improbable

techniques? What that means, therefore, is that there is often disproportionate coverage of the fantastic and unproven. And the manufacturer, with a product to sell, shareholders to please, and now, with the ability to skip the doctor and advertise directly to the patient, and run a direct PR campaign, sends this into high gear. The products then cycle onto themselves.

We plastic surgeons like to think of ourselves as the engine of this train, but we shouldn't fool ourselves any longer...the momentum from the combined effect of the manufacturer's PR efforts relegate us much more to the caboose than any of us are probably willing to admit to ourselves.

I am only excited by something that really does something very different or better...another tool that does roughly the same thing is not of great interest to me—and that is my bias...I disclose that, because I will put down things here because they fail in that regard.

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