PEOPLE

surgically enlarged.

While disturbing to some, the

the satisfied customers who receive them.

defenders, including the doctors who perform them and

"I've wanted them since I was 13 years old," said

cosmetic procedure has its

60¢ TUESDAY, SEPTEMBER 1, 1998

NEWEST TEEN FAD: BUST ENHANCEMENT

Yo! Page 27



LATE SPORTS



Daily News Staff Writer

her own since January.

See IMPLANTS Page 32

my best friend," said the

waitress and college stu-

dent who has lived on

Sullivan didn't consult her parents before having the

IMPLANTS

Continued from Page 27

implants and she paid the \$6,000 cost herself, with money she'd been saving for years.

"Why do girls go on diets, and why do they lie on the beach? Because they want to be thin and want to be tanned," she said during a break from her job as a

waitress at Grotto's Pizza in Reho both Beach, Del. "Well, girls with small chests can't do anything to make their breasts grow.

Enter the man Cosmopolitan mag-azine has called "The Body Doc." Dr. Kirk Brandow, who did Sul-

livan's breast augmentation, is a Bala Cynwyd plastic surgeon who has performed the procedure on patients as young as 17. (Girls under 18 must be accompanied by a parent.)

Brandow doesn't accept every patient seeking breast augmentation - he rejects 15 to 20 percent of the women who want the procedure. Many of these are

To determine whether a woman is a good candidate for the surgery, Brandow and at least one other staff member interviews each prospective patient.

Who gets rejected? "A girl may come in and tell me her boyfriend wants her breasts to be bigger," said Brandow. "That's not the right reason to get them done."

Brandow estimates that 10 to 15 percent of the 150 or so breast enhancements he performs each year are for patients 18 or younger, a phenomenon that's been possible in part because of changes in the way implant surgery is done.

"Four years ago, five years ago, I don't think I would have agreed to do this," said Bran-dow, who minored in art as an undergraduate at Colgate University and considers himself an artist as well as a surgeon. "Back then, implants were made of silicone, incisions were made under the breast, there was scarring, there were hardness problems, loss of sensation, leaking . . .

Technology and medical advancements have made this a much safer procedure."

Today, implants are filled with a harmless saline solution. The incisions through which the implants are inserted are made in the armpit or belly button, eliminating breast scars. And the implants are positioned under, instead of on top of the pectoral muscle, which not only results in a more natural appear ance but also preserves the option of breast-feeding, Brandow said.

Brandow predicts that the de-creased risks associated with breast enhancement could make it as common as nose jobs, which are almost a rite of passage for upper-middle-class girls.

Not all plastic surgeons endorse breast enhancement for such young women.

"It's reasonable to do these

sorts of procedures on someone in their 20s," said Dr. Amit Mitra, chairman of the plastic surgery department at Temple University Hospital. "Any younger than that, you're in a gray zone, because that person may not have finished growing, and may have a growth spurt that could

include a change in breast size." Mitra also pointed out there are no long-term studies on the effects of saline implants. The old silicone implants obscured breast tissue in mammogram tests, and while saline versions allow for clearer viewing, they still make it harder to detect ear ly signs of breast cancer.

Dr. George P. Zavitsanos, a plas tic surgeon at the Aesthetic Health Caré Center in Fort Washington, questions whether a teen- ager comprehends the long-term conse quences of breast augmentation.

"It behooves you to be very critical when an individual under 20 says she wants breast im-plants," said Zavitsanos. "This is a lifelong decision."

First, there is a period of adjustment — both physical and emo-tional — after the breasts are enlarged. Then, to maintain them, replacement may be necessary in as little as 10 years, Zavitsanos said.

Mental-health professionals are even more skeptical about the appropriateness of breast enhancement for teens. A psychiatrist at the University of Pennsylvania believes the pressure to be attractive has increased for young women.

"Teen-agers nowadays seem to have a fear that if they're not completely successful, they'll be failures," said Dr. Anthony Ros-tain, associate professor of psy-chiatry at Penn. "If you're fine in four out of five categories, then you strive to be fine in five out of five categories." But Dr. Ellen Sholevar, an adoles-

cent psychiatrist at Temple Uni-versity Health Sciences Center, says teens are simply responding to the message that big breasts are better that is so pervasive in American society. She blames the media for creating unrealistic models of beauty that overwhelm impressionable young women.

"They watch television and read magazines, such as Philadelphia magazine, that have numerous pictures of scantily clad women in ads for plastic surgeons who are saying, 'If your body isn't perfect, we can make it so.'

"Our society is heavily invested in large breasts. Why should teens be immune?"

Clearly they aren't. One 18-year-old patient of Brandow's said she used to cry whenever she had to try on bathing suits or bras. She says breast implants changed her life. "Before I go to the beach, I now try on all these bathing suits, because I feel so much better about myself," said the teen, who noted that she has a steady boy-

tion to attract men. The girl's mother tried to talk her out of the surgery. "I told her that it's not important to have big breasts, but these girls are determined nowadays to get them no matter what," said the mother, who, like her daughter, requested anonymity.

friend and didn't have the opera-

The girl - with the help of her mom - took out a small loan to pay for the \$6,000 procedure. And mother and daughter agreed to keep the operation a secret from her father.

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