



# The Australasian College of Cosmetic Surgery

## Raising Standards, Protecting Patients

### MEDIA RELEASE

#### ACCIDENTAL BLINDNESS ON THE RISE FROM BOTCHED COSMETIC PROCEDURES

The nation's peak professional body for cosmetic medicine and surgery has issued a stern warning to consumers over walk-in-walk-out cosmetic procedures, which could cause permanent blindness if not performed correctly.

President of the Australasian College of Cosmetic Surgery (ACCS), Dr Irene Kushelew, said nearly 200 cases of accidental blindness have been reported globally<sup>[1]</sup> from botched filler procedures by poorly qualified practitioners. This is up from a reported 98 cases in August last year<sup>[2]</sup> – an alarming rise of 94 per cent.

“Many Australians incorrectly believe that procedures involving dermal fillers are beauty treatments, in the same category as facials. But cosmetic procedures are medical procedures that carry risks. As such, you want to be in the hands of a qualified medical practitioner in the event of any complications.

The popularity of cosmetic procedures continues to skyrocket in Australia, with Aussies spending more on cosmetic procedures per capita than the US, including: \$350 million worth of Botox procedures alone with a 20 per cent increase on the number of procedures taking place year-on-year.

#### Medical consultation with a doctor is a must under Australian law

Dr Kushelew said not only does treatment protocol vary across clinics, practitioners' skills and training does also and not all are up to Australian standards.

“Firstly, you need to ask yourself, ‘when was the last time I saw a doctor?’ by law you must consult with a licenced doctor prior to any cosmetic injectable,” she said.

“Under Australian law you must have a medical consultation with a doctor so they can consider your medical history and assure a physical examination has been conducted.

“Complications can and do take place but reports of botched procedures and the use of imported, illegal products are on the rise in Australia.

“You only have one face, so you want to be in the hands of someone who knows what to do. More and more injectors' qualifications, experience and products are questionable,” Dr Kushelew said.

“One trend we have heard about includes women taking their appearance into their own hands and injecting their own dermal filler. This is, quite frankly, terrifying.

“For these procedures, you should make sure you are in the hands of an experienced practitioner using Australian standard product.

<sup>[1]</sup> [https://journals.lww.com/prsgo/Fulltext/2019/04000/Soft\\_tissue\\_Filler\\_associated\\_Blindness\\_A.1.aspx](https://journals.lww.com/prsgo/Fulltext/2019/04000/Soft_tissue_Filler_associated_Blindness_A.1.aspx)

<sup>[2]</sup> <https://www.abc.net.au/news/2018-08-13/woman-goes-blind-from-cosmetic-filler-injected-in-face/10090922>

“The public needs protection from untrained, inexperienced, ‘occasional’ practitioners offering cosmetic procedures who do not understand the high-risk areas of the face. Many practitioners undergo a one or two-day training course only for cosmetic injectables - this is simply not adequate.

“When these procedures go wrong as a result of an inexperienced practitioner, it also places an unnecessary burden on the Australian health system,” she said.

As part of its mission to improve standards and educate patients, the ACCS has published a brochure [online](#) on key issues to consider. The ACCS has provided four key questions for Australians to consider before receiving dermal filler.

**Four key questions to consider before any form of dermal filler**

- **Have you had a face-to-face consultation with a licenced doctor? This is a mandatory requirement by law.**
- **What is the specific product they are using to inject? The use of imported and illegal toxins and serums is on the rise in Australia, so make sure your clinic is using Australian standard approved product.**
- **How well prepared is your clinic in case of emergency? Ensure they have a procedure to rectify any unintended treatment outcomes.**
- **How experienced is your practitioner? How many times have they done it before? And what training have they undergone?**

At this time, the ACCS is the only College offering an 18-month cosmetic injectable course for medical practitioners. The long standing and sought after course includes in-clinic training and assessment with examinations leading to Fellowship. This specific training means practitioners can perform with top-of-class skill and are dedicated to responsibly guiding patients along with ongoing education.

**Spotlight on liquid nose jobs – demand expected to double by the end of the year**

Dr Kushelew said liquid rhinoplasty (often called filler nose jobs or liquid nose jobs) were particularly popular with demand expected to double by the end of the year.

“Liquid rhinoplasty might seem quicker and seem less invasive than the surgical equivalent, but there are significant risks involved. This procedure involves the injection of hyaluronic acid (HA) filler into the nose to temporarily tweak its shape,” Dr Kushelew said.

“Blindness can occur when an artery is blocked by the dermal filler, and the main safety concern for this procedure is from the incorrect placement of the filler, as the nose contains many veins and arteries, the risk of injecting into one is higher than any other part of the face.

“The nose area is extremely vascular, if the supply of blood in the arteries around the nose get clogged with filler, this could cause regional tissue necrosis (death of skin and soft tissues) or even immediate blindness.

“Blindness can occur when an artery is blocked by dermal filler when injected in the wrong place and in the wrong way.”

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## About the Australasian College of Cosmetic Surgery

Established in 1999, the Australasian College of Cosmetic Surgery (ACCS) is a not-for-profit, multi-disciplinary fellowship-based body of Cosmetic Surgeons, cosmetic physicians, plastic surgeons, general surgeons, maxillofacial surgeons, dermatologists, ear nose and throat surgeons, ophthalmologists and other doctors and health care practitioners who practice in cosmetic medicine and surgery. The primary goal of the ACCS is to ensure the safe provision of cosmetic medicine and cosmetic surgical procedures to the Australian community through the supply of appropriately trained and certified health care practitioners. The ACCS is the only medical college which provides education and training leading to fellowship specifically in cosmetic medicine and surgery. Fellows of the College are medical doctors who have completed post-graduate education and training and demonstrated competency specifically in cosmetic medicine and surgery. To become an ACCS Surgical Fellow, doctors must typically complete a minimum of 12 years of medical and surgical education and training. For additional information about the ACCS, please visit: <http://www.accs.org.au/>

## COSMETIC INJECTABLES – PATIENT INFORMATION

### DO

1. Know cosmetic injectables are a medical procedure, not a beauty treatment. Like all medical procedures, there are risks involved.
2. Recognise the law in Australia requires all patients to have a medical consultation with a doctor prior to receiving any cosmetic injectable. At this consultation, your doctor should consider your medical history, allergies, health issues, medication and provide a thorough and realistic analysis of the risks versus the benefits of the procedure.
3. Ask if there are any likely complications - what are they and how can they be treated?
4. Sign a consent form following the thorough disclosure of risks and side effects.
5. Ask if the clinic is registered with the Local Council, as required by law.
6. Make sure you are given a contact number for a follow-up appointment. In the event of a medical crisis, does the Clinic have resuscitation expertise and equipment such as a source of medical oxygen and defibrillator?

### DO NOT

1. Proceed until you have found out the product being used is TGA approved for use in Australia
2. Proceed without asking how long the practitioner has been performing these procedures and whether they belong to an educational society or college with continuing education requirements.
3. Drink alcohol 24 hours after treatment.
4. Be seduced by vouchers or discounts.
5. Proceed until you have checked the medical indemnity of the medical practitioner – this legislation varies from State to State.

## CASE STUDY – DERMAL FILLER GONE WRONG



Day 1



Day 2



Day 4



Day 7



Day 60

**Name: Hannah Smith (pseudonym to protect her identity)**

**Age: 47**

**Occupation: Counsellor**

- In June 2018, Hannah went to a travelling nurse in a beauty clinic in Queensland to receive treatment for her frown lines, ahead of starting a new job.
- The nurse treating Hannah didn't tell her injecting filler into the frown lines was a high-risk procedure. There are several blood vessels in this area, with little skin thickness, so injectors need to ensure the procedure is at the right depth. Blocking a blood vessel can lead to skin death (necrosis) and blindness.
- She was treated with filler and it blocked a blood vessel, which led to skin breakdown.
- Hannah returned to the clinic the next day as she was concerned about pain and skin discoloration in this area. However, the nurse was not there, and she was told by a receptionist it was likely a bruise.
- There was no medical person on site, she had no idea who to contact, and her face was getting worse.
- Although she had signed a consent form, she hadn't read it, as the procedure was rushed. In addition, she had not been given any details about what to do or been given a number to call if symptoms got worse.
- Her skin was deteriorating, and she googled her symptoms. She learned of skin necrosis and blindness.
- Days later, she ended up in hospital, having seen a doctor with specific experience in this field who was able to help her.
- This doctor recognised she was experiencing a complication due to a blocked blood vessel and treated her by injecting an enzyme to dissolve the filler. This helped reduce the swelling and improve blood flow back into the area. Due to the delay in treatment some damage was already done, so she was referred to the hospital for several days of hyperbaric oxygen to minimize the skin damage and aid with skin healing. She became terrified when she woke up with impaired vision a few days later – due to the hyperbaric oxygen treatment - a temporary side effect.
- On further investigation it became apparent that she was never seen by a doctor, and the nurse performed this treatment at the beauty clinic in Queensland without a script from a doctor - a breach of the poisons act. The clinic was not aware that the nurse was not following protocols.
- Hannah is expected to make a full recovery but had to take one full week off work due to attending hospital for hyperbaric oxygen treatments, and then struggled to work for another two weeks due to vision impairment. The vision deterioration turned out to be a temporary complication of the hyperbaric treatment. This was an incredibly stressful time for her, and although she is grateful that she will make a full recovery, she feels angry that someone she trusted as a medical professional could behave in such an unprofessional way with potentially permanent consequences.
- It is unlikely this would have happened had she seen an experienced practitioner (who complies with regulations and works under the supervision of a doctor). Even if she did experience a complication - if it was in a setting with protocols to recognise and managing possible cosmetic complications - she would have been treated the next day. Treatment the next day would have been early enough to prevent the skin breakdown and the need for hyperbaric oxygen treatments.
- Hannah suggests "Australians need to understand cosmetic injectables are medical treatments, I have learnt the hard way. You have to ask, 'who is doing the injection, what product are they using, what are the risks and what to do if something goes wrong?' I was so lucky not to have turned permanently blind."