

IN CONVERSATION WITH

Dr Benjamin Ascher

The *PMFA Journal* was delighted to chat to internationally renowned plastic surgeon **Dr Benjamin Ascher** for his thoughts on training and changes to the world of aesthetics.

How have things changed since you first started working in plastic surgery?

There are two noticeable changes. First is the business side of plastic surgery. Now more than ever before we witness a global market that is no longer limited to the boundaries of a country. This is true not only for plastic surgery but also dermatology and aesthetic science.

The explosion in web communications has helped the aesthetic market grow on a global scale, with pricing and quality of products improving year after year. But this is a path to tread with caution. Medical and surgical tourism, flashy clinics and social media accounts hiding physician qualifications...these are just some examples of the challenge digitalisation poses on consumerisation that must be taken into consideration. It is the responsibility of each physician to differentiate between what is marketing and what is real development that should be incorporated to practice.

This of course correlates to innovations and technological advancements in the field. As more and more non-invasive treatment options appear in the market, the demand for them also grows. I have also noticed an increasing popularity (and efficacy) in combined treatments for the face and body.

The second change since I first started working is collaboration and partnership between different cultures and different specialities. The IMCAS Congresses really embody this idea. We are proud to point out the fact that the most important academic journals and academic societies in dermatology, plastic surgery, aesthetic science and even gynaecology are our partners. They collaborate in partnership with IMCAS to ensure that the learning material proposed is of the highest quality.



Dr Benjamin Ascher

What are the new innovations in the aesthetic field?

There is no one revolutionary innovation that could change the prevalence of what is actually on the market. The question is: among the 100 innovations that appear every year, which ones will endure and take prominence.

At the present, I see four products that could be considered today as game changers.

1. Fat grafting, PRP and regenerative medicine in general: fat grafting is becoming more popular, especially in breast and buttock augmentation. According to the ISAPS and ASAPS statistics, the rates of both procedures have been on the rise worldwide.
2. Non-hyaluronic acid (HA) and other stimulating fillers: in the past years, there have been a few noteworthy non-HA dermal fillers but for the moment they are still competing with HA fillers, which are effective stimulators.
3. Non-surgical cellulite and fat reduction treatments: the non-invasive and less aggressive nature of these treatments makes them increasingly sought-after.
4. Robotics and 3D printers: they are key technological advancements that can play major roles in the future.

Additionally, as a future prospect, it would be interesting to see a body filler that is really safe and with a long duration. It could be a challenger to fat injection, which is currently the third most important aesthetic surgery procedure.

Why do you think it is important for trainee and even senior aesthetic surgeons to pursue continuing medical education throughout their careers and what is the best way to go about this?

At all times during our development, from early internships until the end of our careers, we should challenge and question our current knowledge because there are enormous amounts of novelty that appear in both the surgical and non-surgical fields. We must have the reflection to always ask what is really effective and what is just marketing schemes with no scientific basis.

IMCAS puts forward this ideology, that's why for this event we have implemented the 'Young Day' sessions dedicated not only to young surgeons and dermatologists but also those who are specialised in regenerative medicine.

What individuals in the world of aesthetic surgery should current trainees look up to for inspiration?

There is no one model to follow; rather it's one's approach towards this practice. Much of the IMCAS scientific committee, for example, are professionals already well established in their field – the 'top' we might even

say. But when it comes to preparing the scientific programme for a congress, they commit to bringing some of the best content to offer our participants, because they understand and embrace this idea of constant learning and self-improvement.

You are of course the Course Director for the IMCAS World Congress – what do you think will be the highlights of this year's meeting in Paris?

The big evolution is that now we are focused not only on the content for the congress, but the possibility to have all the content on the digital mobile app ready for all physicians to access anytime, anywhere. The Academy has many useful resources like the monthly webinar and Alert. To get a full understanding of how IMCAS Alert works, I would recommend the IMCAS Alert sessions which deal with actual cases that were posted online on Alert.

We have pushed to expand the content for this year's congress. IMCAS has attracted a nice population of delegates in reconstructive surgery and clinical dermatology; therefore we are now building these new segments in parallel with aesthetic surgery and treatment.

The clinical dermatology module returns with a stronger content, with dedicated courses offered during all three days of the congress.

The surgeons have a whole separate level dedicated to them, including an exhibition space called the Surgery Village for industry related to plastic and facial plastic surgery. This event features a brand new format of a very important course happening on

1 February called the LIVE Surgery Course, a simultaneous transmission of live cadaver dissections and live surgery from an operating room.

This live format was already popularised by the Cadaver Workshop, which showcased live dissections and live injections. This year's Cadaver Workshop, taking place on the first day, is another highlight because, on top of injectables and threads, it will deal with fat treatment, vulvovaginal treatments and EBD.

**IMCAS World Congress 2019
31 January – 2 February 2019
Paris, France
<https://www.imcas.com/en/attend/imcas-world-congress-2019>**



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