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RAEGAN WOOD

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THE CUTTING EDGE

Should
you consider
cosmetic surgery?

STRIKE A POSE

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and flowing
contemporary
looks



I Feel Pretty

Cosmetic surgery options and preparations for dancers

BY NANCY WOZNY

A new nose changed dancer Maina Gielgud's life. "I desperately wanted to perform the romantic roles, such as Giselle, Odette/Odile. But I was usually cast for the Myrtha types, the mean girls," says Gielgud, who danced with Maurice Béjart's 20th Century Ballet and as a principal with London Festival Ballet. Her nose wasn't huge—it just had a knob on it from a childhood accident—but it was large enough to keep her from traditional heroine roles. After rhinoplasty in the 1970s came the roles. "First Giselle, then Odette/Odile—the dream roles basically—even Juliet," she says.

Whether it's a small frame and delicate face for ballet or a muscular body and striking features for commercial roles, appearances count in dance. Though parts of the field, especially modern dance and tap, enjoy a growing diversity of body types, having the ideal look can sometimes take you farther. Still, all surgery presents a risk, and the choice needs to be well-thought-out, including rigorous investigation, with all the variables considered.

Costs and Risks

Risk is always present with surgery, and it differs depending on the type and length of surgery, the type of anesthesia used and the medical history of the



patient. "Dancers are generally in very good physical health, are not overweight and are nonsmokers," says Dr. Adam Schaffner, clinical assistant professor at Weill Cornell Medical College in New York and director of JUVA Plastic Surgery. "Assuming no other health problems are present—like anorexia nervosa or bulimia—they are generally good surgical candidates."

Those heading into a cosmetic surgery procedure should be in good mental and physical health. The main concern is that if the patient has an underlying eating disorder like anorexia or bulimia, or body dysmorphic disorder (BDD), she will not be satisfied with cosmetic surgery, since the problem is more mental than physical. BDD is much more serious than the body dissatisfaction that is often experienced by dancers—it is a distorted perception of a physical defect when there isn't one.

Cost is another consideration and varies according to the kind of surgery,

length of time in the hospital and anesthesia, and it can easily add up to several thousand dollars. Only in rare cases are these procedures covered by insurance (breast reductions may be, with a well-documented history of back pain). It's important to seriously assess the career gains vs. costs before handing over your credit card.

Making the Decision and Finding a Doctor

Rachel Winer, clinical psychologist in Houston, TX, and adjunct faculty at Rice University's department of psychology, suggests doing prep work before even visiting a doctor. The internet is a place to start. "I would recommend against only looking online, though," says Winer. "Use it to come up with a list of questions for surgeons ahead of a consultation. Ask about outcomes—risks, benefits, any unwanted side effects and what to expect in general. Gather as much information related to the



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—Rachel Winer,
clinical psychologist

procedure as possible, including nonsurgical alternatives.” Also, consider getting the full report from other dancers who have gone through a procedure.

Find a board-certified plastic surgeon or facial plastic surgeon (ear, nose and throat), rather than a physician with another specialty who also does cosmetic surgery. Look for doctors with academic affiliations and hospital privileges. Once you narrow down a few selections, it’s perfectly fine to request to speak to other patients.

“Plastic surgery can make a difference,” says Schaffner. “I have seen my patients’ careers take off.” For Gielgud, the new nose came with some welcome perks. “I didn’t have to spend *quite* as much time with makeup and hairdos before performance to be attractive and camouflage my profile,” she says. “It’s not necessary to be picture-perfect, and expressive eyes can make the most uninteresting face fascinating. In my case, I remain delighted that I did it.” **DT**

Nancy Wozny is a frequent contributor to Dance Teacher based in Houston, TX.

Additional Resources

American Board of Cosmetic Surgery

www.americanboardcosmeticsurgery.org

MedLine Plus

www.nlm.nih.gov/medlineplus/plasticandcosmeticsurgery.html

Surgery Specifics

LIPOSUCTION

Liposuction is the most common cosmetic surgery. “You can be thin everywhere else but still unable to address a pocket of fat on the outer thigh,” says Dr. Richard Baxter, surgeon at Baxter Plastic Surgery in Seattle, WA. Certain areas of your body may simply be resistant to exercise—leading to intense frustration. In these cases, liposuction may be a good solution.

Since dancers are relatively thin, there’s not a lot of fat to be removed and liposuction recovery is usually fairly quick. Expect to be back teaching and dancing in approximately two to three weeks, says Dr. Adam Schaffner, clinical assistant professor at Weill Cornell Medical College in New York and director of JUVA Plastic Surgery. “But it depends on swelling and bruising, and every patient is different.”

THE FACE

While the body is your instrument in dance, the face is what conveys all emotion onstage, and pleasing proportions can’t hurt, especially when doing work on camera. Plus, the older you get, the more concerned you may be with how your looks are changing. If this is the case, you don’t necessarily have to face the knife. Botox can address those pesky forehead lines and the parallel trenches between the eyes. Depending on what the patient wants to change, Schaffner uses a combination of injectable filler materials along with Botox. With a skilled practitioner, you will still be able to be your expressive self. Baxter agrees. “Botox is magic,” he says. “It’s very safe and effective.”

BREAST SURGERY

Breast augmentation and reduction in dancers is rare, but it does happen. “Sometimes dancers want small breast implants, to be a little more feminine,” says Schaffner. And while large-breasted women are not generally inclined to pursue dance careers, breast reductions are an option for those who do and have trouble fitting into restrictive costumes or have any related back pain. “Reduction is a more involved surgery, and the recovery could be several weeks more than augmentation,” says Baxter. Those who have a breast augmentation should wait about six weeks before pursuing any unrestricted physical activity.