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OCTOBER 6, 2003

NEW YORK

THE BEST BEAUTY DOCS

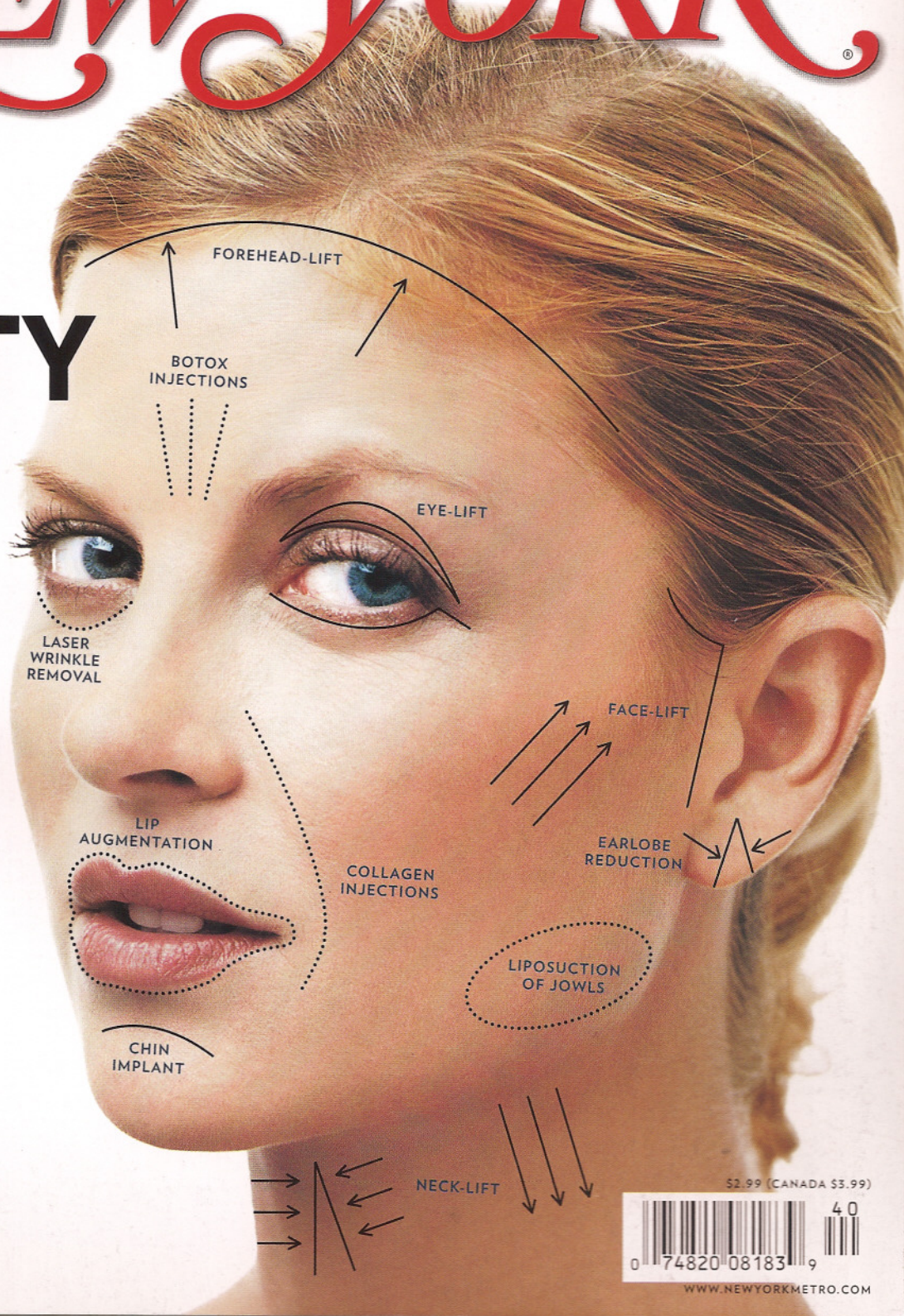
The City's Top Cosmetic Surgeons, Dentists, and Dermatologists

THE NEWEST ANTIAGING TREATMENTS

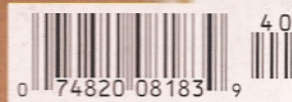
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TOP PLASTIC SURGEONS PICK THE FIELD'S SHARPEST NEW TALENTS.

By Beth Landman Keil and Sarah Bernard

A GENERATION AGO, COSMETIC SURGERY WAS largely reserved for wealthy women in their sixties and teenage girls for whom rhinoplasty was a rite of passage. The pool of surgeons who performed these procedures was very small, too, and few (if any) medical schools and teaching hospitals taught students aesthetic surgery as a career; reconstructive surgery was the goal. If a student picked up techniques on face-lifts, breast implants, or nose jobs, he did it on the side. ¶ In 2003, aesthetic surgery is no longer an adjunct to a reconstructive practice but a legitimate academic discipline of its own. The plastic-surgery teaching programs are affiliated with the city's top hospitals—NewYork-Presbyterian, Mount Sinai, NYU Medical Center, Manhattan Eye, Ear and Throat, Lenox Hill, and Montefiore. Not surprisingly, the graduates tend to be stellar. ¶ So, from this pool, we asked the top doctors



LAWRENCE BASS

Lawrence Bass

NYU MEDICAL CENTER; MANHATTAN EYE, EAR AND THROAT HOSPITAL

AS DIRECTOR OF THE MINIMALLY invasive plastic-surgery program at NYU Medical Center, Lawrence Bass

tors in the city to name their most promising young colleagues practicing here today.

evaluates and develops new methods and technologies for less traumatic procedures. He attended Columbia Medical School, did his residency at NYU, and was a principal developer of the deep Erbium laser peel to erase wrinkles. He is also a proponent of micro-peels, which have a short recovery time. Bass is one of a few doctors in the city who favor the controversial injectable Radiance. 568 Park Avenue, near 62nd Street (212-593-2600).

Sam Beran

WHITE PLAINS HOSPITAL

A CO-AUTHOR WITH FAMED TEXAS plastic surgeon Rod Rohrich of the definitive book on ultrasound-assisted liposuction, Sam Beran is an expert on large-volume liposuction safety. He at-



SAM BERAN

tended the University of Texas Southwestern Medical Center in Dallas, where he became a faculty member. Beran later joined the practice of Westchester surgeons Bob Bernard and Dan Morello and consulted with Morello on the TV show *Extreme Makeover*. 10 Chester Avenue, White Plains, N.Y. (914-761-8667); 91 Smith Avenue, Mount Kisco, N.Y. (914-241-1911).

Andrew Elkwood

MANHATTAN EYE, EAR AND THROAT HOSPITAL; MONMOUTH MEDICAL CENTER

ANDREW ELKWOOD APPLIES WHAT he's learned in his reconstructive work to his cosmetic clients. While doing eyelid-lifts, for example, he likes to cut the muscle between the eyes that causes frown lines, creating a "permanent Botox effect." He also does a minimally invasive tummy-tuck, which is best for women after pregnancy, and breast augmentation in a procedure that goes through the belly button. He did his general surgery and plastic surgery at NYU and considers Drs. Sherrell Aston, Dan Baker, and Alan Matarasso his mentors. He's medical director of the Institute of Advanced Reconstruction at Monmouth Medical Center. 30 Central Park South (212-421-6725); 535 Sycamore Avenue, Shrewsbury, N.J. (732-741-0970).

Robert Freund

LENOX HILL HOSPITAL; MANHATTAN EYE, EAR AND THROAT HOSPITAL

SECONDARY RHINOPLASTY—A COM-plex operation to fix a nose that another doctor has already worked on—is

one of Robert Freund's specialties, as is breast work from lifts to reconstructions. Freund calls his version of a lift and augmentation a "teardrop mastopexy": Instead of cutting away large amounts of skin, which is the norm, he reshapes the tissue. Even though it seems counterintuitive, he says, the skin will conform to the new breast mass, achieving the lift without the scarring. After medical school at Cornell and general and plastic-surgery residencies at NYU, Freund studied with Aston and Baker. 220 East 63rd Street, Suite LJ (212-583-1200).

Haideh Hirmand

NEWYORK-PRESBYTERIAN; MANHATTAN EYE, EAR AND THROAT HOSPITAL; LENOX HILL HOSPITAL

EYELID SURGERY AND FACIAL SURGERY are Haideh Hirmand's calling cards. Among the more innovative procedures she performs are surgically implanting AlloDerm—preserved skin—to restore or correct the shape of the eye area, and injecting fat in the eyelid area to plump up wrinkled skin. She studied at Harvard Medical School, with her residency at what is now NewYork-Presbyterian and fellowships in ocular plastic and aesthetic surgery at Emory University, where she was a student of Mark Codner's. Her mentors are David Hidalgo, Aston, and the éminence grise of New York plastic surgeons, Tom Rees. 105 East 73rd Street (212-744-4400).

Olivia Hutchinson

MANHATTAN EYE, EAR AND THROAT HOSPITAL; ST. LUKE'S-ROOSEVELT HOSPITAL CENTER

SHE'S ONLY 34, BUT OLIVIA HUTCHINSON has had her own Manhattan practice for five years. Her specialty is minimally invasive breast-lifts and reduction; she uses limited-incision operations,



OLIVIA HUTCHINSON

which focus on removal of the breast tissue itself, while keeping the skin incisions small. For facial work, she uses fillers in conjunction with resurfacing surgery. She did her training at what is now NewYork-Presbyterian and at Albert Einstein College of Medicine and did an aesthetic fellowship at Manhattan Eye and Ear. She considers the New York surgeon Donald Wood-Smith her mentor. 830 Park Avenue, near 75th Street (212-452-1400).

Samantha Kwon

MANHATTAN EYE, EAR AND THROAT HOSPITAL

SAMANTHA KWON SPECIALIZES IN breast reduction. She's not into following the latest trends in her field. "People are always trying to invent something new," she says. "But there's a lot to be said for doing an excellent job with the traditional operations." She did a general surgery residency at what is now NewYork-Presbyterian and a plastic-surgery fellowship at the University of California San Francisco and is certified to practice both general surgery and plastic surgery. Her mentors are Sherrell Aston, David Hidalgo, and Nicolas Tabbal. 325 East 79th Street (212-517-5223).



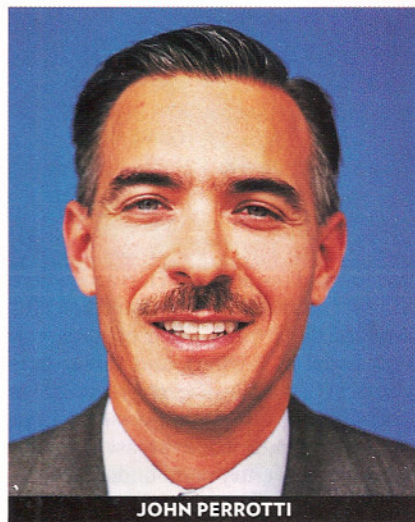
WENDY-ANN OLIVIER

Wendy-Ann Olivier

MANHATTAN EYE, EAR AND THROAT HOSPITAL; BROOKLYN HOSPITAL; NEW YORK METHODIST HOSPITAL

WHEN TRINIDADIAN-BORN WENDY-Ann Olivier was growing up in Brooklyn, she had to go outside the borough for many of her medical services. So, after med school at Duke, general surgery at the Hospital of the University of Pennsylvania, and a plastic-surgery fellowship at NYU Medical Center Institute of Reconstructive Plastic Surgery, where she studied under Joseph McCarthy, she says, "I didn't want to be a typical plastic sur-

geon who sets up an office on Park Avenue and that's it." While she does have an office on Park, she also keeps one in downtown Brooklyn. Her specialties are breast reduction, augmentation, and reconstruction, and body contouring. 1085 Park Avenue, at 88th Street, Suite 1N (917-492-6000); 121 DeKalb Avenue, Brooklyn (718-250-6920).



JOHN PERROTTI

John A. Perrotti

MANHATTAN EYE, EAR AND THROAT HOSPITAL; ST. VINCENT'S MEDICAL CENTER

JOHAN PERROTTI SPECIALIZES IN power-assisted liposuction, which he performs not only on hips and thighs (the usual targets) but on calves, ankles, and arms. He also does body-contouring procedures that are common after a patient has massive weight loss. He completed a fellowship with Thomas Baker in Miami and served as program director of the Aesthetic Plastic Surgery fellowship at Manhattan Eye and Ear, supervising residents and fellows under the direction of Sherrell Aston from 2000 to 2002. His mentor is Gerald Pitman. 9 East 93rd Street (212-258-2200).

Tracy M. Pfeifer

MANHATTAN EYE, EAR AND THROAT HOSPITAL; LENOX HILL HOSPITAL; NORTH SHORE UNIVERSITY HOSPITAL—MANHASSET

AFTER FIVE YEARS OF GENERAL surgery at what is now NewYork-Presbyterian, followed by a plastic-surgery fellowship at NYU's Institute of Reconstructive Plastic Surgery, Tracy Pfeifer was the last fellow to study in Atlanta under Carl Hartrampf, who pioneered a procedure using abdominal tissue to reconstruct breasts after mastectomies. Today most of Pfeifer's work still centers on the breast, from augmentation and reconstruction to reduction and mastopexy (breast-lift), for which she likes to use the

“lollipop” technique, which leaves a scar only around the areola and a vertical line down to the breast fold. Lower-eyelid-lifts are also a significant part of her practice, as are post-gastric-bypass lower-body-lifts. 565 Park Avenue, near 62nd Street (212-860-0670); 1000 Northern Boulevard, Suite 370, Great Neck, N.Y. (516-466-2416).

David P. Rapaport

MANHATTAN EYE, EAR AND THROAT HOSPITAL; ST. LUKE'S—ROOSEVELT HOSPITAL CENTER; BETH ISRAEL NORTH HOSPITAL

AT THE AGE OF 17, DAVID RAPAPORT was accepted to Boston University's six-year med program, but ended up completing his medical degree at Tel Aviv University in Israel. He then did a five-year surgical residency at Harvard (where he met his mentor, William Silen, for years the department chair of surgery at Beth Israel in Boston), and three years with NYU's plastic-surgery program. He specializes in ultrasound-assisted liposuction and endoscopic breast augmentation, with an entry point under the arm. 580 Park Avenue, at 63rd Street (212-752-1129).

Douglas A. Roth

NORTHERN WESTCHESTER HOSPITAL; MANHATTAN EYE, EAR AND THROAT HOSPITAL

AFTER MAJORING IN CHEMISTRY at MIT, Douglas Roth, 39, trained at NYU Medical Center and Bellevue Hospital, where he studied with Sherrell Aston, Dan Baker, and Joseph McCarthy before becoming board-certified in both general and plastic surgery. Four and a half years ago, he joined the Mount Kisco Medical Group to become the only plastic surgeon in a consortium of 80 doctors. About 60 percent of his practice is cosmetic, with eyelid surgery, face-lifts, and liposuction composing the bulk. His reconstructive work focuses on skin-cancer patients. 90 South Bedford Road, Mount Kisco, N.Y. (914-242-5647).

Robert Silich

NEWYORK-PRESBYTERIAN HOSPITAL; LENOX HILL HOSPITAL

SILICH GRADUATED FROM GEORGETOWN University School of Medicine and trained in general surgery and plastic surgery at what is now NewYork-Presbyterian Hospital and Memorial Sloan-Kettering Cancer Center. He has expertise in the L.I.F.T. (limited-incision face-lift) technique, which creates a more natural look—the usual telltale scars are virtually undetectable. He also specializes in microsuction of the face and neck to remove jowls and strengthen the jawline, as well as neck-lifts on men. He is currently in



The Twilight Zone

Doctors disagree on which type of anesthesia is best for which cosmetic procedures. Should you go under—or watch it all go down?

WITH THE advent of plastic-surgery TV shows, patients are more informed than ever—perhaps too informed?—about what they'll look like after their procedures as well as what the procedures themselves look like. Whether they should be awake (if sedated) to witness their own nips and tucks or out like a light is a matter of debate between the city's cosmetic dermatologists and plastic surgeons, and among plastic surgeons themselves.

The dope-or-no-dope question is hottest when it comes to liposuction—the most popular plastic-surgery procedure (according to the American Society for Aesthetic Plastic Surgery, 372,831 liposuctions were performed

in America last year, compared with 249,641 breast augmentations, 156,973 nose jobs, and 124,514 face-lifts). Typically, general anesthesia is not used. Instead, plastic surgeons opt for IV sedation, or “twilight” anesthesia, which is administered by an anesthesiologist who monitors the patient's vitals during the procedure. “My philosophy,” says Richard Skolnik, a plastic surgeon for 21 years, “is to provide the anesthesia that makes the patient the most comfortable—frequently that's heavy twilight. Most patients don't want to see me moving this metal tube back and forth and in and out and be aware that that's going on.”

Cosmetic dermatologists, on the other hand, often prefer local anesthesia, particularly when using the tumescent technique, in which a saline solution with epinephrine and numbing lidocaine “wet” the area where the tube, or “cannula,” will be. An injection of De-