

BODIES A LA CARTE

Passionate for pulchritude, Latin American women are reshaping their form through plastic surgery

By SANDY M. FERNANDEZ

THERE ARE SHORTAGES, AND THEN there are shortages. In January, in the middle of Brazil's prime beach season, torrents of women suddenly started showing up in the plastic surgery clinics of Rio de Janeiro and São Paulo, demanding an operation that was hardly asked for just three years ago: breast augmentation. They wanted bigger busts, and they wanted them now. "It was crazy," says Celia Accursio, a São Paulo plastic surgeon who sits on the board of Brazil's Association of Aesthetic Medicine. "People were saying, 'I want the operation done tomorrow.'" Doctors were caught off guard. They frantically called manufacturers seeking extra supplies of implants—to no avail. "Some surgeons had

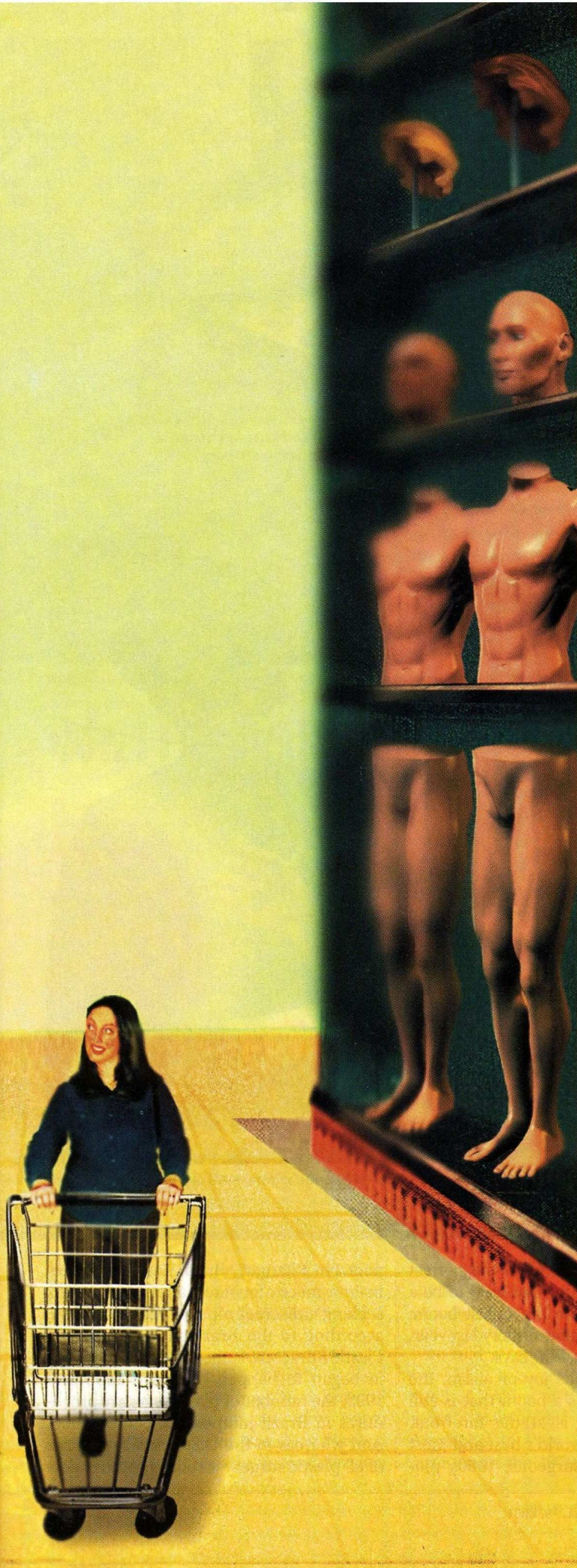


ILLUSTRATION FOR TIME BY BRIAN STOUFFER

to postpone operations," recalls Accursio. "I'd never seen anything like it." Swept away in a passion for pulchritude, Brazil was hit by its first-ever breast-implant crisis.

Working overtime, manufacturers conquered the short-term demand, but Brazil—indeed, all of Latin America—was given a dramatic warning. Suddenly women are demanding new bodies as never before. A craze for aesthetic surgery—on breasts, noses, thighs, eyes, buttocks and everything in between—has been sweeping the region, bringing women (and a smaller percentage of men) to the plastic surgeon's clinic in unprecedented numbers. From the dusty border towns of Mexico to the capitals of the Southern Cone, long lines of patients are forming, people from all walks of life and every level of social status, eager to improve their appearance, their image, their self-esteem—all at the hands of the body sculptors.

The frenzy is democratic: it infects not only the minority of middle-aged, upper-class women who have traditionally turned to plastic surgery but also their young daughters, their middle-class neighbors and even their family servants, who are lining up at clinics in poorer neighborhoods for cut-rate body-sculpting available on a layaway plan. The era of the mass production of appearance is at hand, and Latin America is welcoming it with a smile (chemical peel optional) and open arms.

Like many other phenomena of mass culture, the surgery craze has a strong component of American show biz. As they elect aesthetic surgery, Latin women of all ethnic and racial backgrounds are overwhelmingly choosing one look: a big-busted, small-nosed variation on the traditional California girl. "It's Barbie," says Venezuelan beauty-queen trainer Giselle Reyes, who works with the team that prepares the country's international beauty queens. "*Baywatch*," agrees Argentine celebrity surgeon Jorge Panaté. Either way, it's a Nordic fantasy transplanted to the southern parts of the hemisphere.

To Roberto Briceño-Leon, a sociologist who heads the Social Sciences Laboratory Research Center in Caracas, it's cultural colonization. "It's a devaluation of ourselves, putting a higher value on what comes from abroad," he says. But to the women who choose it, it's the reconstructed look rather than its deconstructed meaning that counts. "I was quite flat and missing a womanly attribute I wanted to have," says Florencia Gómez, 21, a suddenly pneumatic Argen-

tine model who formerly had the perfect long, whisper-thin figure that used to be a *porteño* favorite—before the breast boom. Gómez had enhancement surgery last year. "I am very happy now," she says.

Whether it spreads joy or alarm, the body-shaping trend is a boom that is still growing, and Brazil is at the forefront. Home to one of the world's best and most well-known plastic surgeons, 1960s pio-

neer Ivo Pitanguy, Brazil has for decades been a mecca for international jet setters seeking a discreet nip and tuck. But then, according to the Brazilian Association of Plastic Surgeons, something more dramatic began to happen. Between 1996 and 1999, the number of plastic-surgery procedures in Brazil jumped 50%, to 300,000. And whereas in the U.S. about two-thirds of all plastic surgery is reconstructive, per-

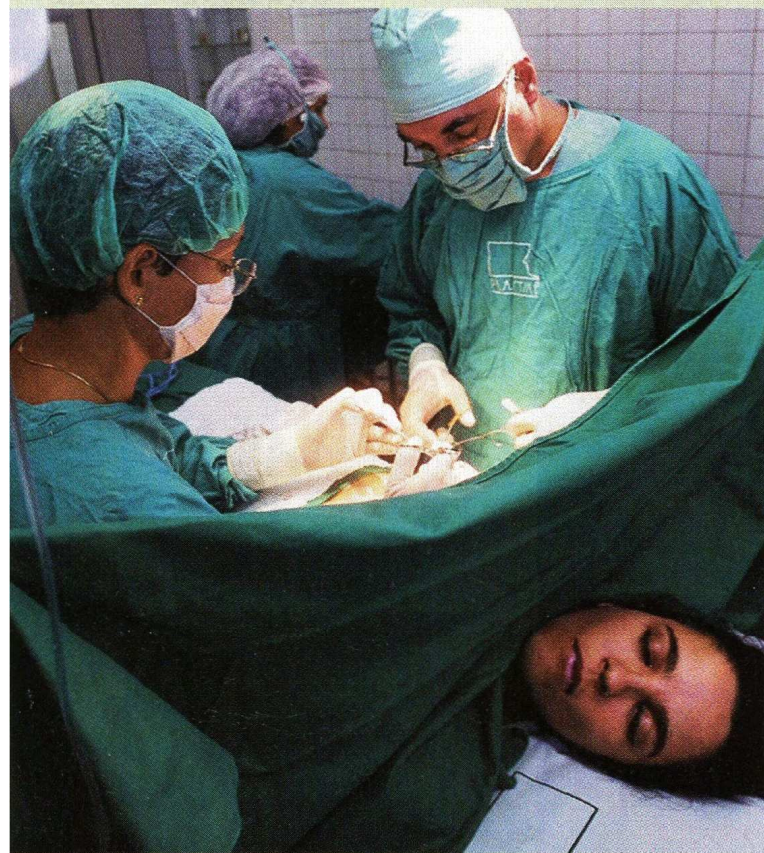


JOHN MAIER JR.—THE IMAGE WORKS FOR TIME (5)

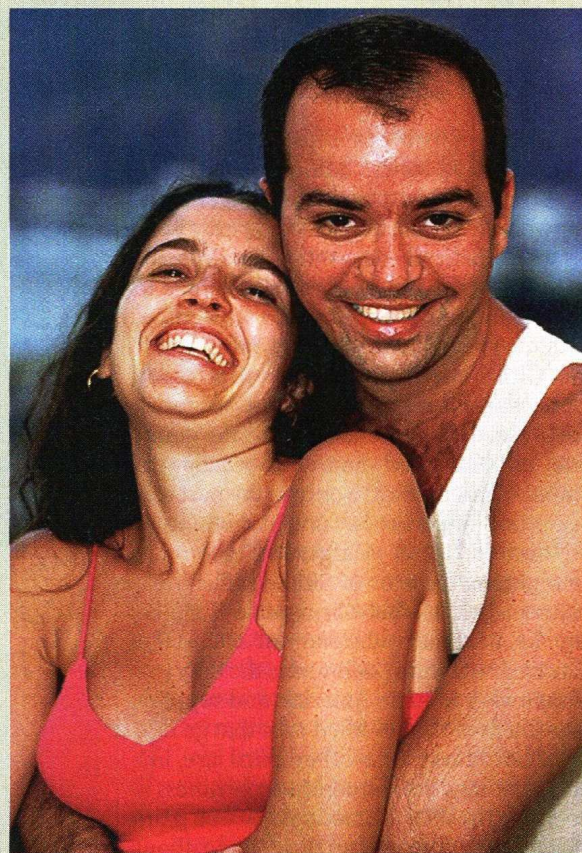
SPOUSAL SUPPORT Adriana and her husband Luis exchange a final kiss before she begins preparing to undergo surgery



CHEST RUB Adriana gets a wipe with topical antiseptic where cuts are to be made



SURGICAL SNOOZE Adriana sleeps while the medical team works



ENHANCED BLISS Adriana and Luis a few weeks later

How I Fulfilled My Dream

I think it was the media that inspired me to have my breasts enlarged. Ever since I was a teenager I liked the look of big breasts. But the risk involved put me off. In the past only Americans had big breasts. Now everyone is doing it. You see it everywhere, on cable TV and on the Internet. After seeing so many famous actresses doing it I decided to go ahead myself.

My sister-in-law helped convince me. She told me she'd never get a breast enlargement, but she did it before I did. She told me it felt good, like the implants were part of you. Another friend,

**Adriana Bringhamti, 30
Rio de Janeiro, Brazil**

Flavia, got her bust done and liposuction on the same day. I had been a bit worried about how it would hurt after the operation; people said it feels like a truck has run over you. But from the first day, Flavia said she didn't feel anything; she's happy. My husband Luis has been very supportive. He came to all the appointments with the doctor. Only my mom told me not to do it. Older people have a different way of seeing things.

Going into the operating room, I thought, "The first thing I'm going to do when I get out of the clinic is buy a tiny little bikini." You know

these Brazilian bikinis with just the tiny straps? I've always wanted to wear a bikini like that.

I was nervous and anxious, but once the anesthetic started to take effect I turned off. I remember speaking, but I can't remember what I said. After I came out of the operat-

ing room, my husband said I made some calls on my cell phone, but I can't remember that either. It took me an hour before I came to again properly.

When they took the bandages off a couple of weeks later, my skin was all battered and bruised. It took two months before that went away. Now I am quite pleased—it feels like I was born this way. The implants can be a little bit uncomfortable at times, and I sometimes get little pains like electric shocks, but that's just the sensitivity coming back. I like them.



THE IMPLANT at the ready for its insertion

formed on accident victims and other afflicted people, in Brazil a full 60% is aesthetic, devoted only to changing the body image.

The craze has been accompanied by a full-scale media blitz. New hair! New nose! New breasts! New tummy! New bottom! DON'T MISS CARLA PEREZ'S NEW BODY! screamed the cover of Brazilian *Playboy* last December. It was the second *Playboy*

cover to feature the singer-TV hostess, and the second in a row to celebrate the debut of a newly enhanced chest. (November's cover featured dancer Scheila Carvalho, who told a reporter that her new breasts were like "two new twin boys—I never get tired of looking at them.") On TV, people from superpopular talk-show host Xuxa Meneghel to Vera Fischer, a soap-opera siren since the 1970s, have talked openly

about the bodywork they have had done. A small forest of new magazines with names like *Plastic* and *Beauty*, devoted to the wonders of plastic surgery, now blare from newsstands. No wonder Juliana Borges, this year's Miss Brazil, seemed startled when her revelation that she had had 24 surgeries—from a tummy tuck and breast implants to mole removals—brought forth an international media storm last May. "All

LIFESTYLE

I did was improve a little bit," she explained to ABC News. "Many girls do it."

So true. But just as significantly, Brazilian women are usually choosing new bodies with a radically new shape. Traditionally, the ideal feminine figure was deemed to be the guitar-shaped, Sonia Braga outline, with curvy hips and a smaller bust. Call it the Girl from Ipanema look. But today more than a third of all aesthetic surgeries are breast enlargements, turning the guitar into an elongated hourglass—shades of Pamela Anderson. "It's only in the past two years that implants became something to be desired," says Margaret Figueiredo, commercial director of Silimed Silicone e Instrumental Medico Cirurgico e Hospitalar, the Brazilian subsidiary of a U.S. implant manufacturer. Silimed is the only implant maker in Latin America, and supplies two-thirds of the gel-filled orbs that go into Brazilian chests (the other third are imported items). For the company, business is booming. In 1999 Silimed sold 18,000 pairs of implants. It expected to produce about 22,000 in 2000, but demand was so high that the firm manufactured 28,000—a 55% increase—and projects a 40% increase in production this year.

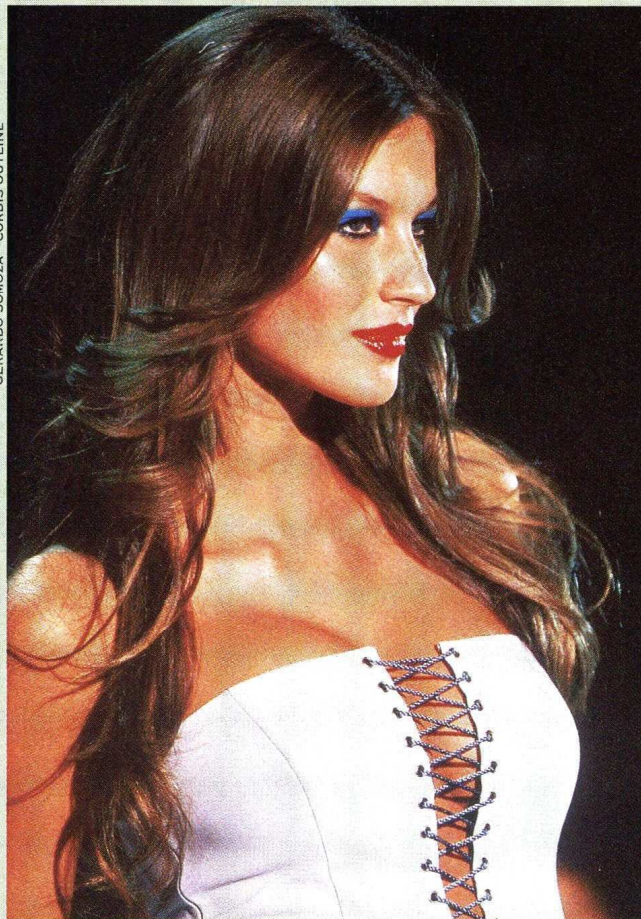
Figueiredo sets the beginning of the big-breast frenzy at November 1998, when the *New England Journal of Medicine* published a much heralded article on the health effects of silicone breast implants that declared them safe. One big inhibition to change was lifted. But it's hard to separate that development from another that swept Brazil the next year: the sudden, explosive fame achieved by Brazilian supermodel Gisele Bündchen.

Born and raised in the small town of Horizontina, about 400 km northwest of Porto Alegre, curvy Gisele did not fit the traditional-figure stereotype. Indeed, she

had initially been shunned even by U.S. fashion designers as being too top-heavy to wear their clothes to advantage. But within two years of coming to New York City, Gisele had changed the walkway aesthetics of the entire fashion world. After triumphant turns on the Manhattan, London, Milan and Paris catwalks in 1999, Gisele was the model of the moment—and curvy was in.

At home, Brazilians justifiably proud of Gisele's success took note and started dial-

ing for doctors. By March 2000, as Carnival season rolled around, change was already in motion. On the glittering floats of Rio's samba schools, the *Baywatch* babelicious look had won pride of place. Later nicknamed the "Silicone Carnival," the Rio samba-school parade that year made a star of Angela Bismarchi, 27, a plastic surgeon's wife who showed off her husband's extensive work by painting her enhanced breasts and liposuctioned tummy the colors of the Brazilian flag and wearing



GISELE ENVY Brazilian women decided they wanted her body



UPLIFTING Florencia Gómez

ANNALS OF PLASTIC SURGERY

A.D. 6

The Hindu medical chronicle *Susrata Samhita* offers a technique for nose reconstruction, the earliest historical mention of plastic surgery

1597

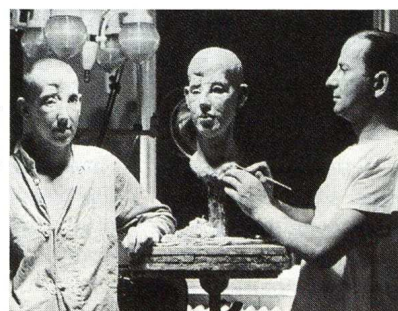
In the Middle Ages, the Roman Catholic Church banned plastic surgery as akin to sorcery. Renaissance surgeon Gasparo Tagliacozzi revived it in Italy when he pioneered a technique to replace missing nose tissue with skin from an upper-arm graft



CLENDENING LIBRARY, UNMC

1914

World War I, with all the disfiguring injuries caused by modern weapons, catapulted plastic surgery to a new realm of innovation, including new techniques for reconstructing faces missing portions of bone



CORBIS

1925

The first division of plastic surgery at a public hospital opened in New York City



z says her new breasts make her feel “womanly”



SHAPING UP Both Carvalho, top, and Perez show off new curves in Playboy

years, credits the growing popularity of 1990s “cosmetic medical” procedures like skin-clearing dermabrasion and doses of Botox (which erases wrinkles by temporarily paralyzing facial muscles responsible for frowning) for stimulating demand for body shaping. “Those procedures make plastic surgery seem less foreign, more everyday,” he says. “And once a patient is on the table for a chemical peel, she feels more comfortable asking me, ‘Doctor, what can I do about these jowls?’”

Discussion of “lunchtime quickies” at the clinic became staples in women’s magazines and brought an ever-younger group of women to the surgeons for a touch-up. “A few years ago, people had plastic surgery to remove either ugliness or old age. Now it is to remain young and vibrant,” says Raul López Infante, a well-known surgeon who practices at Mexico City’s plastic-surgery pinnacle, the Hospital Angeles del Pedregal.

These less invasive procedures made the business more attractive to medical practitioners looking for new streams of income. Legally, almost any medical specialist can train to perform many cosmetic procedures in just a few days, and patients usually pay for them in cash. One sign of the increased supply of clinics is a drop in prices for nips and tucks. In 1980, for example, an Argentine matron could expect to pay around \$30,000 for a face-lift—the cost of a small apartment in Buenos Aires. Today the same operation would cost \$4,000 or less, with about half going into the surgeon’s pocket after expenses. But even at these prices, plastic surgery brings in big bucks. Taking out an appendix, by contrast, carries a fee of only about \$300,

just a tiny pubic pastie. Mammary mia! The race to the clinic was on.

For all the exhibitionistic benefits, economic anxiety may play a role in the body-shaping trend as well. In the U.S., the number of minor plastic-surgery procedures done on middle-aged professionals went up during the recession of the early 1990s. In Latin America, where economies have been more volatile, photographs are commonly attached to résumés, and newspaper ads for everything from secretaries

to accountants demand a “good appearance.” Thus in uncertain times, honing one’s looks may seem even more necessary. “I had a face-lift in my 50s because my job requires that I look the part,” says the 70-year-old editor of a Mexican women’s magazine. “I don’t think anyone noticed.”

Inside the doctor’s office, changes were also under way that fed the craze. Dr. Pablo Hidalgo-Monroy, who has been practicing in Mexico City for more than 10

1960

Ivo Pitanguy founded the charity reconstructive and cosmetic surgery ward in Rio’s Hospital Geral da Santa Casa da Misericórdia



CORBIS BETMANN

1962

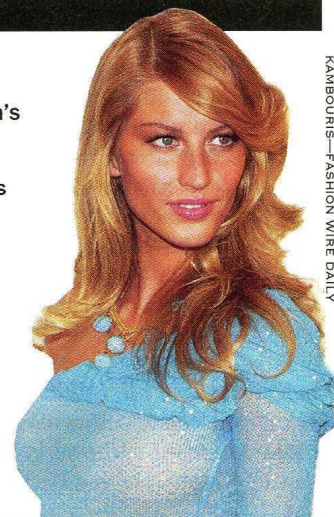
In Houston, silicone, a newly popular surgical tool, is used in the first breast implants

1977

Modern liposuction is developed in Europe. It is introduced to the U.S. in 1982, ushering in an era of quicker, less invasive cosmetic medical procedures like laser skin resurfacing, chemical peels and collagen treatments

1999

Gisele Bündchen’s success on the world’s catwalks inspires Brazilian girls to wear their hair wavy and increase their bustline



KAMBOURIS—FASHION WIRE DAILY

and the surgeon might wait months before getting paid by the patient's insurance company.

Of course, \$4,000 is still a hefty price for the majority of Latin Americans to pay. So some doctors have found ways to lower the cost even more. In San Juan de Miraflores, a low-income district of Lima, busy Pachacutec Avenue is lined with the offices of low-cost doctors and dentists who do plastic-surgery procedures. And then there is the Miami Center, a clinic offering liposuction for \$500 and nose jobs for \$120. "The price is negotiable, and we have plans for people to pay in monthly installments," says Elvira Moreno, a medical assistant at the center. She says the no-frills clinic sees about 30 patients a month, mostly for rhinoplasty and breast enlargements.

Dr. Julio Daniel Kirschbaum, president of the Plastic, Reconstructive and Cosmetic Surgery Society of Peru, says this low-cost care is not necessarily of lower quality. "If you work out of San Juan de Miraflores, you have a much lower overhead than in other areas," says Kirschbaum, who runs an exclusive surgery center in the San Borja district of Lima. "Many people confuse price with quality, and one really has little to do with the other." Rich patrons have figured that out. In Rio, where Pitanguy—still practicing at 74—and his students offer at-cost or free cosmetic surgery at the Hospital Geral da Santa Casa da Misericórdia, medical personnel will occasionally discover a middle-class patient hiding out in the crowd, hoping to score good work cheap.

For the wealthier patient, modern plastic surgery offers safer, less invasive procedures that give better results with less obvious scarring. Doctors can now lift a patient's buttocks—even place implants—and leave a mark so small that it will be well covered by any *tanga*. Ten years ago, getting breast implants left a patient on her back for weeks. Now the surgery requires only seven to 14 days of recovery before stitches are removed. And Latin American doctors have been in the forefront of the surgical advances. "Many techniques you see



CUT RATE Doctor's offices offering affordable plastic surgery line the edge of a Lima shantytown

in the U.S., especially in reducing the amount of scarring resulting from these operations, originally came from Latin America," says Dr. Thomas Biggs, a Houston plastic surgeon and president-elect of

the International Society of Aesthetic Plastic Surgery.

To cite just one example, take the technique known as *yensie*, which uses a patient's muscles to lift breasts without the

Building My Self-Esteem

Just because you're poor does not mean that you can't look good. I was born in Cajamarca in northern Peru to a family that, though poor, loves nature and beauty. When I was 9, I was a national child dancing champion. I started competing again when I was 16, but the other dancers and kids at school made fun of me because my nose was awful. I had this big bump right in the middle. I am not ugly, as you can see, and I think all women have a special kind of beauty, so I decided that I would have it fixed when I got enough money. It is something I dreamed about.

I finally decided to do it in 1993, when I was 27. My mother encouraged me, telling me that I needed to do this to have more confidence. She helped me emotionally and

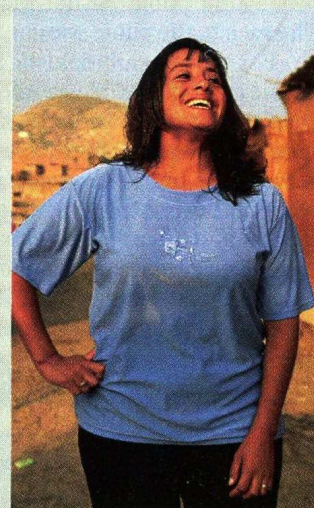
financially to have the operation. It cost about 300 nuevo soles, or about \$120.

I found the doctor through a newspaper. At first I was afraid, because I had studied a bit of medicine and knew there were risks. But I wanted to feel better about myself. I met the doctor in his clinic downtown. He showed me the operations he had done, and many of the noses were a lot uglier than mine. So I went ahead with the operation.

It didn't take long. I was asleep and don't remember much. Afterward it was uncomfortable but did not hurt. Now I feel much better about myself. It's like having a new personality. I even started teaching dance and competing again.

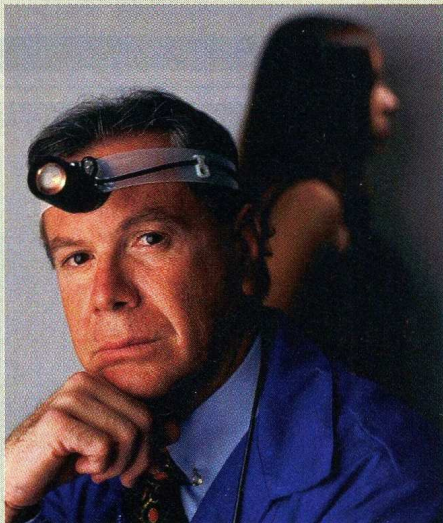
If I had to rank everything I've ever done, having my nose

**Fanny Ruiz, 35
Lima, Peru**



"It was worth every penny"

fixed is one of the best decisions I have made. I recommend plastic surgery to all my friends who complain about their looks. It was worth every penny. Now I am thinking about getting rid of the wrinkles around my eyes and getting rid of what's on my hips.



INFANTE The doctor sees aesthetic surgery as part of a beauty routine

“Before, people had surgery to remove ugliness. Now it is to stay young and vibrant.”

use of implants. Dr. Manuel Enrique Chacón, President of the Costa Rican Association of Plastic Surgery, invented it. At the annual convention last May of the American Society for Aesthetic Plastic Surgery,

the presenters.) “I think they are maybe more creative than those in the U.S. or in Europe,” says Saltz. “They are less restrained by fear of lawsuits.”

But the same freedom that can lead to creativity on the part of a good surgeon can be deadly in the hands of a bad one. In Latin America, a patient often has little redress for faulty or substandard work, and professional supervision is rare. In Argentina’s health ministry, health-resources inspection director Dr. Jorge Antoniak is frustrated at having only 26 full-time health inspectors to monitor the entire medical industry, including an estimated 1,300 surgeons—many of them originally trained in other specialties—who perform cosmetic operations. “Doctors do not require any special title or authorization to practice plastic surgery in Argentina,” he says. “Any licensed doctor can legally carry it out.”

Antoniak is also frustrated by a lack of concern for malpractice and fraud on the part of Argentina’s legal system. “At one point my office tried to clamp down on a number of plastic-surgery clinics advertising impossible results,” he says. “We were unable to obtain a single conviction from the courts.” This despite high-profile cases like that of Argentine model Raquel Mancini, who slipped into a coma during liposuction at an unlicensed clinic in 1996 and, after she recovered, never fully regained her career.

The problem is well recognized elsewhere in the region. Mexico, where 1,038 physicians are certified to perform plastic surgery, has an extensive system of regulation. Yet problems still exist, says Dr. Héctor Arámbula, president of the Mexican Council of Plastic, Aesthetic and Reconstructive Surgery: “Mainly they come from having other specialists trying to do plastic surgery—gynecologists, ear, nose and throat specialists, even dentists and dermatologists.” The problems can be even more severe in the continent’s backstreet beauty parlors where crude surgery is sometimes practiced. In Lima in 1999 a mother and daughter died from having silicone gel injected directly into their breasts. A hairdresser was convicted of homicide for performing the procedures.

Those well-publicized tragedies haven’t deterred consumers a bit. A recent international poll found that the biggest fear about plastic surgery in the U.S. was that something would go mortally wrong in the operating room, while Latin Americans were most afraid they wouldn’t get good-looking results. Despite the concerns of sociologist Briceno-Leon, no political party has taken up the antisurgery cause, and there is no widespread debate about the diversion of scarce medical talent from the basic health requirements of a region in urgent need of more and better care.

For the most part, people are content to sit back and enjoy the results. Even surgeons like Brazil’s Celia Accursio see all the slicing, pulling, tucking and stitching as “simply fashion. Today, getting implants is banal. It’s as if women are going to the hairdresser and getting a different hairstyle.” Right now the style is *très, très* bouffant. —Reported by

Lucien Chauvin/Lima, Andrew Downie/Rio de Janeiro, Uki Goñi/Buenos Aires, Christina Hoag/Caracas and Dolly Mascareñas/Mexico City

How to Make Sure You End Up with Dr. Right

1) Gather opinions. Talk to friends or family who have had plastic surgery, and ask them to recommend doctors. If possible, try to speak to people who have had the same procedure you are considering.

2) Check accreditation. You will want a doctor who belongs to international organizations, like the International Society of Aesthetic Plastic Surgery, as well as national and regional ones. Mexico’s national association, for example, demands at least 12 years of training for certification.

3) Ask all the tough questions. Schedule a meeting with your top candidates and talk over your procedure. It’ll cost you a consultation fee

but could save you a lot of grief. Go over everything from payment options to emergency procedures should anything go wrong. Make your goals very clear.

4) Trust your instincts. Use the interview opportunity to see which doctor makes you feel most comfortable and listens to you. That surgeon will probably be better than one with his own ideas of what you need.

5) Duck easy pitches. If it seems too good to be true, it probably is. No surgery can ever be 100% guaranteed free of complications. If a surgeon tries to brush away possible risks or promises you perfect results, think hard before signing up.