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ABOUT

FACE

Scalpel or needle? Dermatologist or surgeon? Now, or maybe just a little bit later? After years of waffling, Dodie Kazanjian finally musters the courage to turn back the clock.

Here I go again. I'm fed up with the way I look. The siren calls of face work sing out to me from every mirror. Should I or shouldn't I? And if I do, should I fill or lift? Fifteen years ago, I visited seven leading plastic surgeons; each one told me I should do something different, and the seventh said, "If you were my sister, I'd tell you to go home," so that's what I did. Six years ago, investigating the dizzying range of dermatological alternatives to the knife—injectable fillers, laser and radio-frequency treatments, Botox, and the ever-proliferating army of miracle skin creams—I overcame my fear of needles long enough to try injections. They hurt like hell, the results were disappointing, and I never went back. But now I am back.

Last spring, during a ladies' lunch for a friend's book, it hit me that nobody would have known I was the youngest one at the table. None of the others looked as though they'd had face work, but they all looked radiant. What was her secret, I wondered, and hers and hers? *I'll have what she's having.* So, of course, I started asking them. One of them whispered, "Joel Kassimir," a dermatologist whose name was brand-new to me. Another discreetly revealed that she went to the young plastic surgeon David Rosenberg—I would never have guessed that she'd done it. A third had just come from Aida Bicaaj, whose "breathtakingly pricey" facial treatments can make you look 28—for a day and a night.

After that lunch, I talked with a lot of other women whose looks I envied. Marie-Josée Kravis, MoMA's president and one of the hemisphere's great beauties, told me she skips rope every day. Evelyn Lauder alternates her creams—one week, it's her company's Advanced Night Repair (she uses it day and night); the next week, Crème de la Mer. The filmmaker Anna Condo, whom *Esquire* recently named the sexiest Armenian

woman in the world, swears by leg and foot massages, and Rachel Lehmann, of the Lehmann Maupin Gallery, has banished caffeine in favor of hot water with lemon—a concoction Richard Avedon, that connoisseur of female beauty, used to call "a canary." The artist Sally Mann wouldn't dream of doing anything to her face, but, she tells me, "I did buy a black Porsche recently, and old women don't do that."

OK, OK, but what I want won't come from skipping rope or buying a new sports car. Besides, if I'm ever going to have face surgery, it's now or never. "Once you hit 60, the scalpel won't do it—you'll get what you fear the most, that pulled look," Pat Wexler, M.D., tells me. Pat Wexler is my Virgil, the all-knowing dermatologist I turn to for honest advice on matters of the face. "There's a saying that if you do a face-lift in your 40s, you're thrilled," she says. "If you do it in your 50s, you say, 'Why did I wait?,' and if you do it in your 60s, you say, 'Why did I bother?' Do it when you're young and healthy." I am dangerously close to 60, and my biological clock is ticking.

Years ago, Pat told me I shouldn't have a face-lift—that my face was too small, and I'd look like Beetlejuice. Now she thinks I should have surgery and "maintain" with injections every six to eight months. "The goal," she says, "is to lift and fill."

Word of mouth is what you follow in this business, so I go first to see David Rosenberg, M.D., whose name kept coming up as I asked around. Also, Pat gave him very high marks. He's a youthful-looking 43, not tall, but trim and energetic and very sure of his ability to "make each patient look as pretty as possible, without a sign of surgery." Rosenberg only does faces. He uses the deep-plane technique, which goes under the muscle, and he tells me that he's gone further with this method than anyone else. "It's really my operation. No one is doing exactly what I do. This is my baby."

On the page, he sounds a bit outrageous, and he knows it. But Rosenberg's confidence is *(continued on page 144)*

ABOUT FACE

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infectious, and I'm enthralled by his saying that I won't have to have any follow-up needlework. "Nothing I do should require maintenance," he says.

Jessica Lattman, M.D., his wife, an oculoplastic surgeon who shares the office with him, comes in. They discuss whether or not my surgery should include an endoscopic brow lift. "A lot of people will say you don't need a brow lift," he says. "You know what? I'm going to do it," he continues, making up his mind. "I want to do the brow, too. I'm going to make you amazing. As long as you say, 'Dave, I can handle it. I'm a tough chick.'"

My next appointment, that same afternoon, is with Haideh Hirmand, M.D., a tall and beautiful Harvard-educated plastic surgeon whom I've interviewed before. "Why do you want to do this?" she asks. "Why now?" We talk about that, and she tells me that my goal should not be to look the way I did at 30, because "it will only look like you *want* to look like that. You have a small face, and you've lost a lot of volume. If you did any tightening, it would have to be very minimal, and in conjunction with filler." Hirmand does not do deep-plane surgery. She uses the classic SMAS technique, the face- and neck lift that tightens the subcutaneous layer of muscles without cutting into them. "There's never been a shred of real proof that deep-plane face-lifting gives any better or longer-lasting results," she says. "To me, the benefits of going into the nerve layer don't justify the risks." When I bring up the question of a brow lift, she says I don't need it. "In fact, I really prohibit you from doing a brow lift. I'm a surgeon, and I'm saying you don't need surgery. Just do some fillers. I know you don't like needles, but you do need volume."

Joel Kassimir, M.D., who trained with the famous Norman Orentreich, is a very busy dermatologist with original ideas on almost everything. When I finally get in to see him, late one Saturday afternoon—after weeks of trying—he's just finished an eight-hour hair-transplant procedure. Talking a blue streak, he tells me that he's working on a process to eliminate baldness, using stem cells found in the hair shaft. He's also working on a time-release Botox using nanotechnology, whose effects he believes would last twice as long as the original. Then he's on to the Harvard plastic surgeon Joel Feldman, whose pioneering method for doing neck lifts combined with fillers can make facial surgery unnecessary.

But what about me? "Do a mid-facial with a SMAS, a vertical lift," says Kassimir, using the medical shorthand in which I'm becoming more and more fluent. "Nothing major, just a conservative tweak." A year after that, he says, he would use Juvéderm, a hyaluronic acid-based filler, if necessary, to erase my "flying buttresses" and crevices, "like spackling." I tell him about my needle phobia. He promises, with gentle and convincing assurance, that this won't be a problem. "There's a new numbing cream, which you put on half an hour before you come in. We reapply it when you get here and put fabric tape over it so it gets absorbed better,

and then we chill the skin with an ice pack. I use baby needles, 30-gauge, and I also put an anesthetic in the Juvéderm. You'll feel nothing." And the Juvéderm, he tells me, will last at least a year.

Time passes. I think about it, worry about it, talk to people about it—including my husband, who's a confirmed believer that every face-lift is a crime against nature. My old friend Adele Chatfield-Taylor, who feels the same way, surprises me by saying, "You've never liked your face, and surgery isn't going to change that." Another friend, who gave herself a face-lift as a fiftieth-birthday present, says, "Do it! Do it! Do it!" And at this point, I surprise myself. I decide to go with Dr. Rosenberg. My main incentive is that the deed will be done and finished by an acknowledged master, with no maintenance, no needles, and no looking back. I'll be a tough chick—even though I'm not. I schedule the operation (without the brow lift), go through all the preliminary tests, including the dreaded blood test, book the special nurses and a hotel room for two nights after the surgery. And perhaps most important, a trip to Marni to get the obligatory pair of extra-large dark glasses.

A week beforehand, while having lunch with the artist Rachel Feinstein, I can't help asking what she thinks about plastic surgery. "It's opening up a can of worms," she says. "I remember in biology class, they talked about using chemicals to eradicate mosquitoes in a pond. The chemicals killed the mosquitoes, everyone was happy, but then all the frogs died that used to eat the mosquitoes. My point is, you open up another problem that you didn't expect." Another artist friend, who is a little older than I am and looks great, tells me that she goes to registered nurse Robin Hillary at plastic surgeon Craig Foster, M.D.'s, office every three months for Restylane injections, and that they really don't hurt. My stepdaughter-in-law Dana asks me why I'm having the operation in May. "You won't be able to swim all summer," she says. "January is the biggest waste of a month. Why not do it then?" My resolve is draining away. Tough chick, my foot.

Sheepishly, I call Dr. Rosenberg to cancel, and mumble something about January. He couldn't be nicer.

Baby steps sound better and better to me now. I end up in a room at Dr. Kassimir's Upper East Side office, nervously eyeing the neatly organized array of syringes. I can feel the numbing cream doing its job. After fifteen anxious minutes, Kassimir breezes in with two young female assistants, one of whom applies the ice packs. "I'm going to go very easy on you," he says, holding a 30-gauge needle. "This is Botox, just half a dose. Close your eyes and relax. Don't try to second-guess me. It's not going to be so bad. . . . OK. That's one." Amazingly, I don't even feel the needle going into "the elevens," those two vertical lines between my eyebrows. "You did it?" I ask, my eyes still tight shut. And so it goes. There are three more needles: another Botox and two shots of CosmoDerm, a collagen-based filler. He talks as he works, touching on subjects as varied as the BP oil spill and the serve in tennis—"make sure to hold the ball on the tips of your fingers, not in your palm," he says. "That's the best tip you're going to get today." It's an extraordinary experience. All of a sudden, I realize I can do this.

One evening a couple of weeks later, I'm back in the chair, getting tiny shots of Juvéderm in my nasolabial folds and chin. "Your lips are still good," Kassimir says. "I'm not touching them. Lips shouldn't enter the room before you do." One syringe-full gets the whole job done. In a state of near euphoria, I float home and present the results to my husband, who's so relieved about my not having The Operation that he can't possibly be negative.

"It looks really good," he says, "but I miss the wrinkles."

I have a great summer, swimming and playing tennis nearly every day. I stop hating mirrors. I've adopted Evelyn Lauder's technique of alternating creams. I'm using a new Swiss face cream, La Peau, the latest Sensai products from Kanebo, and, of course, La Mer, all of which make my skin, and me, feel amazing—not 30, but not 50, either. There will be more needles in my life, I know now, but as for January, I'll think about that tomorrow. □