

Interviews with the Experts
'Inside Cosmetic Surgery'
2009 and Beyond

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Introduction

World renowned Cosmetic Surgery Expert, Dr Danny Lanzer is our featured guest expert in this program of *Interviews with the Experts*.

Dr Lanzer takes us behind the curtain and inside his own private practise to give us an exclusive procedure-by-procedure account of todays modern Cosmetic Surgery techniques.

Inside Cosmetic Surgery reveals the Top 10 Future Trends already taking shape in Cosmetic Surgery today and discusses how these emerging trends will influence the choices and decisions of tomorrows Cosmetic Surgery patient.

Interview with the Experts begins:

Michael Searles (MS): Cosmetic Surgery expert Dr Danny Lanzer - thanks for joining us and welcome!

Dr Lanzer (DrL): Thank you very much.

MS: You're known all over Australia and other parts of the world and have been the Cosmetic Surgery Specialist called upon regularly by television, women's magazine media. Can you give us just a bit of background about how you got involved in Cosmetic Surgery and what led you to become such an expert?

DrL: Well - I'm a Specialist Dermatologist and interestingly over the last twenty years a lot of the big break throughs in cosmetic procedures and Cosmetic Surgery were developed by Dermatologists.

There has been a definite demand by the public to have less invasive procedures and Dermatologists discovered many treatments to do with lasers and liposculpture and that is how I got into it and got interested.

It was actually quite interesting going back in 1992 I was organising a conference on a brand new procedure at that time which was called Tumescant Liposculpture - and the television programs got a hold of it some how and they asked me to come on and present it - and they were so happy with the all the shows and the interest of the public that they kept on inviting me back.

One thing lead to the other - in those days it started with 'The Midday Show'(Australian national daytime TV) and it also went on to many of the news items and news type programs like 'Today Tonight' and 'A Current Affair' (Australian national TV - current affairs programs) and that's how we sort of how got involved with the media.

WHAT ARE THE COMMON QUESTIONS?

MS: I see. So Dr Lanzer what would be some of the more common questions that people might have today about Cosmetic Surgery?

DrL: Well - people come for a number of different things.

You know - they come for their body and they come for their face.

In particular when people come for their facial features - there's probably four things they often bring up:

1. They might have seen actually a photo of themselves and they suddenly they are thinking 'Gosh - I dont like the way I'm looking' or they think they dont look the same way they did ten or twenty years ago - they're starting to age -
2. The second thing is that sometimes they start to see features on their skin that reminds them of their parents - particularly they might come in with a droopy neck - or - saggy eyes -
3. The third thing is a lot of patients do come in because they actually just want to look younger and fresher - so that they can continue in the work force for a longer period - they're not really looking to be necessarily different or more beautiful - they just want to be looking a bit more healthy and younger-
4. And the last common thing I see is that there are certain changes on the face which we will discuss later which will make patients look a little bit tired and so often their friends will say to them 'why are you looking tired'. They are not really but that sort of gets to them. And then with the body of course theres really two main groups -
 - A. There are those people who have just got localised unwanted fat in different areas whether its the 'fat bags' - whether its the 'saddle bags' - whether it's the so called 'love handles' or breasts and they just want those areas removed and thats become one of the most popular treatments -

B. And the other one is being over weight - and theres an epidemic of people over weight - and many different medical and surgical ways to try and reduce weight and to help people get a kick start and become thinner . . .

WHO IS BEST SUITED TO COSMETIC SURGERY?

MS: . . . and to become thinner. So who then is best suited Dr Lanzer to receive Cosmetic Surgery treatment?

DrL: Well - its a very interesting question that - because Cosmetic Surgery is really done on all age groups - on all patients - on all different types of people.

I think one of the most interesting things, certainly in Australia is that the majority of people having Cosmetic Surgery are not the so called rich-and-famous.

Its the ordinary Australians who are working and who are busy and they're sometimes borrowing money or sometimes using money they might have used to go on a holiday and they just want to invest in themselves much in the same way as they buy some clothes and invest in themselves - so, many people are having Cosemtic Surgery.

It starts in the teenage years - most doctors are not comfortable about doing Cosmetic Surgery in the teenage years unless theres a significant medical component as well - but definitely in the twenties people are having things for shape and body looks and the thirties, forties and fifties - you know - for looks - and then - I have some patients in their eighties.

I know there was a patient who became very, very famous who had Cosmetic Surgery in her mid seventies and still had Cosmetic Surgery right into her eighties and the world became fascinated with her - she was written up in many magazines in Melbourne (Australia) and she was also written up in Germany and got onto television in Japan so people were fascinated that older people are also having Cosmetic Surgery - and I think thats a very valid thing - that age is not the driving factor - its how you feel and what bothers you and if you are otherwise well then people still want to look healthier even at a later age.

TUMESCENT LIPOSUCTION?

MS: Excellent, good. Dr Lanzer - what grabbed my attention recently as I looked across your website but also some of the recent media here in Australia that has been focussing on the future trends of Cosmetic Surgery.

You mention that you have identified a number of trends that are already starting to take shape - one of those is Tumescent Liposuction. Can you tell us a bit more about that?

DrL: Yes. Well - liposuction has been around for many, many years but a big breakthrough occurred around 1990 by an American Dermatologist. His name was Jeffrey Klein and he discovered that if you put large volumes of a very dilute local anaesthetic into the fat it has a number of significant effects that make liposculpture so safe.

First of all it can be done while the patient is awake and the patient is talking and you fill up the areas because when you put the fluid in the fat there is never a need for transfusions or drips - nobody ever bleeds - the fluid stops the bleeding - and you can do many different areas at the one time - so you can really resculpture the whole body.

Now since that technique came out I've actually done ten thousand of that procedure - and its a wonderful procedure and you can treat just localised areas like we mentioned before a person might just have a big stomach or might just have a bulge of fat on their hips or on their outer thighs or you can do what I call the 'Full Body Liposculpture' where we do the back, the hips, the outer thighs, the inner thighs, the knees, the calves the stomach, the arms and the neck - so - it can all be done in one go - and its very safe.

I dont believe theres actually been a death in the world when it has been done by a Dermatologist under local anaesthetic.

Now some people prefer to have it while they are asleep - thats another way we can go - and there have been developments - particularly about ten years ago once we realised that it was so safe we started to use it on patients who were actually over weight - and thats been termed 'Mega Liposuction'. And in that technique we might remove ten or fifteen litres of fat usually in a couple of procedures and we'll get the patient to work on their lifestyle, dieting and exercise and hopefully if they do the right things and if we remove many litres of fat they will get a whole change in their whole shape and their whole health.

BREAST REDUCTION? (MEN AND WOMEN)

MS: Now, also while we are talking about 'reduction' I noticed that you see a trend in Breast Reduction by liposuction. Tell us more about that.

DrL: Yes - well breasts are an issue both for men and women they just might be different issues.

In women - many women suffer from large heavy breasts - and its a serious medical problem - they really describe it to me almost like they're carrying around two bricks - and you will see a certain stance that they have where their shoulders are bulging forward - the bras pressing in - they will have rashes under the breasts - and they will get a lot of pain and they will be seeing the chiropractor and physiotherapist very often.

Now, until the last ten years all breast reductions were done principally by surgery which is called Mammoplasty Surgery - and that involves cutting all around the nipple and cutting down under the nipple.

Now the chest is not a very good place of healing and so all patients end up with scarring and you have to be careful that patients dont bleed after that procedure because then you could end up with the need for a graft.

Now in the year 2000 we had the idea 'Well, lets apply our Tumescant Technique' to the breasts as well. Now we were not sure just how good it would be and just what sort of skin contraction there would be but fortunately enough we saw very quickly that the breasts in a woman responds exactly the same way as doing liposuction elsewhere - and they get an immediate lightening of the weight.

They get a contraction and elevation so that it doesnt end up as a 'droop' as one might think and they become much smaller. And we can remove somewhere between 400 - 500 mls of fat; up to 2 litres of fat from each breast so it can be massive.

You can get something like a size G (cup) down to a C (cup) often its a DD down to a C and again that is done at all ages - I've done a twelve year old girl who really was plagued by it and her whole family had it and we have done it in the '70s and the '80s and of course we have done it all through different ages.

My initial study was on 250 patients and I must say that the thing that struck me was that nearly every single patient said 'all that weight and pain went the next day'. I would have thought maybe it would have taken a few months for the back pain and that goes but they often get an immediate relief and that was really rewarding.

MS: I imagine it would be rewarding . . .

DrL: . . . another thing which I did mention is the men.

The men have something called, which has been termed 'male boobs' and not a very nice term but a lot of men have prominent breasts tissue that makes them look like females.

And the classic story is that they wont go to the beach - they wont take off their t-shirt - and you will have people that have been like that for forty or fifty years and they never took off their t-shirt.

We recently were featured on national television with a gentlemen who was very, very brave - and he worked at the market and he didnt mind talking about his story. He said exactly that - that all his life he never went out - anyway, he took off his shirt and he showed the whole of Australia and we did the procedure which was a little sculpturing - again - but sometimes there is a small little cut under the nipple to get that breast tissue out and once they're flat they're are also very happy.

It's interesting how that runs in families - often you will see father and son - they have got the same problem.

MS: Men and women equally do you see so, Dr Lanzer?

DrL: Say that one more time . . . sorry.

MS: You mentioned men for breast reduction via liposuction - as well as women. Would you be seeing an increase in the number of men?

DrL: Yes, that is absolutley true Michael.

We've seen a dramatic increase in the number of men presenting now for breast reduction and in fact the number of men presenting for just the Cosmetic Surgery.

I think if I looked back twenty years ago men might have only made up 1 or 2% of the procedures and today that would be 20 - 25%.

So probably the most common procedure that men come for is for the 'large breasts' but a lot of them have the fat on the flanks that they don't like and a lot of them have a heaviness around the eyes which we will talk about and a lot of them just come for a bit of facial rejuvenation as well.

SUTURE LIFT?

MS: We are talking to Cosmetic Surgery Expert Dr Danny Lanzer in the Interviews with the Experts series and Dr Lanzer tell us more about the future of Suture Lift?

DrL: Suture Lift is an interesting procedure - and that's been around for a little while - but really got a lot of interest over the last five years.

I actually visited America in - about five years ago and spoke at the American Academy of Cosmetic Surgery and they hadn't actually heard of this procedure and they were floored with it - they were amazed.

I remember I got inundated and the beauty of the procedure is that there's no cutting of the skin - no removal of the skin - so you get patients who really have drooping of their faces - the skin is drooping down but they don't want a face lift - they don't want a face lift

A - because they are scared they will look a bit 'pulled' and different and

B - because they are going to have scars around their ear and

C - because there are risks involved and you've got quite a bit of down time because you've got the swelling and the recovery.

With the suture lift you're just taking these thin nylon sutures and you are just stitching the skin - nothing deep - only the skin and you are lifting the skin from in front of the ear up to the ear and you are putting the sutures into the ear cartilage so that the cartilage is holding the face skin up - and of course the skin is attached to the fascia which is attached to the muscle so that everything lifts up.

Its a procedure that takes about one hour under a local anaesthetic and patients can go back to work the next day.

One of the magazines in Australia - the Women's Weekly (Australian womens magazine - published monthly) termed it 'the lunch-time lift'. I dont know if I like to call Cosmetic Surgery in such terms but thats what sort of took off as a terminology.

I often recommend that at the same time patients have a little sculpturing of their neck because if you do a liposuction and that sort of lifts up and corrects that angle at the same time it makes the suture lifts last for a much longer time.

People have to be aware that the suture lift does not last forever and it does relax back and people would need to come in for maintenance every few years to have some extra stitches if they want the results to last.

SAGGY NECKS?

MS: Excuse me for putting it this way but 'Saggy Necks' - is that something that your suture lift technology can address as well?

DrL: Yes. Well 'Saggy Necks' is the part thats done with the liposuction and the suture lift together and you know its a funny terminology. I think they call it the 'turkey neck' but its quite an interesting thing.

I think the necks are in my opinion a very rewarding area for patients to treat when it comes to Cosmetic Surgery because the first thing that happens in that area is that patients lose that normal sharp angle or that 90 degree curvature of the chin around to the neck - under the neck and down onto the neck and that shape is of course, that very acute shape is what makes someone look young and trim.

If you go look at the twenty year olds they have all got that very sharp angle. As you start to age you develop fat and looseness there and if you can correct that area it an make a significant difference to the patients appearance and it can be done just with the liposuction it can be done with the suture lift and of course if its very bad they might need a face lift or neck lift.

AROUND THE EYES?

MS: Now here's something I've been really waiting to ask you about because its personal - its the eyes - 'puffy eyes' and also treatment of the eyelids. Tell us about that.

DrL: Yes. Well its interesting that the eyes are a very important feature when it comes to Cosmetic Surgery because really thats what you see in a person. You are looking at a person and thats what you look at the first thing.

Its amazing how many patients come in and tell me exactly the same words -

"I'm sick of my friends telling me 'You look tired' - and I'm not tired, I've just had a good nights sleep" -

so the changes around the eyes give the impression of tiredness. What are those changes?

1. in a female you like to have a nice upper lid platform - so that you can put mascara and make up on - if the skin of the upper lid droops down there may not be any area to put make-up on at all and that makes the eye look tired
2. the second thing which is going to be the next question was about the so called 'lower lid fat bags'.

Fat accumulates on the lower lid - because of that convex fat, patients get a shadow and the shadow makes people look tired so a ring, a ring shadow - now the way we treat this is also with laser.

A Dermatologist discovered this technique in about 1994 and the Dermatologists in Melbourne and in Australia held a conference actually to teach people and the lasers took off in a big way.

The big advantage of using a laser such as the CO2 laser is that it seals the blood vessel whilst it cuts so for most people there's no bleeding which means you (the surgeon) can see better and you can be more accurate and be more precise.

The upper skin is basically removed with a very fine cut of the laser right in the natural crease line so that you hardly ever see a scar - and the stitches are placed there and healing occurs in about ten days.

Now its interesting the goal in a female and a male are a little bit different.

In the male you dont necessarily want a big upper eye lid because with a male its a bit normal to have the brow a little bit lower but still of course in many men the skin comes right down and it presses on the eye lashes and it bothers the vision.

It makes you look extremely tired - and removing that can certainly make a person look so much more refreshed and its a procedure that only takes about an hour.

Usually done while patients are asleep - and patients with the upper lid would normally need about ten days to recover if you are taking the fat bags out they can recover in one or two days.

One of things we often do together with the eyes is whats called Laser Resurfacing. Lasers went through a number of stages in the early 1990's.

Initially a CO2 laser and the one thats most popular is one thats called the Erbium Laser. Now Erbium is a laser light which attracts, which is picked up by the water in the skin.

You should know interestingly a lot of this laser work of course was initially developed for the so called laser warfare and so the warfare ended up being directed to the skin and not so much between countries, thank God.

Anyway, the laser was used either just around the eyes for the fine wrinkles or its used all over the face.

Its very, very effective for these fine wrinkles and ridges that occur around the mouth - the up-and-down vertical lines - the 'smokers lines' because it can make that area almost perfectly smooth again.

I have used it a lot for people with ageing and sun spots and pre-cancers because once you remove the outer layer you get a whole fresh new layer - so its like starting again - and of course this time around they have got to be much more careful in the sun and smoking and for most patients it will last them for their whole life.

The procedure is usually done under light anaesthesia again - and their skin heals in just a week and then they can be back at work again.

WRINKLES? (MEN AND WOMEN)

MS: That would please them. Dr lanzer, Cosmetic Surgery Expert - the future trends in Cosmetic Surgery - the trends that are taking shape and that you are already seeing in Wrinkle Treatments. Can you tell our listeners more about that?

DrL: Yes, certainly. The trends are an interesting one.

If you go back twenty years ago the way to treat wrinkles was with chemical peels and face lifts.

One of the problems with chemical peels, the deep ones is that they leave that white mark and made the face look very pale and people didn't like that look and the face lift is a bit too obvious for some patients.

It was during the '90s that a lot of lasers developed - in fact I wrote a weekly column for New Idea magazine (Australia wide women's interest magazine - published weekly.)

We were always concentrating on the different types of lasers that were developing because they were coming out very quickly - so basically if you looked at wrinkles - there are a number of ways you can go.

There's the Laser Resurfacing which we mentioned - the Erbium **m to sm** smooth the skin down.

Now then there are whole lot of other lasers that are not as invasive that can also work at smoothing, tightening and rejuvenating.

One of the most common ones today is call Fraxel.

Fraxel works by making thousands of tiny little holes into the collagen through the outside skin so when you finish the patient looks like they have these tiny pin prick holes but they are laser holes.

The laser injury through the collagen sets off a healing process so the body gets tricked into starting a whole collagen rejuvenation and healing with a very little down time so thats become very popular.

There are other lasers like the Portrait treatment which is the energy that surrounds the sun - its a highly excited gas that gets shot onto the skin and that also starts a collagen healing from within.

And then there is many, many different types of photo rejuviantion lasers such as the Aura and Lyra lasers such as IPL lasers that can also induce a deep collagen tightening without any gap and down time.

Now, on the other spectrum is fillers. So many fillers are injected under the skin to plump out wrinkles.

Now. twenty years ago, the hallmark of plumping out was collagen. Collagen was developed by a Dermatologist and it really took the world by storm. But collagen had to be made from cows and that was a worry to patients because there was always a risk of transferring diseases even though that never happened and you had to actually test the patient to see that they weren't allergic to the collagen.

Now there are newer fillers that have taken off such as JV and RS which do not require any testing because they dont induce allergic reactions and they can just be injected in a procedure that takes just a couple of minutes and they fill areas around the mouth to plump that area up.

They do the groove between the cheek and the upper lip and they can be injected into other little folds and wrinkles as well.

There is a permanent filer called AQ that came out of Sweden. I was the first to use it here in Australia and that also was very popular and a lot of people were very impressed - where you could inject something and the filler would stay there forever.

Some doctors were nervous that if you inject it around the mouth that you wouldn't like it after ten years but that has not been my experience having done it now for a long time and I think everybody is very happy with it.

There are other injections. Of course the one that you would have heard of is BX and that is the most common injection or wrinkle treatment in the world. BX is derived

from an insect and its a muscle relaxant injection and and amazingly the relaxant is injected in the most minute, minute, minute doses into the muscles and it causes a paralysis of that localised muscle that it got injected into.

Its very effective for the so called 'crows-feet' that's the wrinkles around the eyes and what it does by injecting those 'crows-feet' when the patient smiles they wont get the wrinkles on the outside of the eyes.

Its also injected in the **Glabella** which is the lines between the eyelids and on the upper forehead and then there is many other uses which they have used it to inject under the eye brow to get a bit of an eye lift and around the mouth to relax that area also.

Interestingly, not so much cosmetic of the face but its also been used to inject under the armpits to stop people sweating and its also been used to inject to relax the muscles to stop people from getting migraines so its an amazing drug and it only lasts for three to six months thats the bad news.

The patients have come back for touch ups and repeat treatments but its very safe. Theres been no real significant systemic or general body affects and it still proves to be one of the most popular treatments in Cosmetic treatment.

MS: We mentioned earlier about men and women and breast reduction. In wrinkle treatments are you seeing more men coming for treatment as well Dr Lanzer?

DrL: Well, men age differently to women. You see, women tend to get more of finer wrinkles - they've got thinner skin so it wrinkles up. It gets blotchy more easily and it droops more easily.

So women definitely have much more of the general wrinkles of the face than men but men of course do get drooping and allot of men do get saggy around the necks and allot of men do need some face lifts and suture lifts as well and certainly the eyes are very common in men.

Its a different type of ageing than that you see in women and you know it could well be because we've got hairier skin that makes a difference and it could even be the fact that men shave that makes a difference because thats always taking off some of the outer layers.

BLOTCHES, VEINS AND COLOUR SPOTS?

MS: OK - Now you mentioned blotches. Blotches, veins and red-spots. What's the future there?

DrL: Well its also interesting that many other type of lasers were developed now that picked up different wave lengths and different colors and so that there's a laser that will pick out red.

There's a laser that will pick out brown and there's a laser that will pick out black. And what that means is that if you've got blotches and spots you dont have to go and have the whole skin blasted like you might have done in the olden days with liquid nitrogen or you would burn it out or cut it out because these are very non-specific ways of removing spots.

But you take a laser that very specifically and accurately just takes out the color you dont want and so its just a matter of shining a light on the skin and the veins around the nose and the cheeks just close up and - disappear. Or the blotchy brown marks just vaporise away.

Of course this technology has also been advanced in the use of tattoos.

People who have had tattoos and then after a number of years have decided they just dont like them they dont have to have them burnt or cut out any more they can just have a laser that's shone on it and the body removes those pigmented spots.

FAT REMOVAL?

MS: I see. Its Cosmetic Surgery Expert Dr. Danny Lanzer and he is giving us a bit of a peep into the future of 2009 and beyond as far as the trends and the future of Cosmetic Surgery and we appreciate you being on the program Dr Lanzer. Now fat blasting is something that caught my eye - what are the trends there?

DrL: Well it's very interesting because everybody that wants Cosmetic Surgery or Liposculpture Surgery, doctors and scientists interestingly, a lot of them come from Israel, have been working on methods to dissolve fat without operating.

The first one to come out was called the Accent and its a radio frequency.

Its actually a similar sort of technology as one would see in a microwave and of course here in Australia one of the national news programs featured us with program called 'Have Your Fat Microwaved Away'.

The interesting thing is that it does dissolve fat and cause a bit of skin tightening and there's no down time and there's no pain. But unfortunately it doesnt work in everybody and its not massively effective - its usually a couple of centimetres but if you are doing all the right things it can help.

Since then a different device was developed called the Ultrashape.

Ultrashape is converging ultrasound waves. Now Ultrasound as every body knows is used in medical diagnostic radiology like in pregnancy.

The ultrasound in those machines is a parallel ultrasound wave so it doesn't cause destruction. It actually casts shadows.

Once they took that ultrasound wave and made it converge so it hit a point you could make that one point be one centimetre under the skin so that when the ultrasound went through the skin it accuartely hits the fat cells and low-and-behold the fat cell blew up!

It's been shown in medical studies that ultrasound gets the fat cells to break up and the fat itself gets dissolved, goes into the blood stream and then into the liver and gets removed by the bowels.

So it's another way to help fat removal without actually having surgery.

With all these procedures you need to combine it with exercise and lifestyle change; dieting and then you will get the best results.

MEGA LIPOSUCTION?

MS: OK Dr lanzer, you mentioned and touched on Mega Liposuction earlier in the interview. Can you just expand on the future as you see it of Mega Liposuction?

DrL: Well, its interesting theres a number of surgical procedures for people overweight.

The one that's really become more popular is Lap Banding and that's where they put something around the stomach to stop you absorbing food and you end up vomiting if you over eat.

Now for some patients that's dramatic and for some if you weigh over 150 kg's that's the procedure to have because that will really cause a significant amount of weight reduction. But then you get people that don't weigh that much and they don't really want to go through a procedure that is going to stop them eating and make them vomit.

Sometimes they have it and it doesn't seem to work that well or they can't tolerate it so well.

So therefore we are using liposuction surgery which is keyhole surgery through tiny little holes and filling the fat up with the fluid we mentioned earlier which hardens and softens and prepares the fat and then doing a criss-cross suction and through the holes we suck out many, many litres of fat.

It's quite amazing you know you get some patients who are awake when they see that fat come out and they get a shock because fat is yellow, it's a yellow color and it flows out through the tube and it collects into a big container it's quite an interesting look.

When they see many litres there they think twice next time about having that food they shouldn't be eating.

MORE INFORMATION?

MS: I know your time with us and your interview today is going to peak the interest of a lot of people. Where can people find more information about Cosmetic Surgery?

DrL: Well, today it's right there on your computer.

If you just type in the condition you are thinking about there's a lot of information that you can get - certainly you can type in 'Dr Lanzer' and you can get to my website and you can get everything we are talking about - otherwise there's things you can get at the library but the interesting thing about Cosmetic Surgery is that it's developing so quickly - you know - in a lot of areas particularly in a lot of the lasers.

What we say today will be updated in six months - so its worth keeping in contact with your Cosmetic Surgeon and a good Cosmetic Surgeon will often send their updates to their patients and keep them informed of what's out there.

DR LANZER WEBSITE?

MS: Now you mentioned about the web and your own website - thats w-w-w-dot-d-r-l-a-n-z-e-r-dot-com? Dr Lanzer dot com?

DrL: Thats it - DrLanzer dot com.

OTHER METHODS OF CONTACT?

MS: And how can people contact you Dr Lanzer apart from visiting your website?

DrL: You can visit the website and send an email and we will actually give free consultations on the web so you can send a photo and I will answer pretty quickly and send my opinion - but of course you can call us any time (in Australia) on 1800 444 333 or (International, Melbourne, Australia) on 61 3 9500 8888.

MS: Thats 1800 444 333 and 61 3 9500 8888?

DrL: Thats correct.

THANK YOU

MS: I see. Dr Danny Lanzer, Cosmetic Surgery Specialist and expert its been a real interesting interview and a pleasure to be talking with you and Dr lanzer has been our guest on Interviews with the Experts.

Dr Lanzer thank you for joining us.

DrL: Thank you very much for your time and its been a pleasure talking to you.

-: END :-