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Psychosocial predictors, assessment and outcomes of cosmetic interventions: a systematic rapid evidence review

This systematic rapid evidence review aimed to address questions on the relationships between cosmetic interventions and their psychosocial predictors, methods of assessing those predictors, and psychosocial outcomes of procedures.

Key words: psychosocial factors; cosmetic interventions; research synthesis

The review was carried out by the Institute of Education’s Evidence for Policy and Practice Information and Co-ordinating Centre (EPPI-Centre) in 2013. It was commissioned and funded by the Policy Research Programme in the Department of Health.

Key findings

Findings are of interest to clinicians providing cosmetic interventions, patients requesting or undergoing cosmetic procedures, health researchers, and health policy advisers.

Overall, findings suggest:

- That several psychosocial risk factors (e.g. intimate partner violence) may be associated with requesting or undergoing cosmetic surgery. A number of factors may predict poor psychological outcomes (e.g. having high expectations).
- A specific link between breast augmentation surgery and later suicide.
- That current psychological screening tools focus heavily on symptoms of body dysmorphic disorder (BDD).
- That psychological and pharmacological interventions are useful treatments for BDD although no studies were found which directly compared cosmetic interventions and alternative treatments of BDD.
- That decision making and achieving informed consent in cosmetic surgery consultations fall some way short of being a shared process: doctors and patients bring different needs to the informed consent process, which do not always match recommended ethical or organisational requirements.
This review was used to inform an expert review of the regulation of cosmetic interventions headed by Sir Bruce Keogh for the UK Secretary of State for Health.

What we did

Cosmetic procedures are increasingly performed; however, the impacts and effectiveness of these interventions are unknown, particularly among groups of people with co-morbid conditions, who also may be at risk of poor post-cosmetic procedure outcomes.

There are concerns about the evidence underpinning the provision of cosmetic procedures and the quality of informed consent for these procedures, owing to uncertainties about: low levels of public and practitioner understanding of who these groups are; the risk of poor outcomes; and the ability to screen for pre-existing conditions.

The debate, triggered by the complications associated with the use of Poly Implant Prothèse (PIP), led policymakers to call for a review of the evidence relating to levels of clinical safety and to inform a fresh debate about the desirability and feasibility of regulating the provision of cosmetic interventions. This systematic rapid evidence review (an exhaustive overview and summary of existing high quality research evidence relevant to a research question) aimed to address the following questions, key to current debates and uncertainties in the field:

- What psychosocial factors are associated with requesting and/or undergoing cosmetic interventions?
- What psychosocial factors are associated with poor post-procedure psychological outcomes in people undergoing cosmetic interventions?
- What are the effects of cosmetic interventions on post-procedure psychological outcomes?
- What is the accuracy/sensitivity of pre-intervention assessment for identifying those who would not benefit from surgery?
- For patients requesting cosmetic procedures who have disorders with a body image component, does psychological therapy result in better psychological outcomes than cosmetic interventions (or no intervention)?
- What issues have been identified in the literature related to achieving informed consent for cosmetic procedures from vulnerable patients?

How we did it

The results are based on data from 270 primary studies, identified by systematic literature searching and from within 13 systematic reviews. Results were grouped by research question, then cosmetic procedure. The findings were grouped and synthesised using a narrative approach.

Implications

The quality of research in this field would benefit from the adoption of a more strategic and coordinated approach. Future research should employ more robust methodologies. A consensus should be achieved on a core set of psychological outcomes for all researchers involved in the field in order to address important gaps in the evidence base identified in the review.

For the full report see ‘Psychosocial predictors, assessment and outcomes of cosmetic interventions: a systematic rapid evidence review’

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