

FILLERFEAR

The Prevalence of Cosmetic Filler Hesitation in the Greater Houston Area

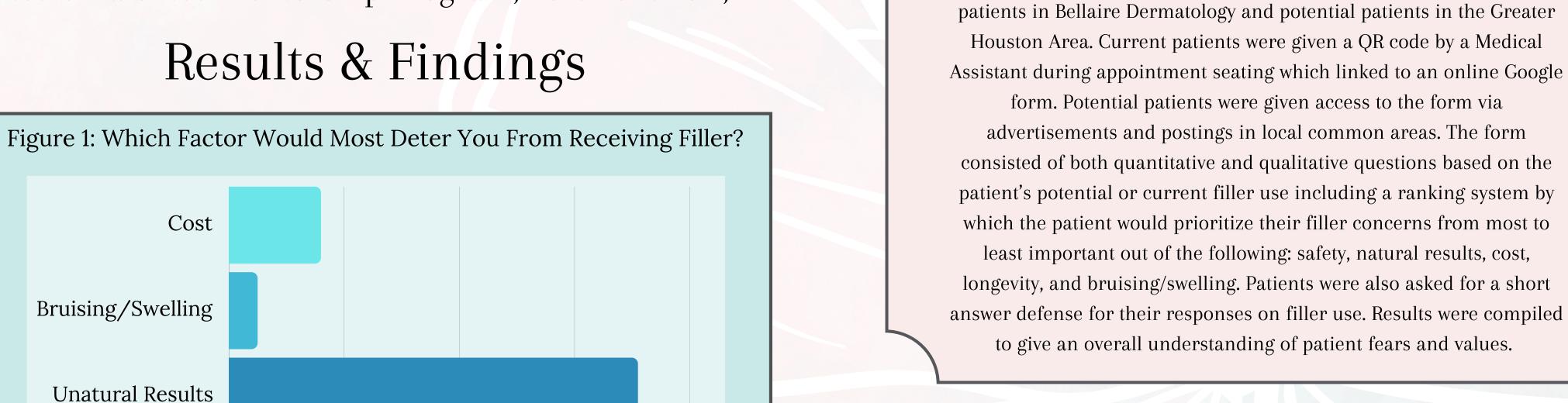
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Alyssa Nguyen-Boston^{1,3}, Dr. Craig Teller, MD²

¹I. H. Kempner High School, Sugar Land, TX ²Bellaire Dermatology, Bellaire, TX

Safety

³Gifted & Talented Mentorship Program, Fort Bend ISD, TX



Abstract

Research has shown that in recent years, patients have grown increasingly wary of receiving cosmetic filler injections due to the fear of looking unnatural or overfilled, a sentiment inflamed by online media. Such fears can have a negative impact on the cosmetic dermatology industry as filler stigmas spread at a rapid rate.

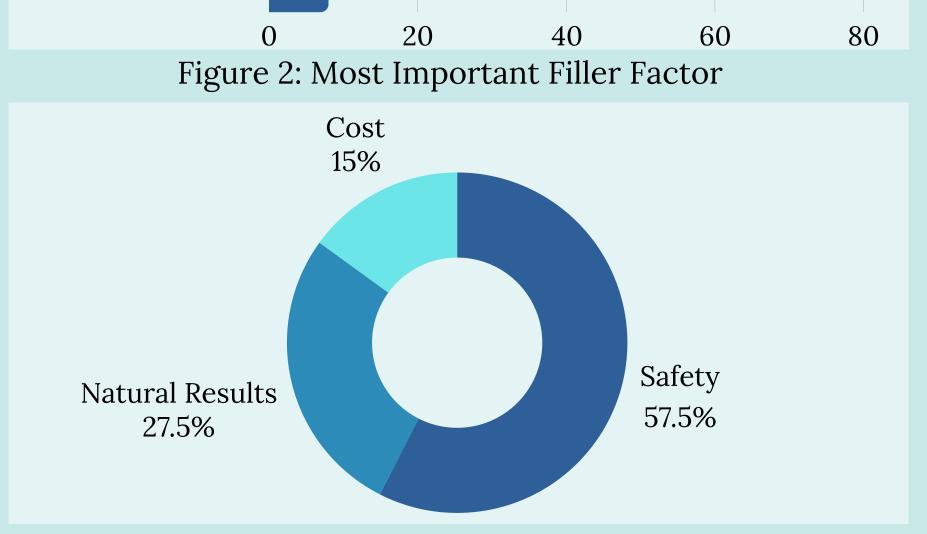
Therefore this study was conducted to reveal the true prevalence of filler fear outside of the online space—specifically in the Greater Houston Area (GHA). It was hypothesized that natural results and safety would be the main patient concerns for fillers.

Data was collected from 40 participants via an online survey that asked both current and potential dermatology patients about their filler concerns and priorities. Ultimately, results showed that while unnatural results were the principal deterrent from filler procedures, safety was the central priority when actually receiving the treatment. Such conclusions validated the original hypothesis and can inform GHA dermatologists about which concerns to address when gaining and maintaining cosmetic patients.

Introduction & Summary

With the use of cosmetic fillers becoming more widespread in the US, many patients fear looking unnatural. Terms such as "pillowface" have become popular in recent years to describe the puffy look of exaggerated, and overdone fillers [1,2]. The recent stigma has fueled patient hesitation towards filler procedures. According to the second largest global filler company Galderma, 70% of practitioners report that patients fear looking unnatural [3]. Additionally, a recent Switzerland study suggests that despite four out of five people being unable to identify filler use in a patient, 34% of respondents would not recommend fillers to others due to their unnatural look [3]. Despite "pillow-face" only referring to the results of hyaluronic acid fillers, regenerative fillers such as calcium hydroxylapatite (CaHA) fillers that do not pose the same overfilled risk are still affected by filler stigma [4]. Overall, misunderstandings of fillers and perceived effects can have a negative impact on the filler industry.

While patient fear has been realized, its prevalence in the Greater Houston dermatology space has not been recorded. Therefore, this research endeavor aims to assess the magnitude of filler fear among Greater Houston Area patients. Through this data, dermal practitioners can gain a better understanding of patient concerns and work on strategies to most effectively reduce filler stigma. It is hypothesized that patients will value safety foremost and natural results secondarily.



Overall, a majority of participants in Figure 1 felt that looking unnatural would most deter them from receiving filler even over safety despite almost 60% out of 40 participants ranking safety as their most important filler factor (Figure 2). Based on this, it can be concluded that while looking unnatural can prevent patients from receiving filler, once the treatment is in process, they value safety, or avoiding adverse events. This shift in priorities is interesting to note. However, one-third of participants felt natural results were the most important factor even over cost (Figure 2.2). This lines up with what participants felt would most deter them from receiving filler. Additional factors of bruising/swelling and longevity were included in the survey options, however, neither of these factors were selected as "Most" or "Second Most" important when undergoing filler treatment. Cost maintained a somewhat high standing position of importance with 15% of participants considering it to be the most important filler factor (Figure 2). Generally, in congruence with the original hypothesis, participants overwhelmingly valued safety and looking natural when receiving filler.

Discussion

Methodology

Data was collected through two focus groups: current dermatology

Limitations of this endeavor include a small participant pool as well as localized selectants from within the Greater Houston Area. Additionally, because current patients were provided the form within the clinic, potential bias could have occurred as patients may have felt pressured to provide a certain response in the presence of medical staff.

Future studies should focus on obtaining a more even representation of the Greater Houston Area as well as prompting more in-depth justifications for the patients' ranking choices. Furthermore, researchers could derive a study on the specific elements of natural results that patients find most appealing i.e. skin quality, glow, and projection.

Overall, the results of this research serve to assist local dermatologists in understanding what a patient's priorities are when it comes to filler as well as the pervasiveness of filler uncertainty.

References

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