

COSMETIC SURGERY

Ole Martin Moen

As our wealth increases, more and more of us undergo cosmetic surgery. From tummy tucks, breast enlargements and nose jobs to hair transplants and face-lifts: You name it, they fix it.

Even though cosmetic surgery has become increasingly popular, it is often looked at with suspicion. Many feel that there is something fake, superficial and perhaps desperate about undergoing surgery for aesthetic reasons. Though different social groups assess cosmetic surgery differently, the general picture in Western countries seems to be that though a hair transplant and a teeth bleaching will pass, a breast enlargement will raise eyebrows.

Ironically, however, the eyebrows in question might well be both plucked and coloured, for we already do quite a bit to enhance our looks. We work out, dress well, shave and go to the hairdresser. Some of us are on a diet, wear make-up or dye our hair. Many remove benign birthmarks and have braces beyond what is medically required.

We do these things, moreover, for a reason: Looks matter to us. What meets us in the mirror is important to our self-esteem, and better looks give us better chances in the mating market. Good looks also appear to have more general advantages: Good-looking people receive more attention and are treated better than those who are less good-looking, and studies find robust evidence that we attribute unobservable characteristics such as moral stature, intelligence and productivity to people based on their physical attractiveness. The results are clear: Good-looking people receive milder prison sentences and over a lifetime an attractive worker in the United States will on average earn \$230,000 more than a quite ordinary one.¹

If looks matter so much: Why do not more people get their hairline lowered, their wrinkles smoothed out and their tummy tucked? After all, the price of cosmetic surgery is lower than it has ever been, and the same is true of the health risk. Moreover, cosmetic surgery appears to have a good satisfaction rate. Nikolaos Papadopoulos has interviewed people who have undergone cosmetic surgery and found that 86% are satisfied with the aesthetic result; 85% would undergo the same procedure again and 94% would further recommend their operation.² In *How Pleasure Works*, Paul Bloom argues that while most of the things we spend money on make us feel better only for a short while, cosmetic surgery has a long-lasting positive effect on our reported well-being.³

If cosmetic surgery is so beneficial, why hesitate?

A reason given by many is that cosmetic surgery is *unnatural*: that it is an artificial intervention into how nature made us. In this view, if a cosmetic surgeon has fixed your nose, then your nose is no longer a natural nose and this takes away its value. How convincing is this? It is probably less convincing than many assume, for as a technology optimist would remind us, we do seemingly ‘unnatural’ things all the time: We wear glasses to enhance our vision and take the bus to enhance our mobility. Clothes are a form of artificial skin-enhancement, and neither computers, newspapers, cell-phones, antibiotics, cranes, vaccines nor clocks are found ready-made in nature; they are all technological inventions made by us. It thus seems that unless we are prepared to say that all such things are bad, wrong or deprived of value, we must concede that there is nothing bad as such about artificial things, and that ‘natural’ and ‘unnatural’ are not normative categories. Of course, technological inventions can be good or bad – and clearly, technologies may have unintended bad consequences – but ‘good’ and ‘bad’ are distinct from ‘natural’

and 'unnatural'. Indeed, our technology optimist would argue, 'unnatural' is a very loose term that is seldom more than a label that we place on new things of which we are suspicious. Fifty years ago, the Catholic Church claimed that it was unnatural for women to use painkillers while giving birth. To most of us today, it seems perfectly acceptable – perhaps even *natural* – to use painkillers while in labour. As such, it seems that labelling cosmetic surgery 'unnatural' does not help us much in our reasoning about whether or not cosmetic surgery is worth going for.

One strategy for giving content to the claim that undergoing cosmetic surgery is not advisable is to argue that it is unfair and a form of *cheating*. There are two versions of this argument. The simplest version states that by undergoing cosmetic surgery, we give ourselves an unfair advantage. This claim has some intuitive appeal, as cosmetic surgery gives some of us an improvement that others do not get. A problem with this argument, however, is that the alternative to cosmetic surgery is not perfect fairness, but biological luck. The traits commonly considered beautiful are unevenly distributed among us, and none of us did anything to deserve our genetic makeup. For this reason, it seems that cosmetic surgery does not increase the amount of unfairness in the world; rather, since it is likely to be used primarily by those on the lower end of the beauty scale, it works as a means toward more fairness – a *revenge of the nerds*, if you would like; a chance for biology's 'have nots' to become 'haves'.

A more complex version of the cheating argument states that undergoing cosmetic surgery is a bit like standing up to get a better view when you are in the audience of a football match: If you stand up, you benefit, but you do so at the expense of everyone around you, and if they stood up as well, no one would benefit. This logic seems applicable to cosmetic surgery, for it might be that though you benefit from enhancing your looks, you do so by comparatively pushing others down, and had everyone enhanced their looks, no one would have benefitted. How might one

respond? One response is the prudential one: Regardless of whether you push others down by undergoing cosmetic surgery, you still have a good prudential reason to go for it. A second response is to deny that looks are all relative in the way the audience analogy suggests, and claim that though there might be *some* relativity involved, there is also an absolutist element. This view also has some plausibility, for it seems that an isolated group of good-looking people would tend to be more satisfied with their looks than an isolated group of bad-looking people. We seem to have a fairly steady biology telling us what is nice and what is not, so even though there might be some beauty inflation if many improved their looks, the benefit might outweigh the inflation. One way to phrase this is to say that beauty enhancement is not a zero-sum game (a game where A can win if and only if B loses), but a game where net benefits are possible. If this is right, you might well make the world better overall by undergoing cosmetic surgery. A third response is that cosmetic surgery is no worse fairness wise than any other means of improving one's looks, such as dressing smartly, removing acne, or even smiling and keeping a good posture. How does the surgical nature of cosmetic surgery make it less fair than these other forms of enhancement? If there is no fairness-relevant difference, it seems that the argument in question is just as much an argument against dressing smartly, removing acne and keeping a good posture. Such a view seems to have the unintuitive implication that *all* improvements are bad, and that they must be bad by virtue of being improvements. This seems unacceptable, for improvements make the world better, not worse. Unless we wish to forsake all improvements out of fear that they will leave others worse off – and unless we want to make it a virtue to look bad on purpose – it seems that the unfairness objection does not give us a reason to reject cosmetic surgery.

According to a third and more pragmatic argument, cosmetic surgery is problematic because it takes up the time and energy of scarce medical personnel, and uses it for a

comparatively trivial purpose in a world where millions are in need of urgent medical attention. This argument undeniably has some force. But let us play devil's advocate: Is it morally required that medical personnel spend more time and effort on saving lives than non-medical personnel do? It seems not, for it is unreasonable that the reward for actually helping *some* is an obligation to help even more. If we grant this, it seems no worse that a medical doctor spends her time working in cosmetic surgery – and thus abstains from, say, saving 100 lives – than it is for you to buy a nice house or a nice car, or go on a nice vacation, with money that you could have given to UNICEF to save 100 lives. Clearly, it is consistent to be opposed both to the cosmetic surgery, the nice house, the nice car and the nice vacation. A strict utilitarian would be likely to hold this view. But if we grant that it is okay that we cut ourselves some slack and spend at least a portion of our money on ourselves, we might just as well spend that portion on a tummy tuck as on a trip to Rome. The reason why is that every single dollar that we spend – be it on cosmetic surgery or on something else – could have been spent on saving lives. All resources are potentially life saving. The difference between spending money on cosmetic surgery and spending money on a vacation, therefore, seems merely to be that in the former case, it is more visible that the resources could have been spent on saving lives. Visibility, however, is not a morally relevant factor. This means that though you might well be morally required to consider giving your money to UNICEF before you spend it on cosmetic surgery, there is no reason to give the UNICEF option more weight when considering cosmetic surgery than when considering anything else. As such, the 'scarce resources' argument is an argument for taking into consideration the fact that all our resources could potentially be spent on charity – not an argument that says anything in particular about cosmetic surgery.

A fourth reason why we are suspicious of cosmetic surgery seems to be that it has bad connotations to us. When we think of cosmetic surgery, we think of desperate

Hollywood wives paralyzed by fear of turning 40; people who have serious psychological issues with their bodies and who should seek psychological, not surgical, help; and 60-year-olds who desperately try to look like 20-year-olds rather than aging with dignity and grace. These might be sensible worries, and it might be true that cosmetic surgery clinics are often filled with people who have unhealthy attitudes towards their bodies. But before rushing to a condemnation of cosmetic surgery, we should keep two things in mind. First: This is just what we should expect given that cosmetic surgery is taboo. The taboo status works as an entrance barrier, and makes it the case that only (or almost only) those who desire new looks *very badly* find it worthwhile to go for cosmetic surgery. This skews the sample in favour of people who have issues with their bodies. Second: Does the fact that many of those who undergo cosmetic surgery have such issues imply that if you undergo cosmetic surgery, then you get these issues? There is little reason to believe that you would. If you undergo cosmetic surgery, you start belonging to the group 'those who undergo cosmetic surgery' – but that does not make you inherit contingent traits from others in that group. Inferring that you would is to commit the association fallacy: The fallacy of attributing to P that which is commonly associated with P.

For these reasons it seems that cosmetic surgery has more positive aspects and fewer negative aspects than we tend to assume. Of course, this is not to deny the reality of cosmetic surgery's genuinely negative sides. For one, all surgery comes with a certain health risk, and most likely, it always will. Moreover, whether or not cosmetic surgery will be harmful or beneficial in a particular case seems to depend on the motivations of the one pursuing it. If one seeks to heal a psychological problem by means of cosmetic surgery, one will be let down, and one's money would be better spent on a psychologist than a surgeon. The same is true if one's reason for wanting surgery is based upon either unhealthy social, cultural or commercial

pressure or an obsession about looks. Moreover, one must remember that in most cases, cosmetic surgery treats the symptom, not the cause. If one eats junk food every day, and now and then surgically removes fat, one will still be in bad shape. Cosmetic surgery is not a miracle cure.

If, however, one takes cosmetic surgery for what it is – *cosmetics* – it seems that it could also be a real benefit. If one is bothered by, say, too big a nose, excessive body fat or uneven breasts, it should be an open question whether one should spend one's savings on a surgical procedure rather than on a car, a house or a vacation. There should be no extra taboo associated with cosmetic surgery. Cosmetic surgery is one of many ways by which we can use technology to improve our lives. As with any technology, we should assess its costs and benefits soberly – and if, after a serious consideration, we deem it appropriate, we should use it.

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Notes

¹ 'The Economics of Good Looks', *The Economist*, Aug 27, 2011.

² Nikolaos Papadopoulos et al., 'Quality of Life Following Aesthetic Plastic Surgery', *Journal of Plastic, Reconstructive & Aesthetic Surgery*, vol. 60, no. 1 (2007), pp. 915–917, 199.

³ Paul Bloom, *How Pleasure Works* (New York: W. W. Norton & Company, 2010), pp. 68, 151, 210.