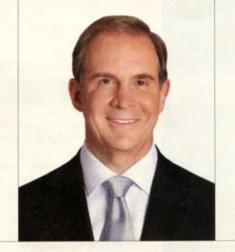
Face Value

Phillip Langsdon, MD, FACS, and the Foundation for Facial Aesthetic Surgery



By William Payton

emphis, Tenn-based facial plastic surgeon Phillip Langsdon, MD, FACS, felt something was missing from many industry meetings and educational events. He envisioned a nonprofit, multispecialty foundation that would operate under strict university Continuing Medical Education (CME) protocol. His brainchild is the Foundation for Facial Aesthetic Surgery (FFAS).

In addition to serving as president of the Foundation, Langsdon is a tenured professor at the University of Tennessee, where he serves as chief of the Division of Facial Plastic Surgery. He has practiced facial aesthetic surgery for 28 years and serves as vice president of the Memphis Medical Society, as well as the southern director of the American Academy of Facial Plastic and Reconstructive Surgery (AAFPRS).

Langsdon received his medical degree from the University of Arkansas in Fayetteville; completed a residency in Otolaryngology-Head & Neck Surgery at Indiana University in Indianapolis; and received advanced training through a yearlong fellowship with the AAFPRS.

PSP sat down with Langsdon to discuss the FFAS and all it stands for.

With so many industry groups and meetings, why did you start the FFAS?

The initial multispecialty course was founded in 1992. The goal was to foster a sense of cooperation and knowledge exchange between the medical specialties that are primarily involved in the science, practice, and teaching of facial aesthetic surgery. Later, we included nonsurgical medical aesthetics.

How has the organization evolved since its inception?

The first program involved plastic surgeons and facial plastic surgeons from seven universities, and we taught only surgical techniques. Quickly, many additional university and private practice speakers, as

well as industry representatives, became involved. Today, we share our experience with nonsurgical treatments and technologies such as neuromodulators, fillers, lasers, and mechanical devices—plus the business of aesthetics practices and spas—rather than just surgery.

Please tell us about the recent symposium.

The FFAS program covers the "bottom line" in facial aesthetics. No fluff, no hype—just facts pertaining to what works and what doesn't. Our goal is for people to come and share the truth about what they are experiencing in their practices. We want attendees to return home with a confident approach to anything relating to facial aesthetics.

Why is it so important to FFAS to take a university-based, educational approach?

There is too much misinformation and hype—not only in the general aesthetics marketplace, but also in many programs. It is my opinion that the majority of the non-university-based educational programs today are highly influenced by industry. Not so with FFAS.

The Foundation operates under strict university CME protocol to ensure balance, independence, objectivity, and scientific rigor. It complies with the university policy to identify conflicts of interest with speakers or managers. The Foundation works with oversight designed to ensure that all research presented in the symposiums conforms to generally accepted standards of experimental design, data collection, and analysis. The intent and goal of the Foundation is to provide nonbiased information—based on the direct experience of the presenters.

What is your signature procedure?

I have three: rhinoplasty, facelift, and eyelid surgery. Surgery of the aging face, rhinoplasty, and facial fillers are trending right now, so this works out well.

What do the people of Memphis, Tenn, want most when it comes to cosmetic surgery?

They want to look better and feel better about their appearance.

Is celebrity emulation an issue?
Actually, many of my patients explicitly state that they don't want to emulate some of the celebrities that, as we all know, have some odd-looking results. Some celebrities are very bad advertising for aesthetics.

Are social media and selfies encouraging more patients to consider cosmetic surgery?

Regarding selfies, we are seeing younger patients demonstrate what they don't like about themselves from their mobile devices. I can only assume they are spending more time self-analyzing because of the ease of phone photography.

How do you interact with your patients?

Our website. It is the best way for new patients to find us, and it's also the best way for us to keep up with our current patients. There is no other medium that allows us to convey as much information to our patients.

Where do you get your industry news?
From the FFAS Aesthetics
Symposium and the AAFPRS. It is great to be able to hear from other practitioners about what works and what does not.

Plastic Surgery Practice also provides a great cross-section of information; it is a good source from which to glean information from providers 1 don't know.

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