Australia Takes the Next Step in

Regulation with Public Consultation

Australia is the next country to open a public consultation on tightened guidelines in the world of non-surgical aesthetics

The Australian Health Practitioner Regulation Agency (AHPRA) has launched a consultation on non-surgical cosmetic procedures in the country.1

The 10-week consultation, which began on November 27 2023 and will close on February 2 2024, is designed to canvas public opinion on more stringent measures to protect patient wellbeing. The factors in consideration include practitioner transparency, mental health screening, treatment of under 18s and advertising.1 Following the UK's recent consultation on our own aesthetic regulation, it is crucial to also note the shift in the sector overseas. Aesthetics spoke to Australia-based plastic surgeon Dr Steven Liew and medical practitioners Dr Ginni Mansberg and Dr Jake Sloane to hear their thoughts on the consultation's potential outcomes.

Existing guidelines

Dr Sloane explains that much like the UK, regulation has been a contentious issue in Australia for years. "Non-surgical aesthetics has already been far more regulated in Australia than the UK," he says, "Examples include non-medical practitioners not being allowed to inject, parallel importing of products from abroad being illegal and a more rigorous approval process for new products before they come to our market.^{2,3} However, there is no agreed qualification or standard of competency in Australia for injectors."

Currently, Australia has no specific legal guidelines for medical practitioners delivering solely non-surgical aesthetic treatments. There is a set of 'Guidelines for registered medical practitioners who perform cosmetic surgery and procedures' which includes just a brief subsection on non-surgical cosmetic procedures.4 However, following an independent review of cosmetic surgery in Australia, conducted by AHPRA and the Medical Board of Australia in 2022, three separate, more detailed guidelines specifically for the non-surgical side of the specialty were recommended:5

- 1. Guidelines for nurses who perform non-surgical cosmetic procedures (nurses practice guidelines)
- 2. Guidelines for registered health practitioners who perform non-surgical cosmetic procedures (shared practice guidelines). This refers to chiropractors, dental practitioners, occupational therapists, optometrists, osteopaths, paramedics, pharmacists, physiotherapists, podiatrists and psychologists
- 3. Guidelines for registered health practitioners who advertise such procedures (advertising guidelines)

Dr Liew hopes the new guidelines will offer enhanced clarity on which practitioners should be performing what treatments. He says, "There is a lack of understanding by the public as to who is qualified to do what. You often see practitioners performing dangerous treatments beyond their scope of practice, and these clear guidelines being available to the public should help protect them."

Proposed guidelines in Australia

The proposed guidelines offer new, in-depth guidance on practitioner qualifications, mental health support, treating underage patients and advertising.

Practitioner transparency

One factor AHPRA has found to 'increase public risk' is 'a lack of clear information about the qualifications and experience of practitioners in the sector. The guidelines for nurses and registered health practitioners both stipulate they 'must not make claims about their qualifications, experience or expertise that could mislead people by implying the practitioner is more skilled or more experienced than is the case". Doing so would be in contravention of National Law.1 It is highlighted that this specifically should not be the case when using 'protected titles' which they are not registered or qualified to use, such as dermatologist.1

Dr Mansberg shares, "We all know that qualifications aren't the be all and end all of a practitioner's skills, but patients have a right to make an informed choice for themselves.

Being upfront about this is only respectful to the patient and their safety. It would be great to see a bigger focus on attainment and recognition of training and skills."

Mental health screening

Much like in the UK, Australia is increasing the focus on protecting patients' mental health. The 'Guidelines for registered health practitioners who perform non-surgical cosmetic procedures (shared practice guidelines)' place particular emphasis on awareness of potential patient vulnerabilities.1 During the 2022 review, clinical psychologist Dr Toni Pikoos stated that existing guidelines did not sufficiently protect psychologically vulnerable patients. She said, "Factors such as BDD, anxiety, depression, obsessivecompulsive disorder and personality disorders are known to increase the risk of poor cosmetic treatment outcomes and may potentially worsen psychological functioning for these patients."1

The consultation suggests that 'Practitioners must undertake an evidence-based assessment of the patient, including underlying psychological conditions such as BDD, which may make them an unsuitable candidate for treatment'. In the proposal, a dedicated psychological screening tool would only be used for patients seeking cosmetic surgery; only a mental health assessment would be required for non-surgical patients.1

Under 18s

In the UK, under 18s are banned from receiving botulinum toxin and dermal filler treatments under the Botulinum Toxin and Cosmetic Fillers (Children) Act 2021.8 The proposed Australian guidelines also include a blanket ban on cosmetic toxin and filler procedures being performed on under 18s.1 The proposal states that for other procedures, patients under 18 would be given a coolingoff period of at least seven days, and parents or quardians should be consulted where possible. 1 Dr Mansberg comments, "Under 18s are often more susceptible to self-esteem issues, and can also be highly influenced by the latest trends, only to want something completely different later. For this reason, a number of barriers have been put in place to accessing cosmetic procedures in this group. We still don't know whether that is enough safeguarding, or whether an outright ban should be implemented. I'm worried about this ban catching up teens with a genuine disfigurement who could actually benefit from cosmetic interventions."

Advertising

A whole separate set of guidelines aims to secure 'advertising that minimises the risk and complexity of a procedure or implies unrealistic results' in the specialty.1

The proposal states that because 'one of the main intentions of advertising non-surgical cosmetic procedures is to sell, rather than educate, there is potential for this type of advertising to mislead the public'.1 It continues that this advertising can easily 'pathologise normal changes in appearance, exploit vulnerabilities or insecurities of individuals, contribute to poor body image and create unrealistic expectations'.1

Some concerns raised are the use of models who are unlikely to have actually undergone the treatment advertised, content that promotes aesthetic result as socially accepted and the use of influencers to promote treatments. The consultation thus proposes that 'advertising must not exploit the vulnerabilities or insecurities of patients to increase demand for procedures', taking into account the volume of patients with BDD likely to be consuming such content.1 Moreover, it is stipulated that images of

under 18s should not be advertised.1 Dr Liew feels this is a crucial aspect of the consultation, saying, "I think social media has created an opportunity for unscrupulous advertising by a lot of practitioners, whereby they use it to trivialise the medical nature of non-surgical procedures. Before and after images need to be standardised so they don't artificially show a much better result than is attainable, and result images should not be taken immediately after treatment as this can be misleading."

The conversation continues

Dr Sloane is of the opinion that the majority of medical aesthetic practitioners in Australia would welcome any initiatives to help drive standards higher. He says, "In an ideal world, aesthetic medicine would one day be recognised as a new medical specialty, inevitably involving government oversight. We simply don't know what AHPRA has in mind, and this is the cause for concern."

Dr Liew concluded, "I would like these guidelines to be thoughtful, comprehensive, simple and unambiguous. I hope they are

truly designed to protect patients, not just for lip service. If this is achieved, we can set an example for the rest of the world that non-surgical aesthetics can be safe and fulfilling if done responsibly."

The consultation is open to members of the Australian public until February 2, 2024. Submissions can be made by emailing AHPRA.consultation@ahpra.gov.au or via the online survey.6 A template for submissions can be found online.7 It is as yet unclear when a final decision on the future of aesthetic regulation in Australia might be made.



APEX

Dr Liew will be speaking at Aesthetics' new, invite-only masterclass APEX on March 14, 2024 at the Bulgari Hotel, London. Turn to p.75 to find out how you can attend.

