

Cutting Through the Plastic

Whichever way you slice it, you're sure to stir up quite a bit of controversy whenever plastic surgery is on the table. Some say Asian Americans are being culturally and ethnically subordinated by the scalpel. Others argue it's much simpler than that. Are Asian Americans faking themselves out, or is it just the pursuit of the good ol' American way? *Audrey* magazine takes its own look at this much-debated issue in this two-part series.

EDITOR Anna M. Park

Oh, look! You saved \$2,000!"

Reportedly, that was what one of my aunts told my mother when I first opened my eyes as a one-day-old newborn. She was referring to that tiny little crease that appeared just above my lash line — and yes, to the fact that now my parents wouldn't have to shell out the amount for a future surgery.

Now, don't get me wrong. I don't come from particularly vain stock. In fact, quite the opposite — my mother, to this day, is adamantly anti-plastic anything. But for some strange reason, in the countryside of South Korea, more than 30 years ago no less, the existence of that tiny little crease seemed to rank pretty high in importance — along with 10 working digits and a healthy set of lungs — to one average, middle-class Korean family.

Double eyelid. Palpebral fold. The crease. Whatever you call it, it is estimated that 50 percent of Asians and 25 per-

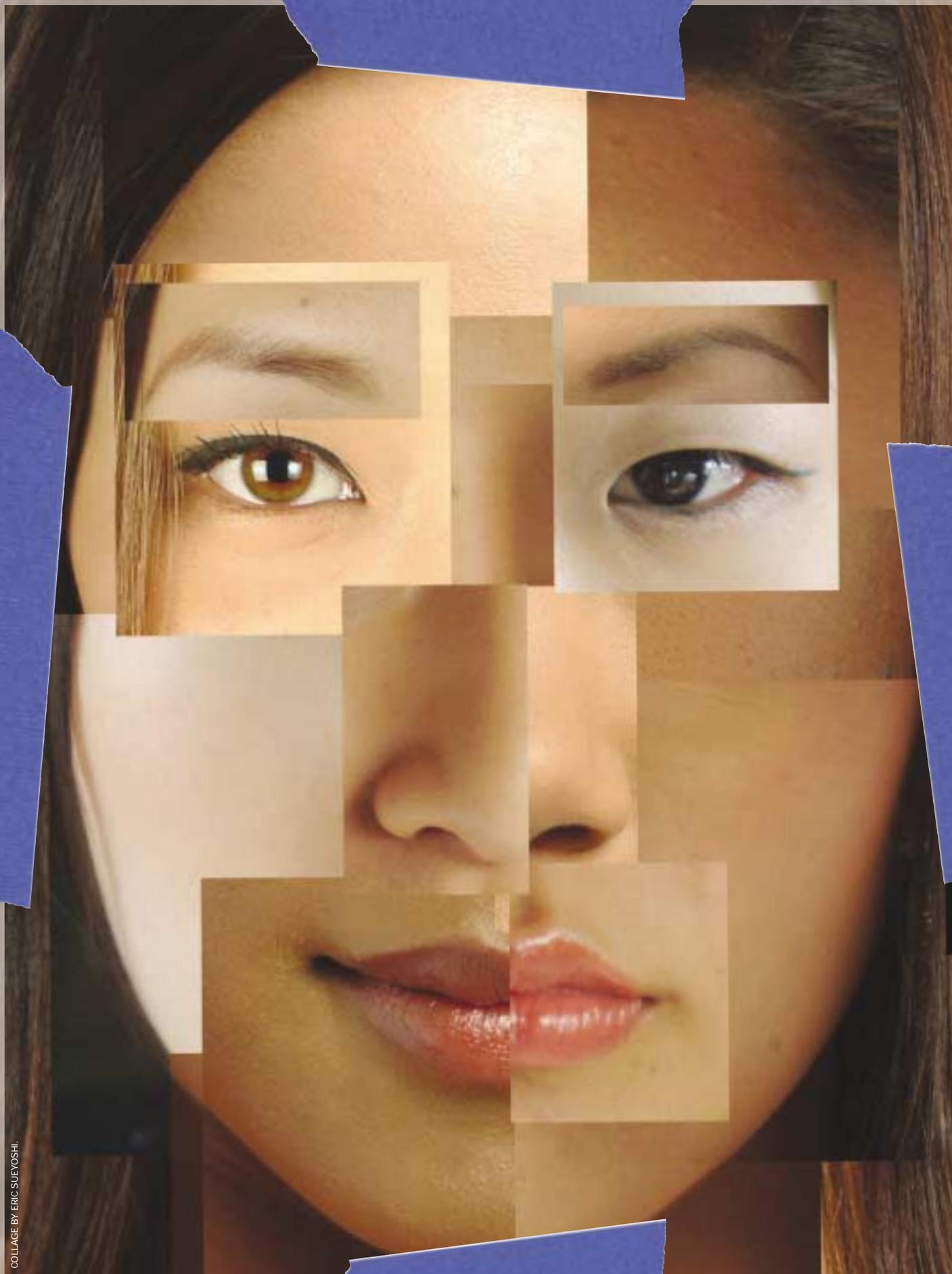
cent of Northeast Asians (including Korean and Mongolian) have a naturally occurring double eyelid. Biological anthropologists proffer several theories to explain why many Asians do not have a crease in their eyelids, but the most accepted is an adaptation to environmental conditions in Northeast Asia — a higher amount of fat in the upper eyelids, a shallower orbit or eye socket, an epicanthic fold (which is *not* the double eyelid crease, contrary to popular belief), and a lower connection of the levator muscle behind the eyelid resulted in a single eyelid better equipped to protect eyes from harsh weather.

The earliest reference to upper eyelid crease creation appeared in Japanese scientific literature in 1896 when Dr. K. Mikamo introduced a surgical technique for altering the eyelid — a non-incision method using three stitches to construct a palpebral fold. American surgeons have records as early as the 1950s documenting a similar procedure in the Philippines, and Khoo Boo-Chai, a Malayan doctor, became

a modern pioneer in the field in 1963 with his non-incision method of what he called "Oriental blepharoplasty." Since then, the procedure has gained popularity, becoming as commonplace in some parts of Asia as getting braces in the States.

Despite its proliferation in Asia and eventually among AAs, the procedure has sparked no small amount of controversy, even in non-AA circles. Innumerable articles and essays have been written on the topic and it's even spawned the term "monolid" — a backlash to what some call self-mutilation — as a symbol of "yellow pride." Indeed, just the appearance of an advertisement in an Asian magazine is enough to touch off a "letter to the editor" war between the two factions.

But like it or not, plastic surgery among AAs is on the rise. The number of cosmetic procedures performed on ethnic minorities in the U.S. quadrupled between 1997 and 2002, according to the American Society of Aesthetic Plastic Surgery. Asian blepharoplasty (double eyelid surgery) was by far the most common procedure



COLLAGE BY ERIC SUEYOSHI.

among AAs in 2003, followed by rhinoplasty (nose jobs). General blepharoplasty (which includes eyelifts as well as double eyelid creation) was the third most common procedure in the U.S. overall, trailing not far behind breast augmentation and liposuction (the most common).

But is Asian blepharoplasty really a manifestation of internalized racism and Western cultural colonialism, as many argue? Are we really buying into the media's proliferation of a Caucasian beauty standard at the expense of "natural" Asian beauty? In desiring that little crease above our lash lines, do we really think we're erasing that ethnic feature which purportedly made us the subject of racial taunts growing up? (As far as I can remember, having double eyelids no more exempted me from being a "chink" than my monolidded sisters.)

And what about other forms of plastic surgery? Also on the rise are breast augmentation and profile-related procedures, so why aren't there magazines devoted to the "A-Cup" or "Pancake Face" to celebrate yet another *perceived* typical, though certainly not universal, Asian trait? (As stated earlier, about half of all Asians are *not* monolidded).

Or are we, as AAs, just being typical Americans? After all, if ethnic and racial minorities made up 15 percent of all plastic surgery procedures in the U.S. in 2004 (down from 20 percent in 2003) — AAs consisted of 3 percent, half the amount of Hispanics and 40 percent less than African Americans — that means that the vast majority of procedures are still being done by white Americans. Face it — Americans in general are obsessed with plastic surgery, and we don't need reality shows like *Extreme Makeover* and *The Swan* to prove it.

I have to admit — when I started researching this article, I had my own preconceived beliefs about plastic surgery. What's the big deal? Lots of people do it — Asian, black, white. If I had the courage and the funds and the time, hell, I'd probably do something. Who doesn't want a magic pill (or scalpel, as the case may be)

that will make you look better? I've done microdermabrasion, magic straight perms, self-tanning, even laser spot removal. Were any of these things motivated by self-hate, or a hate of my ethnicity? Goodness, no. Were they motivated by a desire to look more Western, to fit in to that blonde cheerleader American standard of beauty that I grew up with? (Maybe the self-tanning part — I did grow up in the O.C., after all.) But the microderm, the straight perms and the lasers were categorically motivated by a desire to achieve that prototypical Asian beauty ideal that I felt I lacked — clear, translucent skin and thick, stick-

Which is why it disturbed me when I kept seeing terms like "westernization," "deformity," and, worst of all, "Oriental to Occidental" when researching Asian plastic surgery.

Getting Ethnically Correct

It seems that much of the problem in this debate lies in the terminology and, quite simply, good old-fashioned historical ignorance. It is true — the earlier literature and thinking on this topic viewed Asian blepharoplasty as "westernization of the Asian eye" — an offensive phrase no mat-



straight hair. Come to think of it, if my search for the perfect fake tan could be construed as mimicry of my long-legged, fair-skinned counterparts, maybe Gwyneth and Jennifer had secret Asian longings when they went for blowouts every week a few years back.

Now I know that's silly. After all, when my Korea-born and -raised mother talks about her teenage icons of beauty, she mentions Natalie Wood and Elizabeth Taylor — even a post-war generation on the other side of the world couldn't help but be influenced by a Western standard of beauty. But yet I refused to believe it. It can't be cultural colonialism. I'm certainly not a victim of Western aesthetic brainwashing. And I refused to believe my Asian peers were also.

ter what your stance. Indeed, until recently, textbooks and training on plastic surgery made the assumption that any desired facial change was a change toward a more European look. According to Dr. Edmund Kwan, a renowned plastic surgeon based in New York whose clientele is mainly Asian, articles published on Asian blepharoplasty in the '60s and '70s called it "westernizing the eyelid." At that time, surgeons often interpreted an Asian patient wanting an eyelid fold as wanting to look Caucasian and admittedly, "there was actually some demand by patients because they wanted to assimilate into Western culture," he says. "There weren't that many Asians in America. Asians were not mainstream. And I think some people probably felt ashamed and like they were

outsiders if they didn't look Caucasian.”

According to Dr. Kyeyoung Park, an associate professor of anthropology and Asian American studies at the University of California at Los Angeles, the ever-changing structure of the world political economy and predominance of Western culture in the first half of the 20th century did indeed drastically change the beauty ideal in Asia in favor of a more “Western” look. Back then, she says, “when [Asians] were poor and when they were so preoccupied with survival issues, they also developed an inferiority complex, even in terms of aesthetics.”

problem, that kind of tilt to the eye. And now that's desirable, that's more attractive, that's sexier. So I think things have turned around.”

And hand in hand with a growing appreciation for diversity and a higher social awareness come advances in technique and a deeper understanding of the anatomy of the Asian eye, resulting in more ethnically sensitive procedures. “We now know more about the anatomy and the explanation for why there's no crease, so we're able to recreate [naturally-occurring] creases,” says Dr. Mervin Low, who trained with Dr. Robert Flowers, a



The ever-popular Asian blepharoplasty procedure, before and after.

So it seems that there was a time when the ethnic self-hate argument applied. Maybe we did want to look white — perhaps even as recently as in the '80s and '90s. But is there a stirring, however slight, in the winds of change today? After all, portrayals of Asians in the world media today have come a long way from the days of Susie Wong, and diversity is embraced more than ever before. “Asians now have become more mainstream,” says Dr. Kwan. “Today, Asians are everywhere — TV, magazines, everywhere. So people are [going] back and saying, ‘Hey, it's OK to look Asian.’” He cites Lucy Liu as a prime example. “I mean, she's got very slanted eyes and it looks good,” he says. “Twenty years ago, forget it — that would have been a major

renowned pioneer in Asian plastic surgery. Additionally, knowledge about the differences in folds among Asian groups contributes to the ability to create that which occurs naturally in a given population. “Creases can vary between different Asian groups, between individuals and even within the same individual,” continues Dr. Low. “Not all creases are the same. Careful analysis of creases is crucial in Asian blepharoplasty.”

In fact, “ethnic correctness” seems to be *the* new catchphrase in the industry, perhaps as a reaction to the extreme and oh-so ethnically *incorrect* plastic surgery icon that is Michael Jackson. Makeover reality shows make a point of emphasizing the “ethnic correctness” of a rhinoplasty or other proposed facial procedure

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on a non-white subject. All of the doctors and medical centers specializing in Asian plastic surgery that I researched likewise placed a good deal of emphasis on their goal of “ethnic correctness.” Again and again, they propound that they do not believe in changing the ethnic characteristics of one group in favor of another.

And thank goodness — AAs are finally realizing that you may be able to scalpel the “Western” into our eyes, but you evidently can't take the Asian from the rest of our resulting imbalanced faces. Every time I think of a “Western” Asian eye, I think of Julie, my summer camp friend from junior high who had gotten the procedure done in the early '80s. The crease the doctor had created *way up there* made her look like she was con-

stantly tired and 70 years old. It was *not* an improvement.

But take a look around today. The man-made double lids of late are dainty, you might say, and look very, *very* natural — more Ziyi Zhang than Cindy Crawford. It's difficult to tell who's "gotten it done" and who hasn't. More and more AA women are going to their plastic surgeons requesting natural-looking double eyelids, the kind that occurs in about half of the Asian population *naturally*, says Dr. David Kim, a plastic surgeon with the Beverly Hills Surgical Institute. In fact, he says that a Western-looking eye, one with a large crease, is something his Asian patients explicitly *don't* want.

As a result, AA women are opting for a non-incision form of Asian blepharoplasty because of the more natural, shallower crease that it can create, says Dr. Robert Kure, a plastic surgeon in Beverly Hills who perfected his own non-incision method. "Korean patients come here with their mother and when you look at their mother's face [who had the surgery over 30 years ago in Korea], they have a Caucasian-type eye [with] a deep crease and no fat. [Their daughters] don't like that kind of look."

If Not White, Then Why?

So if the trend is not to achieve a Western look, then why are so many AAs getting their eyelids and other cosmetic procedures done? Ask women today and you'll find that the reasons range from facilitating makeup application to increasing the size or exposure of the eye to a desire to look like their other Asian friends. After years of having to apply heavy eyeliner for it to even show when her eyes were open, Jenny, a 30-year-old wife and mother of one, recently got her eyes done, despite always having looked down on any form of plastic surgery. "I got it done after I got married, so it was easier — I didn't care so

much about what other people thought, I guess," she says. Although at first she regretted getting the procedure done — the creases turned out asymmetrical — she says that even knowing what she knows now, she would still do it again because it's made her life easier and she likes not having to wear so much makeup.

Sally, a 23-year-old Korean American who says she was happy with her looks before her surgery, says she ended up getting it done simply because "I wanted to see what I would look like," likening it to wearing eyeliner or changing hairstyles. "I don't have a good reason as to why I got it done," she says. "But for sure it wasn't because I wanted to look more Westernized. I think these days most girls don't get it to be more Westernized — that [thinking] is outdated. My generation is already 'Westernized.' We don't have to do anything extra to try and be *more* American."

But does that mean we've broken the manicured iron grip of the white American beauty standard we are bombarded with daily? Not completely. Indeed, all the doctors this writer spoke to admitted that there was still a small percentage of Asian patients who explicitly request a Caucasian face or look. One 24-year-old permanent makeup artist named Karen admits that when she underwent the double eyelid surgery, she brought a photo of Janet Jackson to show her doctor what she wanted to look like. Ironically, while Karen does attribute the American media and growing up "looking at women like Audrey Hepburn and Sophia Loren" as a major influence, her mother provided the main source of pressure, she says. "Apparently in Korea, [double eyelid surgery] is a normal thing and so she was always telling me since I was a little girl, 'you have to get it done when you get out of high school,'" she says.

"[My mom] would always sit there and kind of poke at my eyes and try to make a crease."

And there's the kicker: Are we as AAs lulled into a need for plastic surgery, if not to try to look like our white American peers, then because of the *other* facet of our multicultural selves — our *Asian* side? Some argue that our love of plastic surgery stems more from Asian than American influences. Karen grew up with her mother telling her that "back in the day when [my mother] was a young girl [in Korea], anyone who had [a double eyelid] naturally was just considered very beautiful." Similarly, Sally believes that the pressure to get plastic surgery stems more from Korean culture than it does from American culture. "It's a trend to get it done," she says.

That was certainly the case for Lauren, a 27-year-old pre-law student. A former model in the States, she entered the Miss Korea pageant in 1997. While doing photo shoots in Seoul, she began to develop a complex. "Every photographer



The new beauty standard — do these women look "Western" to you? Clockwise from left: Ziyi Zhang, Lucy Liu and Hyegyo Song, a popular Korean actress and cosmetics spokeswoman.



PHOTOS COURTESY OF OLIVER CARNAY INTERNATIONAL ARTISTS.



PHOTO COURTESY OF KOREAN JOURNAL.

out there pointed it out to me. They said, 'if you want to do this kind of work, you have to get your nose done,' like, 'what is she thinking coming out to Korea without getting [her nose done],'" she recalls. "I didn't even know I had a flat nose until they pointed it out. I guess in Korea, in that kind of industry, everybody has it done. It's kind of a given."

Although Lauren had modeled for several years in the States prior to going to Korea, no one ever had a problem with her nose. Nevertheless, she returned to the States to get an implant from bridge to tip. While at first she wanted the implant for career reasons, eventually it became personal. "You only think about it when someone points it out to you — [that] your nose is kind of flat," she says.

Indeed, beauty standards predominant in Asia often have a profound effect on Asian women in America. According to Dr. Kure, one procedure that is fairly common among a certain segment of Japanese women in America is micro-liposuction. And it's not because of the lipo craze in the States — it's actually the pressure to be very, very thin back in Japan. "When they go back to Japan — they often go back once a year, twice a year —

their friends over there are skinny, really skinny," says Dr. Kure. "They have almost no fat around the waistline and especially Japanese men in Japan like really thin legs. It's really tough to be an attractive woman in Japan after age 30 because everybody else is so skinny."

The kind of micro-liposuction these Japanese women undergo is much more technically difficult and time-consuming than your average American liposuction.

We're talking about a woman of, say, 115 pounds wanting to remove that little pooch in her belly so she can be down to 105 pounds with a flat-as-a-board stomach. Or legs where the very tops of the thighs touch ever so slightly — no part of the entire leg is supposed to touch, according to such standards, and in fact, should allow for a 1- to 2-inch space between the thighs. "Most American people don't really care about this, this is fine," says Dr. Kure, pointing to a "before" photo of a Japanese woman's thighs. "But [for] Japanese, there has to be a space [between the thighs]." All this, despite the fact that, according to Dr. Kure, plastic surgery is considered taboo in Japan.

And it doesn't stop there. Doctors in Asia perform all sorts of procedures few have heard of in the States — leg lengthening in China, where your calf bone is forcibly broken and then slowly, excruciatingly stretched over several months; botox injections and nerve severing in the calves to shrink the muscle for a leaner leg; and hyaluronic acid injections to build up flat nose bridges and chins. And if you thought plastic surgery was popular in the States, consider these numbers: it is estimated that one in 10 adults in Korea have had some sort of cosmetic upgrade. In Taiwan, a million procedures were performed last year, double the number from five years ago. And there was a reported 25 percent increase in cosmetic procedures in China in 2003, a country which only two years ago lifted a ban on beauty pageants and in the following year, held its first annual Miss Artificial Beauty competition.

Which brings us to the question: Why stop at the eyes? ❄

This discussion's not over yet. Look for part two of Cutting Through the Plastic in the June/July 2005 issue of Audrey, where we examine plastic surgery beyond the eyes and the changing beauty standard.

*All patients' names have been changed.