

HEALTHBEAT

Plastic surgery is moving beyond Extreme Makeover

I must admit — a part of me does enjoy the attention that reality television has showered upon plastic surgery. Largely as a result of these shows, people are no longer inhibited to find out how they could possibly look better. In fact, during a recent Bears game at Soldier Field, I missed a Devin Hester touchdown because the guy in the next seat wanted to know what I could do about his “man boobs.”

Lost in the buzz of all the plastic surgery reality TV, however, is the fact that our specialty encompasses so much more. Not only are we able to make patients look and feel better, we ultimately enable them to live better.

Beyond cosmetic surgery, plastic surgeons are trained in all aspects of reconstructive surgery of the head and neck, trunk and extremities. After three to five years of initial general surgery training, the future plastic surgeon then completes two to three years of specialized training. Further, after completing plastic surgery training, many of us pursue additional fellowship training in subspecialties like hand surgery, microsurgery and pediatric plastic surgery. With this breadth of clinical experience, the plastic surgeon becomes a creative “problem-solver,” improving both form and function.

This advanced clinical training has benefited many of my patients at Advocate Good Samaritan Hospital. For many of them, undergoing plastic surgery was “not an option.”

A recent patient of mine was a young man involved in an industrial accident. He sustained major trauma to his eye socket. He required reconstruction by taking bone graft from another part of his body and attaching the bone to the eye socket with titanium plates and screws. Undergoing plastic surgery for this patient did more than restore his appearance; it allowed him to return to his regular job without difficulty.

Take the case of a middle-aged man involved in an automobile accident who suffered a crush injury to his leg with extensive soft tissue loss. He required a transfer of muscle from his back to his leg and hook-up of the



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arteries and veins with use of the microscope. After plastic surgery and physical therapy, the patient’s leg function has been restored and he is now able to walk without pain or limitation.

A heavy laborer sustained a crush injury to his hand with extensive bone, tendon and nerve injury. He required bone reconstruction with placement of titanium pins, staged tendon reconstruction with silicone rods and microsurgical nerve repair. After this extensive subspecialized plastic surgery and occupational therapy, this patient regained full use of his hand and returned to work.

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Lastly, a teenager was injured while riding a motorcycle, losing most of the skin on the back of his hand. Through a series of procedures, I created a flap of skin to repair the injury. Ultimately, this plastic surgery made it possible for the patient to resume all activities, including driving (a car, not a motorcycle!).

As you can see, the procedures performed by plastic surgeons can be quite diverse. Now, I doubt that you will ever see Dr. Christian Troy perform any of these operations on the next episode of Nip/Tuck. But remember this article if you ever find yourself in the emergency room or hospital. If you are told that a plastic surgeon will be coming to evaluate you, trust that the plastic surgeon’s role goes well beyond restoring and enhancing your physical appearance. The plastic surgeon can restore function after an injury, making it possible for you to feel better and ultimately live better.

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