Are Nurse Injectors the New Norm?

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Purpose: As botox/filler use has increased in recent years, a growing number of non-aesthetic health professionals have emerged to perform these procedures. Since studies have shown that patients identify training as the most important factor in considering these procedures, this study seeks to summarize the perspective of plastic surgeons regarding these paradigm shifts. (1,2)

Methods: In the summer of 2013, an 8-question survey was sent to members of ISAPS, ASAPS, and ASPS (approximately 26,113 plastic surgeons globally). 2 questions assessed practice location and membership affiliation. 6 questions assessed various healthcare practitioners' capability for administration of Botox, fillers, and vaccines (control). Healthcare practitioners included plastic surgeons and dermatologists, gynecologists, dentists, nurses in plastic surgery and dermatology, or nurses in other fields.

Results: On three email notifications, 14,184 plastic surgeons opened the survey and 882 responded, 36.6% from North America, 29.1% from Europe, 12.9% from South America, 10.1% from Asia, 4.5% from the Middle East, 3.4% from Australia, 1.9% from Africa, and 1.6% from Central America. 77% believed nurses were not as capable as plastic surgeons in administering Botox; 81% felt the same for fillers. Conversely, 84% agreed that nurses were as capable as plastic surgeons in administering vaccines. Plastic surgeons ranked nurses in other fields (48%) as most capable in administering vaccines, then plastic surgeons (42%), nurses of plastic surgeons (9%), gynecologists (1%), and dentists (<1%). When asked about botox/fillers, responders ranked plastic surgeons (98%) most capable, then nurses in plastic surgery (2%), gynecologists (<1%), dentists (<1%), and nurses in other fields (<1%). When asked to rank according to patient perception, the order remained the same.

Conclusion: Based on responses from over 880 plastic surgeons globally, plastic surgeons consider themselves and dermatologist as the most capable injectors. However, they still believe nurses in other fields to be the most capable of administrating vaccines. This dichotomy may define the role of various practitioners in an increasingly more competitive injectable environment to improve patient satisfaction and outcomes. (3,4,5) Given that the majority of growth in cosmetic injectables is being driven by other providers besides plastic surgeons and dermatologists, further clarification on training requirements and practice guidelines may be necessary to ensure a consistent, reproducible experience for the patient.

Reference Citations:

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