

Do we really need Botox?

Handbook Of Anti-Aging

A Gift to Hagar's Foundation for Single Mothers

Volume 1.0

Sofia Din, M.D.

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Dedication: To Hagar, The Original Single Mother and the Eternal Immigrant

Who was Hagar? There are various religious stories about her origin, but everyone agrees that she was an Egyptian, and that she was given to the Prophet Abraham to serve as the handmaiden of his wife, Sarah. Hagar was very beautiful and also quite resourceful. Muslims believe that she was married to the Prophet Abraham while acting as a surrogate in efforts to bear a son for him. Their son was named Ishmael. Sarah was anxious about her own aging and she was worried that the prophecy of her giving Abraham a son might not happen. This is why she arranged to have Hagar involved. Despite her worrying, Sarah actually became pregnant a few years later. She gave birth to a son named Isaac. Both women started disliking each other, and Sarah ultimately asked Abraham to let Hagar go. (This is not the first time two strong women fought over a man, where one of them won and the other one had to move on.)

So Abraham abandoned Hagar and their son Ishmael to the desert with some food and water, and nothing more. Their meager supplies quickly declined and Hagar frantically searched for water, becoming desperate as the fear for her son's safety escalated. Suddenly, a spring miraculously appeared. This reservoir had been close by all along; however, in her heightened state of anxiety, Hagar was unable to see it. The water helped her realize that her son would be safe. As a result she was able to eventually calm herself down. She became reconciled to God's will, and accepted that Abraham would never return. Hagar and Ishmael eventually settled down to a new life. Ultimately Ishmael married a very beautiful girl. It is stated that through her progeny Prophet Muhammed was born.

Hagar is recognized in all of the Abrahmic religions—Judaism, Christianity and Islam. Arabs call her Hajjara and during Hajj, the annual pilgrimage to Mecca, Muslims are required to retrace her steps as they rush (yes, the pilgrims rush!) back and forth through the valleys of Safa and Marwa seven times. This is said to be done at least once in a lifetime in order to honor Hagar's desperate search for water, and to relive her state of hunger and anxiety. The reservoir she found is now considered a source of holy water. It is noted that the Prophet Muhammed instructed that this part of the pilgrimage is essential. This is to be followed as Muhammed had a revelation that he was Hajjara's descendant.

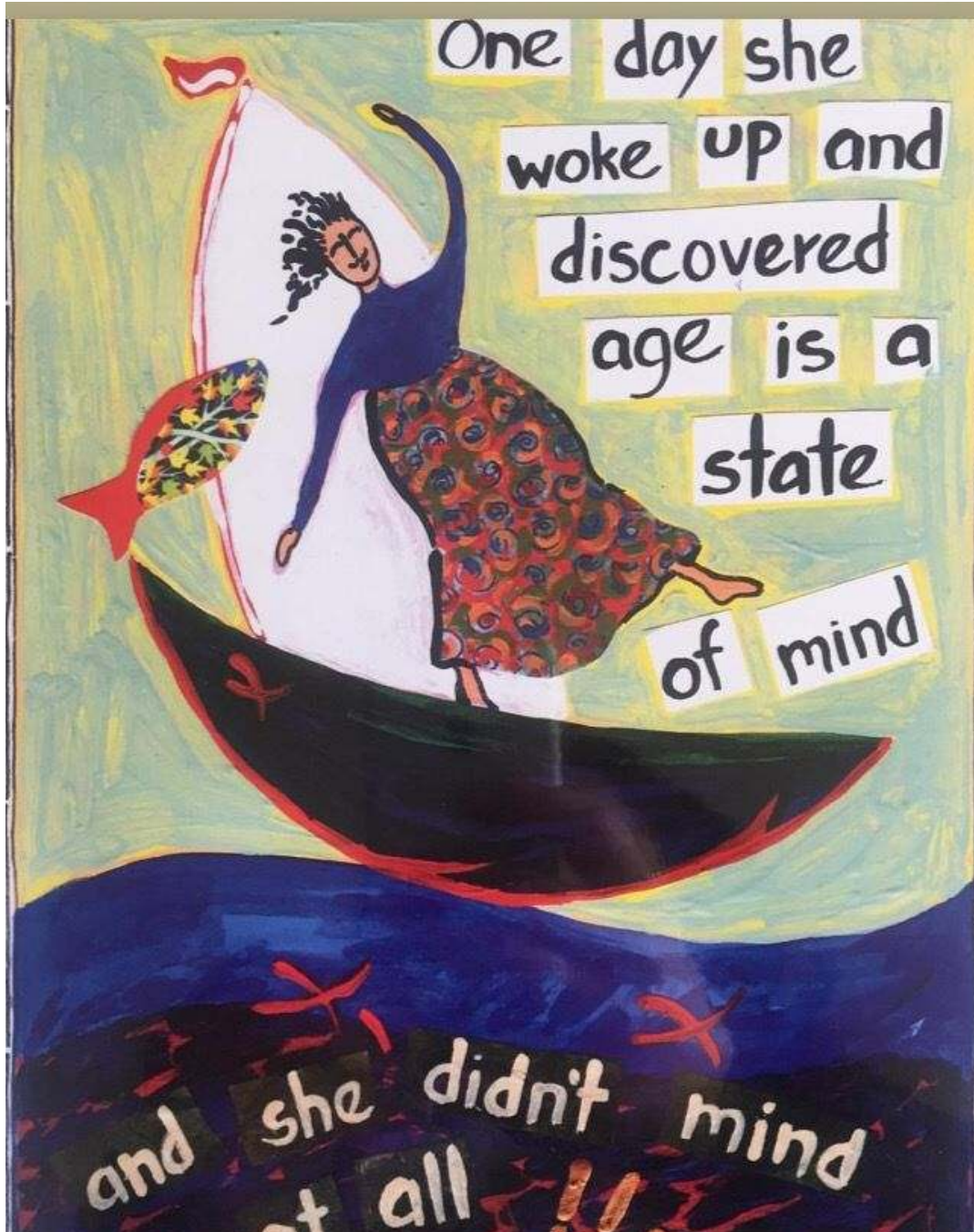
The soul of Hagar's story resonates with my own life's journey. Although I no longer consider myself a single mother, over the years I have come to truly empathize with the burdens, toils, vulnerability, and angst of single motherhood. For this reason, I have chosen to dedicate my first book to Hagar, and to change the name of my foundation from Juvanni to Hagar's Foundation for Single Mothers. The proceeds of this book will go entirely to Hagar's Foundation, which will provide a reservoir of support and guidance to single mothers. And just like Hagar was a believer in the divine light and mercy of the Almighty, I will seek to follow her light.

Having been blessed with professional success, while also arriving at a place of personal happiness and fulfillment, I will be dedicating much of my time to Hagar's Foundation. During my years of practice, I have found that what is profitable may not be healthy, and vice versa. As a solo practitioner, I cannot change the healthcare system; but I can work to change the focus of my own practice, and follow a not-for-profit model. Therefore, the full proceeds of this book will go to Hagar's Foundation.



In this phase of my career, as I continue to serve all people, I will especially dedicate myself to supporting single mothers so they can live their lives with purpose, vitality, and overall wellness. I extend my support by continuing to employ single mothers at my medical practices. I recognize they have unique needs and struggles as they enter the workforce and try to advance professionally. To help address these barriers, one of the first programs to be implemented at Hagar's Foundation is a job interview preparation package. Resume writing, interview preparation, and coaching

services will be provided. Additionally, salon services, such as hair styling and makeup, can be provided in preparation for the interview. We will even assist with fresh, dry-cleaned clothes, if needed. We charge 1/3rd the cost of market value of providing these services and, in certain deserving cases, we ask them to help someone else later on by paying it forward. Other programs include life coaching, health and wellness coaching, financial literacy, and meditation workshops. These are areas of support that women need in general, but especially women in complex societies, who have to fend for themselves financially. I hope you will decide to purchase this book because you are curious about the approach it offers: rethinking the relationship between medicine, anti-aging and well-being; but, also, so you can also feel good that the proceeds go to making services like these available to those who need them but cannot otherwise afford them.



What is Anti-Aging and Why does it Matter?

Cheers to All My Whys!

What is this book about and why am I qualified to speak about anti-aging?

This book was written to instruct as well as amuse you, hopefully simultaneously. It will explain and illustrate procedures currently being used worldwide in efforts to help people age with more energy, vitality, beauty and grace. It will serve as a handbook to help you navigate through your own aging process.

I am a 48 year old, formerly single mother of a 20 year old girl. I am a board certified Family Medicine Doctor who has been directly managing the health of patients over the past 15 years in a wide variety of settings; some patients are acutely sick in hospitals, while others are seen in my clinics, or living in nursing homes. I have experienced healthcare systems at opposite extremes--in Pakistan, my country of origin, where I originally trained in medicine and surgery, and in the United States, where I re-established myself as a doctor, and completed residency training again before establishing my practices. I now own and manage a medical practice as well as an anti-aging/wellness center.

I have no Yale or Harvard degrees to boast of, since I am an immigrant from Pakistan. However, I have worked very diligently and consistently over the years to gain mastery in the fields of primary care, geriatrics, aesthetics and antiaging, while honing my medical skills and techniques. One of my potential cognitive biases, or distortions in writing a book like this, is to be conscious that it can be viewed as an advertising tool only, and not be taken seriously for the anti-aging message it contains. But my practice is already quite busy with great retention rates in a very competitive market, due to the high quality of our services and products. This book is not just an advertising tool for Hagar's Foundation (which is Juvanni's non-profit resource center for single mothers) It also contains parts of my own life's journey, and the knowledge and skills I gained as I have helped and cared for other human beings as a doctor.

My approach to medicine, especially aesthetics and anti-aging, grows directly out of my experiences as a woman, and as a doctor. As a woman, growing up in Pakistan wasn't easy. Although blessed with an educated family that allowed me to go to school, I suffered from low self-esteem and mild depression much of my life. This made me very introverted. I also suffered from psoriasis, an autoimmune skin disorder that leads to scaly patches that make you look as if your skin is disintegrating. Imagine a teenager with sloughing skin all over her body. It felt worse than facial acne; I also suffered from that every now and then. Battling a chronic skin disorder, especially when young, is an awful experience. One never gets better. No topicals or pills work, and every treatment has a list of side effects galore that can make you wanna puke, just reading it. At least in my case it did. My brain and my immune system played havoc with me as I struggled through high school, college, and medical school.

I've always had a strong spirit, but this is not always an asset for a woman in many other cultures and contexts. So even though I am a firm believer in marriage, and upholding our sacred vows, my list of accomplishments includes two failed arranged marriages. As a young and self-conscious woman, I had low self-esteem, so I never really looked for a boyfriend. The boys I liked didn't really like me all that much, and vice versa; this even applied to those I was married to. For me, arranging to marry the second husband felt like taking a second job: signing the contract, getting housing, health insurance and even the possibility of having a child that I can call my own. Instead of being exciting, I found my job totally toxic and negative. My environment was very unpredictable, and could turn violent since he had anger management issues. Testosterone in men is not always a blessing.

But it wasn't altogether bad: coming to America to marry my second husband was also a second chance at life. Americans celebrate Independence Day on July 4th, but I celebrate it again on October 10th, the

day I got on the plane and came to New York. No matter how difficult my personal life got in New York, it was always better than where I had come from, and it ultimately allowed me to make the life I now love. After the birth of my daughter, my psoriasis pretty much went away: motherhood and its hormones came like a blessing for my body. Eventually, after 13 years, I divorced my second husband. We became much more friendly with each other after our divorce. The loss of marriage, perhaps, broke him down a bit, and he became a nicer person to me. My daughter found it much more pleasant when we were divorced and not taking each other for granted. Unfortunately he suddenly passed away in 2014, leaving my then 15 year old daughter in a spiral of grief. But my divorce helped me with my depression and self-doubt. I started realizing that good things start happening when you protect yourself from toxic circumstances, start viewing yourself through your own eyes instead of others, and create spaces of love, support and success for yourself.

I always knew that I was going to be a doctor, and I was driven from a young age. When I was 4 years old, I asked my mom for a syringe and a stethoscope so I could fix my little sister. My parents were not interested in getting me any toys. They were the original authors of Desi Austerity 101. After waiting only 6 years, I finally got my first stethoscope and doctor toy set when I was 11 years old. In the subsequent years, I also managed to somehow become a doctor in Pakistan despite suffering from mild depression and low self esteem due to my skin condition and a broken first marriage.

During my very short-lived (1 year long) first marriage I heard someone mention how they got married to someone in America, got a green card and moved there. A light bulb lit up in my head. Could I do that too? Move to the land of the Free and the Brave? Will the Lady Liberty accept the wretched waste that my existence had been so far? After my first divorce, as I struggled to finish medical school in Pakistan, my mom told me about a proposal by a 37 year old young and charming Kashmiri New Yorker. He

was also a Wharton School of Business Graduate, and worked as an accountant. I readily said yes. I was also going to be his second wife. He had a failed short-lived, previous marriage from which he had two beautiful kids, a boy and a girl who lived with his ex-wife. So I moved to America for this arranged and, as it turned out, mainly unhappy marriage. I was blessed with a girl-child who I wanted to raise in America, and give her a better cultural environment than my country of birth. I decided that my best option was to change my job from that of a wife to a doctor again. This would help me to become independent of my second husband who was quite temperamental and emotionally unstable. Practicing medicine again was my ticket to freedom.

To practice Medicine in America, there were rules. You needed to prove your “right of passage” by taking a series of extremely difficult exams. So after going through 7 years of medical school I had to re-take all examinations in the U.S. before I could even apply to train in a residency program. Residency programs are designed as a way to monitor and train new doctors under supervision before they are allowed into the United States healthcare system. This meant taking the US Medical Licensing Exams, and completing a residency training which was not easy at all. The first step was especially a challenge for me because the USMLEs are not only difficult. but they are also the product of a totally different system of education and test taking than I was used to back in Pakistan. Plus, I had a very mild case of dyslexia where I read very slow since I was a child. Initially, I attributed it to being multilingual, but as I got older I became aware of how slow my brain processed written words and it took me literally twice as long to read what others could read fairly quickly. Despite this, just by working longer, I was able to overcome my dyslexia, and I completed medical school. But the Pakistani system of education is predominantly British, and it places more emphasis on thought building, essay writing and getting your message across, etc.. But Americans were not about that life. This was especially true in New York where everything was simply faster.



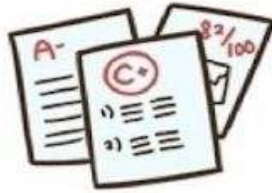
No one took the time to breathe deeply and absorb the magnificence that surrounded them. Even the testing process encouraged rapid memorization and regurgitation, not practical skill or reflection. There are three USMLE exams and each are nine hours long. Doctors answer 50 questions in 60 minutes for nine hours with very few breaks for food. I mean what's up with all the multiple choice questions that you have to answer within a minute? Robots and computers can do it much better than humans. But I would wonder if robots could really connect with a human being and solve their

problems with empathy, love and grace like a fellow human could? *Anyway, long story short, overcoming my partial dyslexia to re-establish myself as a doctor in America was nothing less than learning mental acrobatics all over again, only this time, while being a new wife and a new mother in a new country.*

After completing my recertification I managed to find a residency training program in Family Medicine close to my house. This meant I could still manage to look after my daughter who was only three years old at that time. Landing with a residency program 20 mins away from my home was such a blessing. I knew my then-husband would never allow me to move to another state and I would have to battle for the safety of my child. By the way, finding residency while competing with American medical graduates is also not easy. These are young, energetic and well trained individuals, who have bought their rights of passage into healthcare by paying their dues at big American medical institutions. I still remember Dr. Joseph Halbach who selected me into the residency program and gave me a chance to free myself from the economic bondage of my second husband. After completing residency I decided to open my own practice. I did not want to take up any jobs working for someone else. I had already tried out two toxic marital careers, and serving another person or organization was not a choice, not even to gain experience.

things I needed to hear 5 years ago

by chibird



**you won't even
remember these grades**



**not every friend
is forever**



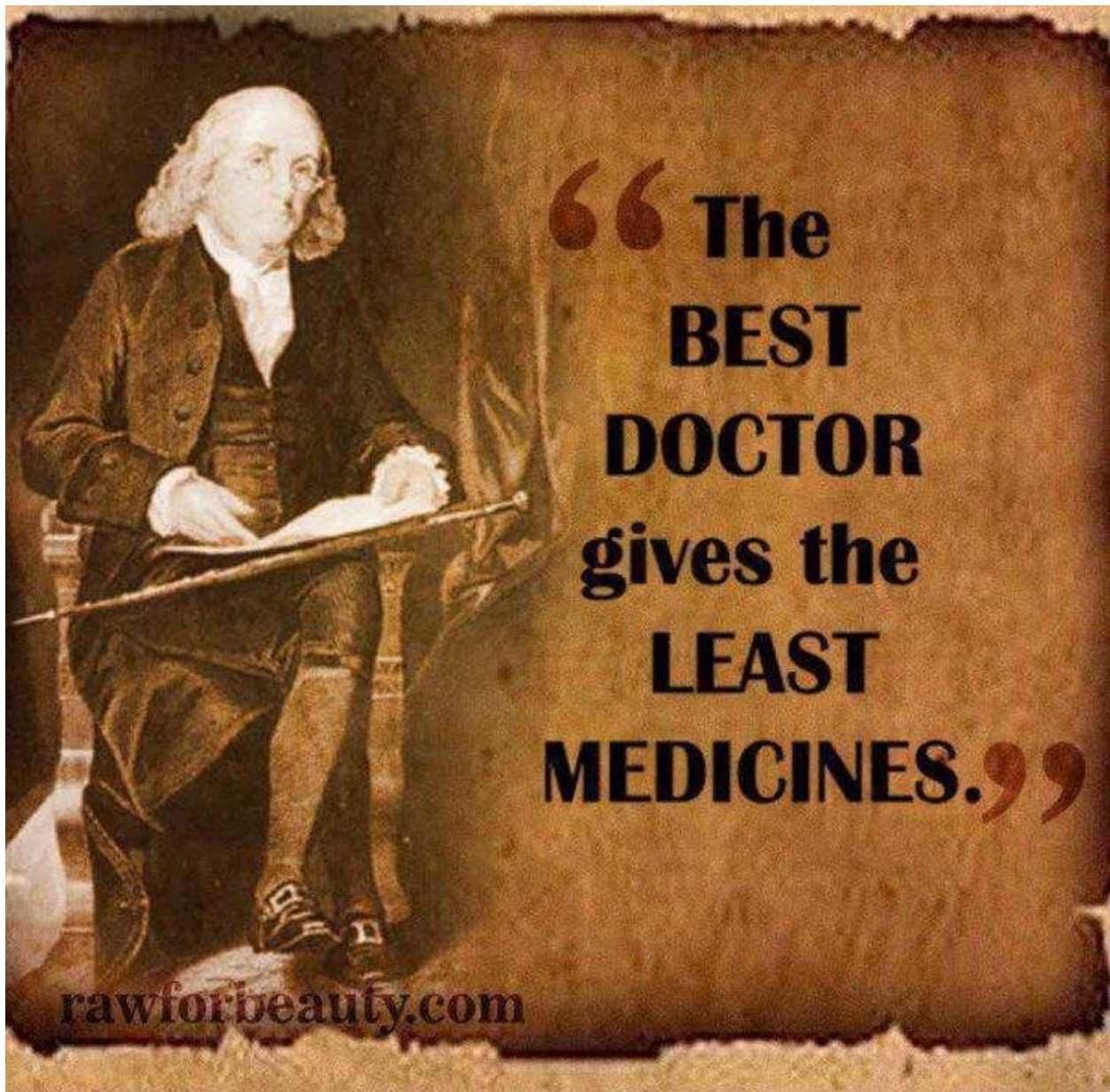
**your hard work
does pay off**



**it turns out okay,
I promise.**

Since my husband did not support my life's ambitions on an emotional or financial level, I needed to find other sources of support. I was able to borrow money from my girlfriend, Sophia (half her paycheck for several months), to start my own medical practice. I worked consecutive shifts at my own practice and as a hospitalist to pay for office overhead. All that work allowed me to gain experience and grow my business quickly. At the same time, I was invited to become the Medical Director of a nursing home and medical rehab center. This was a large facility that cared for the elderly and also provided post-operative and protracted illness care. I served an aging and sick population for almost six years. My practice had its own wound care doctor, Nurse Practitioner and some really experienced doctors to advise me as we began managing geriatric health. I also tended to

patients in the hospital close to my office, St John's Riverside Hospital. First, I served as an attending physician, then as faculty, and finally on their board. In all of these contexts, I managed acutely sick patients alongside trusted colleagues.



From these diverse and extensive experiences, I learned one overarching lesson: healthcare in the United States operates mainly as sickness management. Once you get sick, insurance companies start paying for medications, tests, admissions, and doctors. No one is bothered about your

wellness or anti-aging or overall well being. There were other lessons life had taught me up to this point: such as the relationship between the way others see you and the way you see yourself, and its impact on your self-esteem. I learned about the need to have control and agency over central circumstances of your life. These combined realizations led me first to start a second practice with an exclusive focus on well-being, anti-aging and aesthetics (Juvanni Med Spa and Anti-aging Center). This would begin a systematic study on types of medical care that are mainly neglected and certainly not covered within the American health care system. Then I could also develop Hagar's Foundation for Single Mothers so that at least some of those who cannot afford to pay for this kind of care out-of-pocket are not denied access to it.

Many family members questioned me about sharing my story with the world as I invoked their support for my cause. Why do you have to tell people about your past? I had heard Hasan Minhaj's (he is a very famous and popular comedy show host of Indian descent talking about his parent's reaction to some personal event on an episode) "log kiya kahein ge?" or "what will people say?". My mom would say exactly the same thing and I would tell my mom: how can I convince people to follow my advice if they don't know who I am or why I am saying what I am saying? My credibility has to be established by my work and, also, my narrative about my work. It is only then that I can seek their help in my cause.

So what is my cause? As a doctor I believe in disease-free aging for everyone, but I am focusing my efforts to help the single mother who needs to live with more energy, health and wellness. I consider single mothers to be more vulnerable to poor mental and physical health outcomes. The reason I believe single mothers are more prone to ill health is because of my personal experiences and choices, despite my medical education and skills.. Therefore the mission of Hagar's Foundation is devoted to the welfare of single mothers everywhere. All our future programs will also be designed to help single mothers around the world. We currently have programs to help single moms get better jobs.

But first let's figure out what anti-aging really is

The dictionary says that "it's a product or a technique that is designed to prevent the appearance of getting old." **Why is preventing the appearance of getting old important?** In my opinion, it is very important for us to make ourselves look youthful because our brains work in a very strange way. Philosophy, psychology and medicine agree on the central importance of how you think of yourself—your self-conception—to how you feel, what you do, and how you react in different situations, etc. If your brain begins to internalize an old or aging image of yourself, your self-conception may shift subconsciously in the direction of what you think old people are like. This can cause distress and even start a cascade of preparing for infirmity, and getting ready to die. It doesn't help that our culture idolizes youth, and presents us with few images of older adults as vital and attractive.



drnaomi1
Sydney Australlia

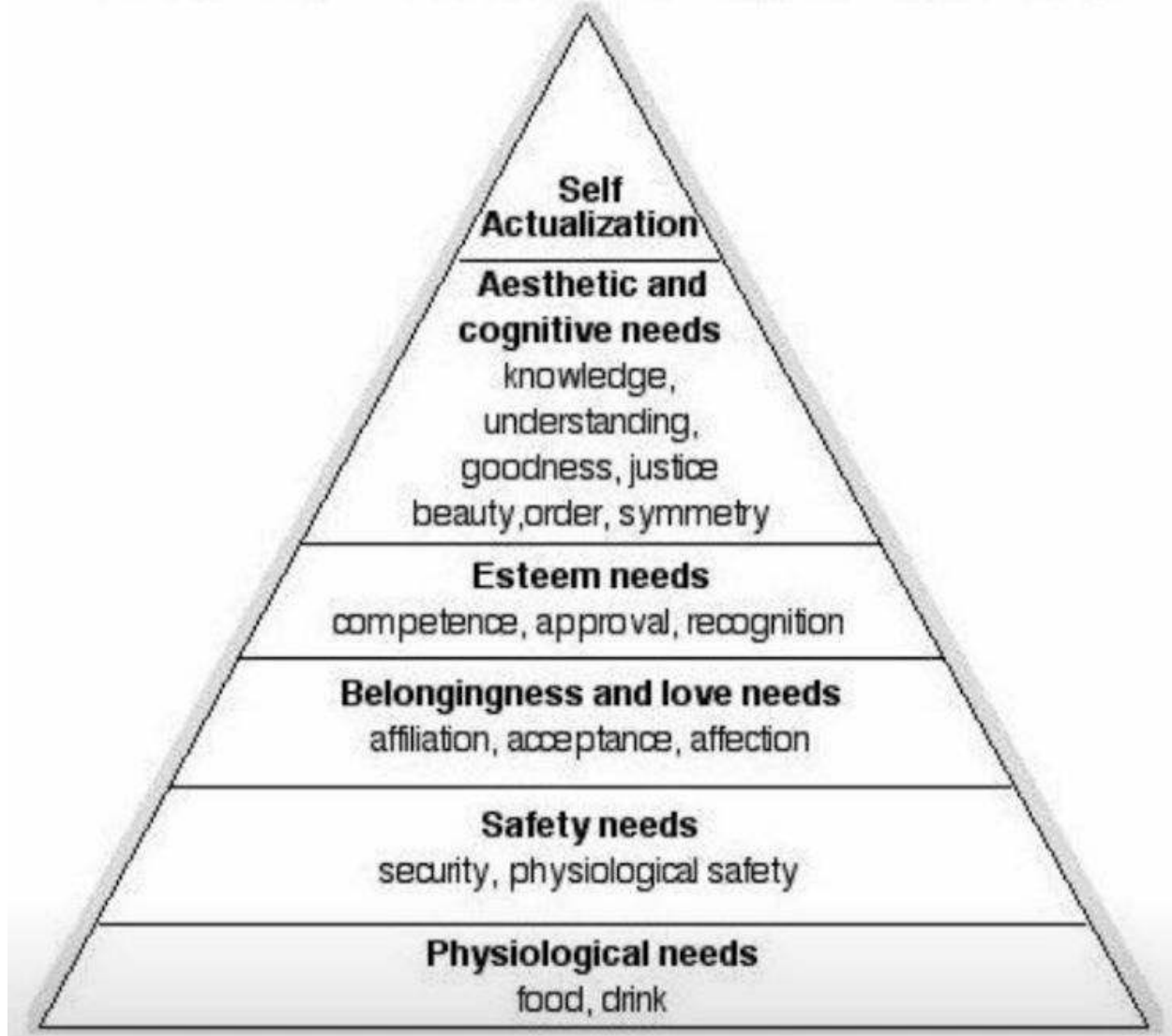


BARBIE AGE 42. DIDN'T DO ANYTHING TO HER
SKIN WHEN SHE WAS YOUNGER BECAUSE SHE
HAD *GOOD SKIN ALREADY* .

As a result of a shift in your implicit self-conception, you can start feeling tired and developing different chronic illnesses. Despite being ill, the modern healthcare system won't allow you to die that fast, as there are

antibiotics, chemotherapy, painkillers, sleeping pills, and mind numbing agents like anti-anxiety meds. Additionally, there are some very cool technologies that will surely keep you alive, at least 25 to 35 years longer than your brain wants you to live. *Since, maintaining the appearance of your skin is not considered a medical concern, very little emphasis is placed on the upkeep of our facial skin as we age. In my opinion, that's a flawed stance.* How our brains view ourselves and how others view us can translate into rapid progression of aging. As the field of neuroscience is developing, our understanding of mirroring neurons is also advancing. Mirroring neurons in this case is when symptoms associated with aging such as fatigue, chronic aches and pains, cancer, heart disease and sleep disorders actually start manifesting as the brain mirrors your aging face and other body parts.

Maslow's Hierarchy of Needs



Know Your Maslow's Hierarchy of Needs

Maslow's Hierarchy of Needs is a well known theory in psychology originated by Abraham Maslow in 1943 and was used to study motivation. Human needs are often depicted in a pyramid. He created the tiered system and initially asserted that the needs listed lower in the hierarchy must be satisfied internally before one can meet higher up needs. Basic needs were thought of as basic survival needs, whereas the highest level relate to self-actualization and living to your fullest potential. As you can

imagine, what motivates us or what makes us feel good has changed in some ways since the 1940s. Maslow and others later agreed that this is not a system where one is dependent on another. I encourage my patients to interpret these needs as they relate to modern day. For example, when Maslow deemed food and drink as a foundation, it's unlikely he considered all the over processed and chemically addictive foods we have today. He did not originally think of skincare or aesthetics as a contributor towards living our best lives. The diagram has evolved and been interpreted by various professionals. Today we could consider aesthetics and beauty to be in the hierarchy. The key is to know your own hierarchy and determine what works for you. Remember the process of meeting these tiered needs can be fluid as opposed to meeting one before the next. Additionally, you can meet multiple needs at the same time. As the title of this chapter suggests: know your Maslow's and don't be afraid to incorporate beauty into your life.

Rounding through the nursing home and hospital, when I used to encounter debilitated, sick, elderly patients, I strangely felt relieved to learn that some had dementia. Dementia had become their blessing. Their brain had gone blank so they could be shielded from the misery of chronic and mostly painful illnesses. I wondered why an entire population aged so poorly. How can it not be a massive problem when a large number of people age badly and become unproductive and unwell for a substantial portion of their lives? Science and medicine are not doing their jobs when they merely make people live longer lives but not with good health or vitality. *I like to remind my patients and clients to look at the famous Maslow's hierarchy of needs. The simple diagram represents the various factors needed before one can be ready to self actualize. If you look closely, aesthetics, beauty, goodness and self perception appear right before self actualization. These are considered basic needs in most first world countries. The concept of Health has to change. It can no longer be simply the absence of disease. I routinely advise my clients, if a doctor spends 15 minutes every year on a physical exam, only to ensure you haven't developed any diseases yet and*

then gives you a green light to keep doing what you are doing, you might need to reconsider your treatment with that doctor.

**IF YOU'RE HAPPY AND YOU
KNOW IT,**



IT'S YOUR MEDS.

Currently, all across the world, wellness is seen as your own responsibility. Educating yourself about healthy aging is also your own responsibility. When doctors are in training, there is a lack of emphasis on disease prevention, let alone, how to identify habits, strategies and lifestyles that contribute to long-term well-being. In fact, in the United States some doctors get paid more when patients are considered chronic with multiple diseases and on many medications. This needs to change. I certainly don't have all the answers on how to reorient the health care system to prioritize life-long well-being. I don't have all the knowledge and skills required to offer every services myself; however, I believe I have some important insights to share, rooted in my own practices and life experiences.

Initially I experimented with anti-aging and aesthetics simply to help myself. I didn't have extra money to spend in a plastic surgeon's office to prevent my own wrinkles. I believed wrinkles would totally destroy my fragile self-esteem, so I fought back. I felt so wonderful when I first got my Botox and my wrinkles smoothed out! Thank you Lord—at least my face looked cute. And that's when I began to discover that, if I could feel so much better after anti-aging treatments, other people could feel this benefit too. In 2012, after acquiring my new skills, I opened my wellness center and started to offer patients procedures.

"LET'S DO WHAT WE LOVE
AND DO A LOT OF IT."

MARC JACOBS
FASHION BY DESIGN

My practice became more and more successful as I became better at offering these services. I am basically a workaholic which I inherited from my father, I guess. Working was also an incentive to escape the confines of an unhappy marriage. I am simply ready to out-work everyone. I learn from my mistakes and I always fail forward. I am always eager to learn more and improve all protocols. I am often in the office until late at night and even when I come home, I listen to podcasts, read articles and do everything I can to stay up to speed with cutting edge developments. I also do my best to study several fields at once so that I can integrate insights from nutrition, aesthetics and conventional medicine. It helps that as my anti-aging practice has grown, I have still maintained my family medicine practice, as

well, so I always have one foot in the pond of traditional medicine and disease treatment.

Before filler



After filler

@dinaomii **HA HA HA**

In the chapters that follow I will offer an introduction on how to take best advantage of the many techniques that form the core of my well-being practice at Juvanni Med Spa and Anti-Aging Center. I want to mention at the outset the core philosophy that unites these treatments. I have made it my mission to educate people about the benefits of aging better. In first world countries, modern science is making humans live longer, extending our lives by at least 25 to 30 years. Although we will live longer, most of us will lose energy, suffer from diseases, and see our memory and mental functioning decline by the time we start hitting our late 70s and 80s, if not earlier. It's time to shift the paradigm and help people not just live longer but also live more productive lives. Let's help people be more proactive earlier so they can better prepare for not just longevity but for a long life filled into maturity with energy, productivity, satisfaction, attraction and attractiveness. It's never too late, but it's also never too early to start thinking about long-term well-being and anti-aging.

In other words, anti-aging is good for your continued good health and life.

The Arc of Mental Wellness: From Kardashians to Jeffree Star to Yuval Harrari

The beauty industry is flooded with an enormous amount of information but not much clarity about the long-term benefits from its services and products. There needs to be a better informed public conversation about what is beautiful, what is healthy, the costs and benefits of different procedures and techniques, long term effects—and not just what is currently popular.

For example, an educator and probably one of the best brains of our time Yuval Harari has less than 5000 likes on Instagram even when he tries to talk about fun topics like “love”, whereas Kim’s pic on poofed up labia gets over a million likes. Of course that doesn’t make Yuval any less important but the impact that his work should and must have is somewhat dampened because of lack of interest he generates among the youth. How can wisdom and intellect go viral? Should they not?

**What about
Love?**



**Let's ask
Tinder.**



3,348 likes



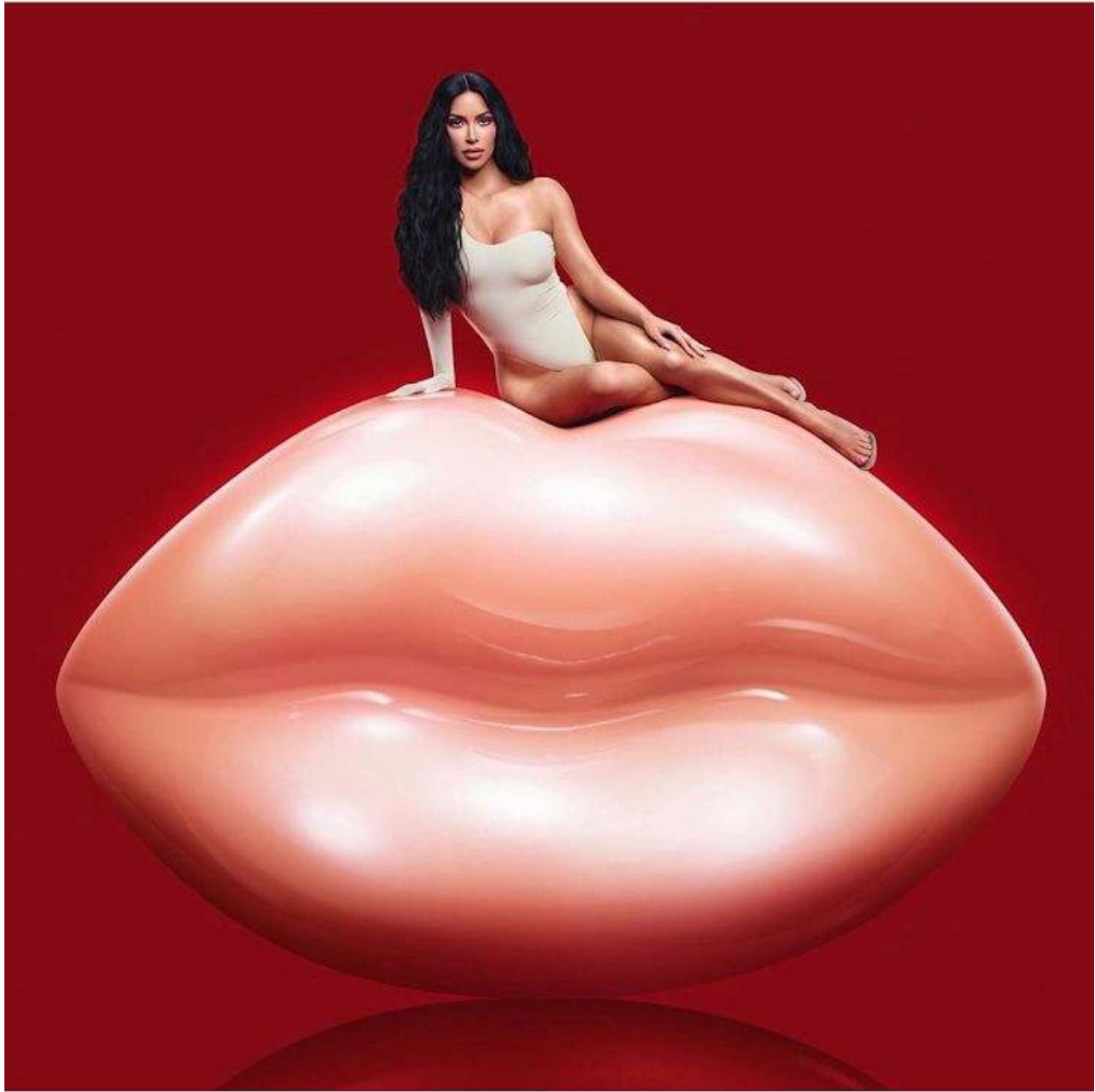


 Liked by **jimkwik** and **5,443 others**

yuval_noah_harari Yuval Noah Harari recently spoke about the difference between power and wisdom, and the importance of having both in the 21st century.



kimkardashian 



Liked by amna_709 and 1,145,797 others

Like Comment Share



The anti-aging discourse can't be led and managed by celebrities and housewives alone; in no other field with public health and personal well-being implications would this be acceptable. We need philosophers, educators, doctors and thinkers to enter the debate and help raise the bar from Kardashians to our very own sexy bald and gay hero Dr. Yuval Harrari.



In my opinion there is nothing wrong with how Kylie chooses to lead her life, but when a teenager is misled by her fake advertising, uses over-the-counter Proactiv for severe acne or gets dismayed by the depressingly poor outcomes with just a lip gloss, I get annoyed. I stopped watching TV a few years ago in order to cut down on the influence that media has on our minds. I didn't want to be lured into eating all the junk foods that television would constantly show on all channels so I stopped following the housewives and celebs. When girls and women would come

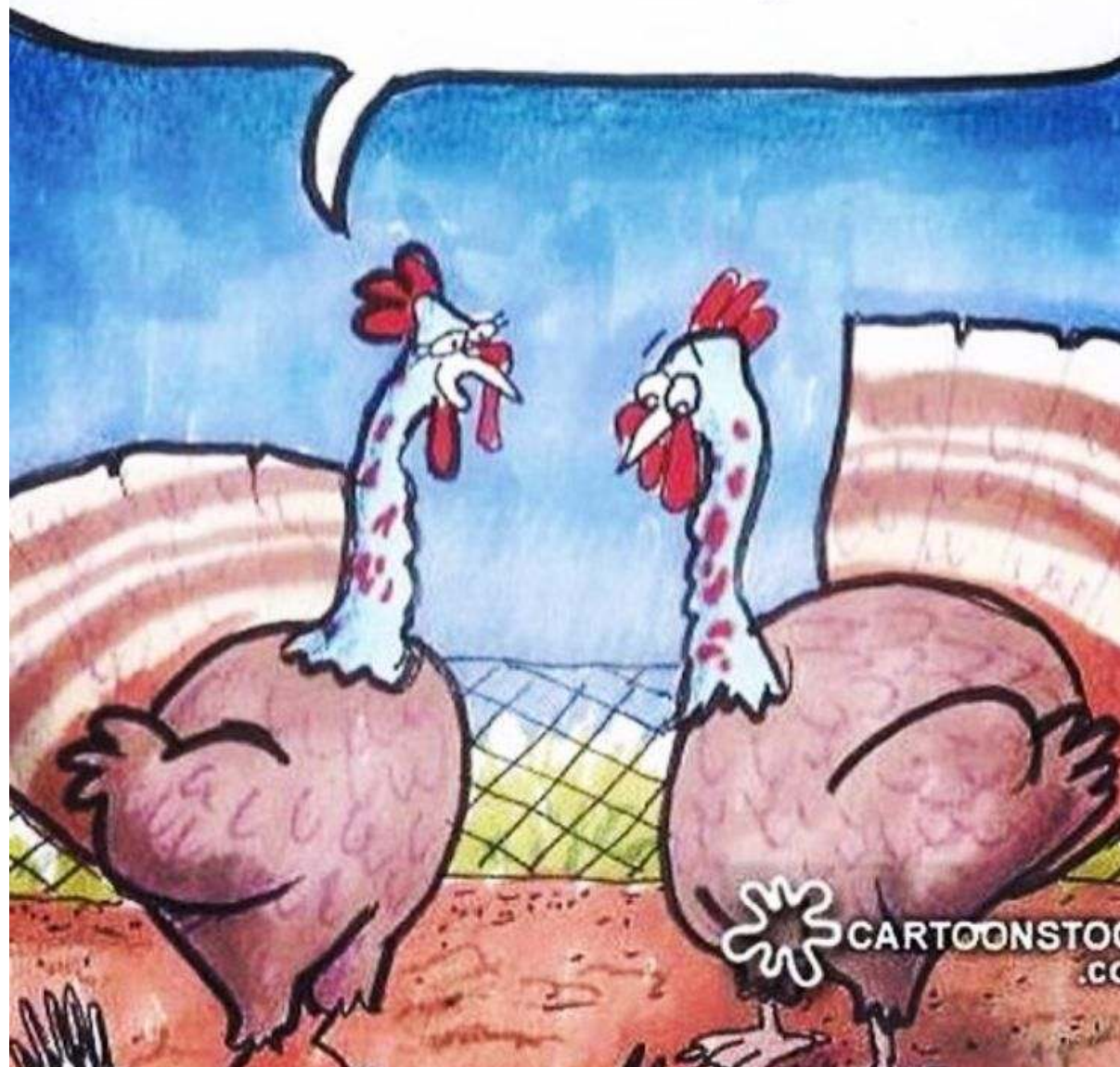
to me wanting to look like a celebrity I would many times have to discuss the potential risks of not looking like themselves and therefore ruining their facial features in their blind passion to want to look like a celebrity they love. Beauty is in the eyes of the beholder. Learn to look at yourself with love also. I still get annoyed when celebrities are not honest with all the procedures they routinely get. It is indeed possible to look and feel youthful and healthier for everyone. There is a price tag attached to it, but it is possible. There is no magic. So can we please not misguide kids. We all know what procedures celebrities do. How about some authenticity and truth for a change? *And for this reason only, I prefer Jeffree Star, an internet and youtube bigwig, to any of the celebrities on TV. His authenticity and deep knowledge of products and entrepreneurship are impressive.*



If anyone tells me I look young and beautiful, I honestly inform them about all the procedures I have done. I tell them that it's totally possible to look like me..here is a list of things I do...what they might do...and what it would

cost...and how long it would take. *This book distills the give and take of thousands of these kinds of conversations. So my manual of current anti-aging services can help you navigate through and understand these procedures and their associated costs along with potential short and long term benefits or side effects.* While I aim to raise the bar on the current discourse of anti-aging and aesthetic medicine, this is not a technical book: *I hope that doctors who currently work in this field or are interested in exploring it will benefit from my expertise and approach; however, my intended reader is an existing or potential consumer of these services who wants to be better educated and make more informed choices.*

I don't mind having turkey
neck. It's the crow's feet
I can't stand.



Why is Wellbutrin covered and my wrinkly skin which is causing my depression isn't?

In writing this book, I also hope to enlist your help in changing the discourse about public health in order to reform the current healthcare system in America and other places in the world so that it becomes a major medical priority to invest in your total wellness and anti-aging, and not just remediation when you are already sick. For example, why does your insurance pay for Wellbutrin and Paxil, knowing fully well that these drugs have limited effects in curing depression, but not for Botox or fillers? Why don't we study the effects on people's psychology of treatments that alter not only how they look but also how they feel about themselves, and hence how they feel and act in the world? More people need to not simply become aware of these minor discrepancies regarding their health but also talk to their politicians to pass bills that will make health insurances cover some very important health items for our aging populations. *Skin aging and energy decline are just as serious as knee pain, insomnia or constipation for an aging person.*

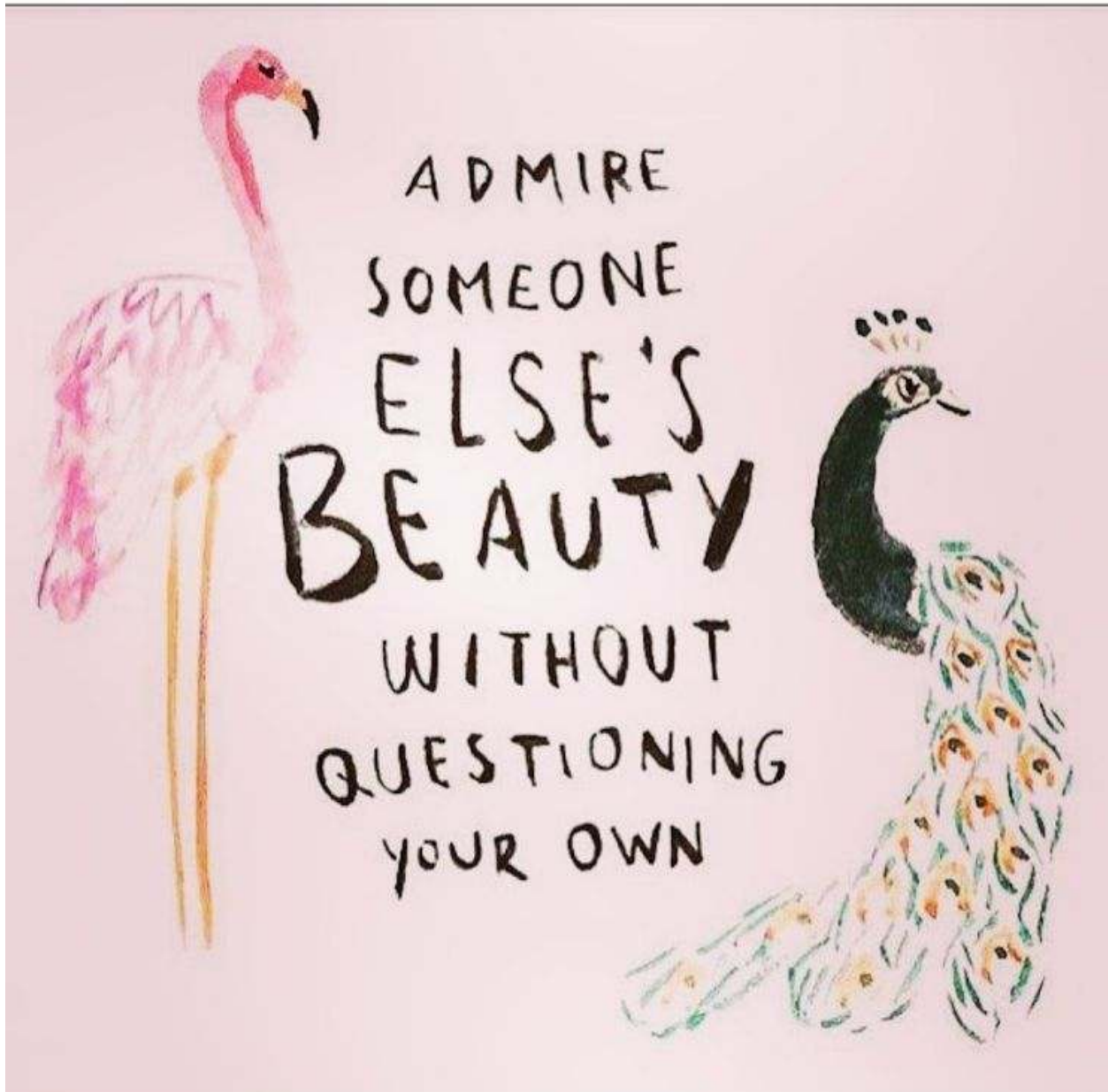
I believe some of the 'cosmetic' effects of aging have consequences on your brain which can lead you to become unhappy and/or unhealthy. Looking at your face as it loses its elasticity can be difficult for many of us, especially women. I routinely see post menopausal women suffering from anxiety, sleep disorders and sexual dysfunction—and not just from waning hormones, but also because their faces start reminding them of their ancestors, and their associations with how people are treated in this stage of life. Some can find methods to relieve their angst through work, meditation or prayer. *And perhaps in a more enlightened moment in human history we will overcome some of these associations. But for most of us, aging is painful at many levels.*



Wrinkled Wrinkled Little Star

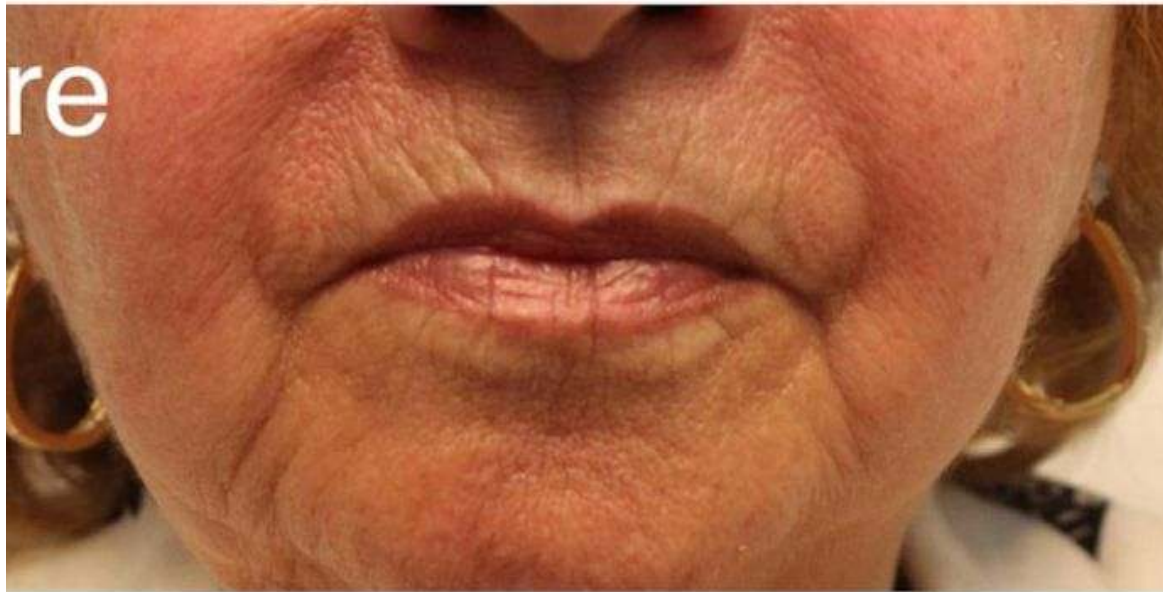
Or perhaps not—there may be biological and evolutionary roots to our associations of an aged face. These associations can be subconscious and if the negative associations with poor health and limited social acceptance are not consciously reflected, it may be hard to reform our way of thinking. In the meantime, we don't need to wait for a major culture-shift on these issues. In my practice, around 90% of clients who get anti-aging treatments or other therapies that makes them look and feel younger are

less likely to get depressed and start feeling more confident about themselves and their lives in general. Over the last 8 years I have seen people benefit from these treatments not merely aesthetically (what it makes them look like), but also psychologically and physically: enhanced confidence and a renewed self-conception impacts the rest of their lives.



It simply isn't fair that those who can afford these 'elective' treatments gain these benefits but those who lack the wealth or have more pressing needs do not.

Part of the reason I have founded Hagar's Foundation for Single Mothers is to do my part to address this problem at least for a small group of people with urgent needs who I can directly help through my practice. *In writing this book I'm taking this fight to another arena and, if I convince you, that the services it describes are not only beneficial for cosmetic reasons but also tied to psychological health and overall well-being. I hope you will tell your friends about it and encourage them to purchase the book and spread the word. It may be hard to remember and not that easy to understand, but it wasn't too long ago that birth control was not covered by health insurance in many countries. I hope that some day not too long from now, we will look back at our failure to cover these services not only as confused, but also as odd.*



Happy and connected is the New Rich

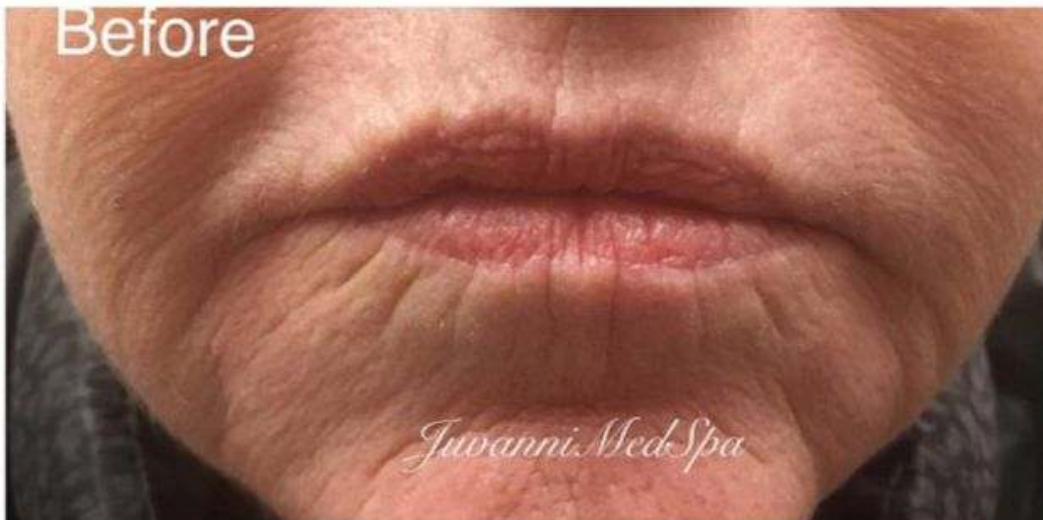
Finally, I also hope this book will be beneficial if you run or own a medical spa or are thinking of opening one, as well as other small businesses, especially in the field of aesthetics and healthcare. The description of techniques, treatments and tradeoffs that follow should be beneficial to anyone working or aspiring to work in this field. Gaining the relevant expertise is necessary but not sufficient. While currently quite popular, it is in fact extraordinarily difficult to run a successful medical care practice

where the focus is wellness. It's not just that the equipment and products are prohibitively expensive or that insurance doesn't cover our services. It is also that in addition to being doctors and practitioners we also are entrepreneurs, coaches and motivators.



The most important challenge in dealing with all the humans we try to help, who bring their insecurity and defensiveness (not to say their neuroses) into our offices daily and are often faced with difficult choices because our services are not covered by their health insurance. But, just as importantly,

the human rewards are also immense: you get to see lives transformed, not only from the immediate positive feedback from the patient who is ecstatic about the results of their treatment, but also in terms of the long-term effects on their lives, their happiness, satisfaction and agency. *So to those interested in entering this kind of work or improving their practice, please remember this is about more than products and techniques. It's about a core belief system—a commitment to our patient's longevity alongwith flourishing wellness.*



If you're interested in being an informed consumer, want to work in this field or simply have a desire to transform medicine so these services are not just seen as elective luxuries, then this book is meant for you.

Namaste and cheers. Now let's get started...

Chapter 1

Body dysmorphia-- how to learn to walk with your demons

It's Not All About Botox

Before we start on this journey into the land of Botox, let's first start with body image problems. *Because if we don't figure out and manage our body image demons, Botox land can potentially harm you.*

In life we learn to walk alongside our demons. Some of our biggest demons are none other than our own thoughts. I always prescribe skillful thinking as a secret to living a good life. *Skillful thinking for many people involves not just thinking carefully and critically by yourself--but also by being aware of the cognitive biases that can distort the accurate assessment of our own thoughts.¹ Skillful thinking also requires surrounding yourself with people who don't bullshit you and especially avoiding those who lead you into harmful situations or to harm yourself.* Unfortunately, there are plenty of these people in Botox land, so you need to learn to recognize and avoid them, as well as to exorcise any demons that make you vulnerable to them.

¹ See Daniel Kahneman, *Thinking, Fast and Slow* (New York: Farrar, Straus and Giroux, 2013); and Michael Lewis, *The Undoing Project: A Friendship that Changed Our Minds*, (New York: W. W. Norton & Company, 2017).

One of my favorite songs both lyrically and visually in English music videos is by James Blake, "Overgrown".

The video depicts Blake walking, haunted by thoughts and demons we all carry within us and he eventually dispels them. JK Rowling also brilliantly personifies personal demons in her magical world in the form of dementors and magical creatures that lead your thoughts to their darkest places, paralyze you, and ultimately suck your soul right out of your body, and can only be countered with a spell that requires summoning a truly happy memory. We all routinely walk with shadows of our negative thoughts. Ignoring negative thoughts is not enough. Negative thoughts can turn decent people into real monsters. When these thoughts are directed at oneself, they can be toxic. If you try to slay your demons with Botox alone, you are setting down a dangerously unsustainable path. Social media filters won't make it any easier. I believe that the controls for fixing body

dysmorphia are internally managed by ourselves.



My Personal History With Body Dysmorphia

I used to ignore my own views about my skin, since they were scary. The thought of taking off my clothes in-front of someone else was almost nightmarish. I had not seen “Phantom of the Opera” back then. *It was not until I started practicing aesthetic medicine that I truly came face to face with body dysmorphia. My own and others.*

As my experience in the field of anti-aging grew, I became more self-aware about my own body dysmorphia. Additionally, I was able to recognize it in my clients as they suffered with similar issues. I had a real reason to be

self-conscious about my skin, but as it often happens, it morphed into self-doubt and then into self-loathing. My demons were born with my psoriasis, which I suffered from from the time I was in my early twenties until the birth of my daughter, nearly a decade later. For most of the formative years of my life, I regularly saw my skin get inflamed and turn into sore-like patches that eventually sloughed-off like snake-skin. No emollient could remove my decaying skin, no medicine would take it away completely, no surgeon could remove my skin sores--in short, no doctor really knew how to treat it. Instead, they prescribed one skin cream after another, none of which worked. I took methotrexate pills--roughly the equivalent of taking rat poison on an empty stomach--for years, to no avail.

As a result of my struggles with psoriasis, my brain etched a permanent image of an ugly me into itself. The fact that I was in my early twenties when it started didn't help much. I was in the prime of my life, starting a marriage and my career, moving to a new country, and the whole time I was nursing my ugly sores. This explains my special interest in dermatology, but also the origins of my underlying medical and life philosophy and the reason I think you need to tame your demons at the same time you treat your skin and body. *Medicine can help lay the foundations for developing a more realistic and positive self-conception, but unless you revise the way you think about yourself at the same time as you get the various treatments I describe in this book, the benefits will be limited--not physically but mentally and psychologically--and the temptations to mis- or over- use these beneficial treatments will be strong.*

As a doctor in training, I took special interest in dermatology. We had clinics which were filled with all kinds of skin conditions. Pakistan is a developing country and people are not only poor but also mostly illiterate. Skin diseases were fairly common and most people couldn't afford many treatments. As a result, medical students were exposed to patients suffering from a wide range of disfiguring skin disorders.

THE PAST
WASN'T
FUN

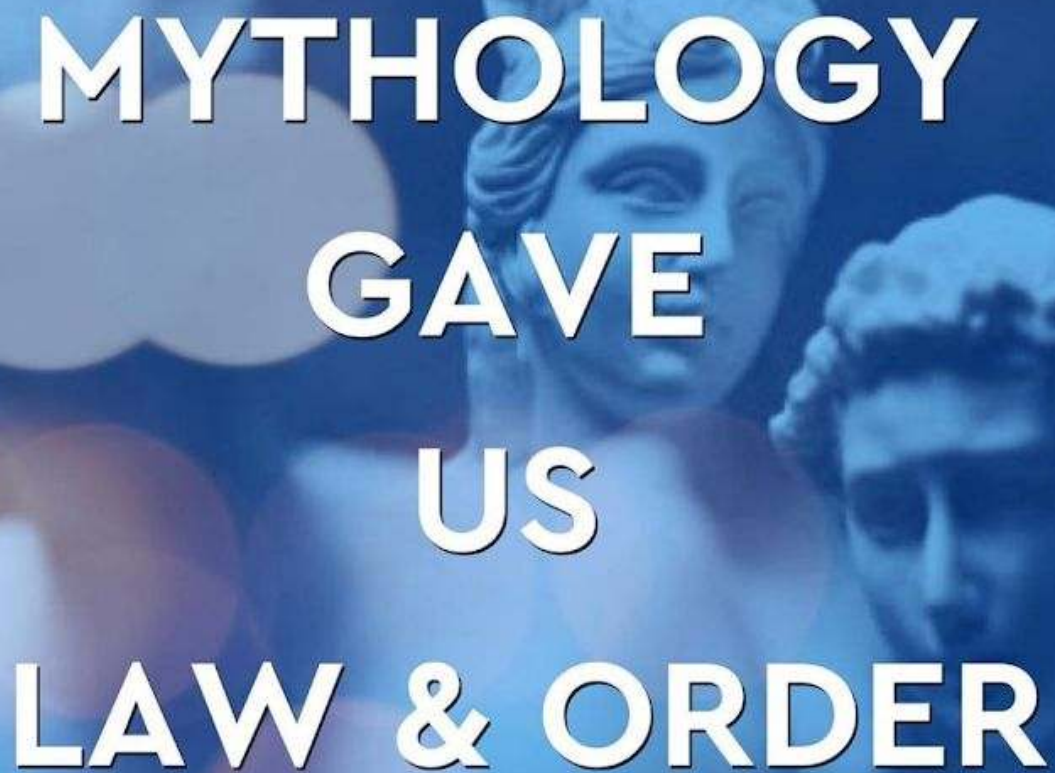
@yuval_noah_harari



In medical school, I examined patients with rashes, inflammatory conditions, infections, etc. But nothing affected me as much as those who suffered from leprosy--still present in Pakistan, even though it's a disease that has been eradicated around most of the world. I volunteered to go work at a leprosy center, but my parents didn't allow me to move to a different town for a whole month with people who had such a horrible

disease. My mom severely admonished me so I agreed to simply touring the place for a weekend. I saw how people who suffered from leprosy lived. Given my psoriasis, I sympathized strongly and felt their pain so very acutely. Most of the lepers I met relied on their religion and faith to interpret their condition. They were resigned to their disfigurement as God's will and believed they were paying some sort of divine penance. For them, there was no way out. Among other things I noticed was that, since their bodies were irredeemably deformed, they had simply stopped looking at themselves.

At the leprosy center I got to know several of the patients and came to understand how they felt. In various ways, they revealed to me the mental, as well as the physical trauma their disfiguring disease produced. I particularly remember a woman who told me that she had removed all the mirrors from her room so that she would never see herself again. I asked her how she brushed her teeth in the morning without a mirror and she laughed. Humor can help us transcend existential pain at times.



MYTHOLOGY GAVE US LAW & ORDER

#5YearsOfSapiens



Liked by **stacyahead** and 5,425 others

yuval_noah_harari "You could never convince a monkey to give you a banana by promising him limitless bananas after death, in monkey... more

Many of the lepers I met wondered if God hated them, or was mad at them and punishing them for some reason. I connected with these patients like I connected with my skin sores. Event though, I understood their physiology, pathology and absence of good treatment, I just wanted to get away from them. I was grateful that my parents forbade me from volunteering there and I gladly went back to work in the filthy and poorly managed public hospital wards in DHQ Hospital, Rawalpindi. But ultimately, I remain deeply grateful for my brief time at the leprosy center. It made me face my own fears of permanent disfigurement and planted the germ seed of the approach I have developed to anti-aging in my own medical practice for the last 20 years.

What is Ordinary Body Dysmorphia and Why is it So Widespread?

I work to overcome my negative body image daily. It took me over ten years after my own skin symptoms entirely abated until I was able to view myself somewhat differently. I tell most of my clients that body dysmorphia is rooted in body-image demons that are not real. They are just our own brain playing tricks with our self perception. But fixing your self perception

is like fixing your reading glasses and learning to get along with the result.

*Aging gracefully
is for lazy
people*

When I refer to body dysmorphia, I am primarily referring to fairly routine distorted self-perceptions that lead to discomfort and unhappiness, but not to debilitating mental illness. More serious is Body Dysmorphia Disorder (BDD), a form of anxiety disorder (the most widespread class of mental illnesses in the United States today) that manifest in obsessive concern with minor or imaginary physical flaws and too often lead to unnecessary

cosmetic surgery.² BDD proper requires serious psychiatric or psychological care. When I encounter prospective clients who I diagnose with BDD, I advise them to get professional help of this kind. Ordinary body dysmorphia, on the other hand, stems from unrealistic views of body beauty that lead us to have unrealistic expectations on how we should appear and hence to unhealthy self-consciousness and low self-esteem. (In what follows, when I speak of body dysmorphia and not BDD, I will be referring to ordinary body dysmorphia.)



² For an accessible introduction, see Medicine Net, "What is Body Dysmorphia," nd, (https://www.medicinenet.com/body_dysmorphic_disorder/article.htm#body_dysmorphic_disorder_facts), site visited on August 25, 2019.

The widespread use of social media filters to alter the on-line presentation of self via platforms like Snapchat and Instagram appears to have contributed to the increase and prevalence of ordinary body dysmorphia, especially in younger people. It is now to the point where it's practically an epidemic.³ These trends pre-date social media and even mass media culture. The difference is now social media has made the unnaturally distorted presentation of self available not only to movie stars but to practically anyone with a mobile phone and little bit of app savvy. *I tell my clients regularly that we don't need to look like so and so celebrity. Social media beauty celebrities are worse than processed foods. Too much of them can only lead you to ruin yourself.* These filters make you look like you're always wearing a perfect mask constructed by a makeup artist. No one actually looks like *that*, and it's obviously totally unrealistic to expect this of ourselves, and yet we are constantly bombarded with these images and the expectation they generate. Social media may never go back to filterless selfies. But we need alternative ways of viewing ourselves, rather instead of seeking the momentary and false relief we get from posting filtered online images of ourselves. We certainly don't need medical interventions aimed at trying to bring us closer to the distorted self-images we may sometimes be tempted to post.

³ See, for instance, *The Doctors*, "Are Social Media Filters Causing Body Dysmorphia," April, 2019 (<https://www.thedoctorstv.com/articles/are-social-media-filters-causing-dysmorphia>), site visited on August 25, 2019.

Overcoming or Taming Body Dysmorphia Before Turning to Botox and Other Aesthetic Medical Treatments

Developing a realistic self-image and resisting unrealistic beauty and body norms is certainly easier said than done. To be perfectly honest, it's only quite recently that, when I look at myself, I like my image, at least for a few minutes, which is long enough for me to begin my day.



Beauty is in the Eyes of the Beholder: Taming the Phantoms in the Mirrors

But most of the time I don't try to look at myself or my perceived flaws, even though I know that, in a sense, I am behaving like the woman I met at that leprosy center when I was still a young medical student. I know that I can be overly critical of my own appearance, and so I don't dwell or act on the basis of those demons, even if I can't completely expel them. That technique works reasonably well for me. I rely on the perception of some of my closest friends and colleagues to tell me if I look okay. I surround myself with people who love and respect me, but I also do try to pick extremely honest and straight-forward people. Most of my closest friends are so uncompromisingly and brutally honest that most reasonable human beings would never keep them as friends. But I make them my bosom buddies. So if they tell me that I need to lose weight or my lip is looking over-done, I pay attention.



drnaomi1

Sydney, Australia



When you look at your reflection and wonder how your face mask didn't fix the past weekends 48 hours of no sleep, alcohol and toxic eating



Liked by **botoxbunny** and 2,443 others

drnaomi1 Sugar is the devil 🍈.

In thinking about how the brain can both distort and reform the perception of the embodied self, I want to take a brief detour into the work of Dr. Subramanian Ramachandran. He is an Indian American Neuroscientist and is widely known for his theories in behavioral neurology, including the invention of the mirror box. Anyone with body dysmorphia must read his book *Phantoms in the Brain: Probing the Mysteries of the Human Mind*, which he co-authored with *The New York Times*' Sandra Blakeslee.⁴ In it, they discuss neurophysiology and neuropsychology as revealed by case studies of neurological disorders.

Ramachandran's mirror box is an ingenious way to help people with phantom limb pain, which is a disorder where patients continue to feel sensation, especially pain, in a limb long after it has been amputated. In a mirror box the patient places the intact limb into one side, and the side of body with the amputated limb with residual pain into the other. The patient then looks at the mirror on the side with good limb and tells their brain to make symmetrical movements using both limbs, as we do, for instance, when we clap our hands. Thanks to the mirror set up, the subject is seeing the image of the good hand moving on the side of the body where the amputation occurred, so it appears as if the phantom limb is also moving. Through the use of this artificial visual feedback it becomes possible for the patient to will the mind to 'move' the phantom limb and, for instance, to unclench a phantom fist from a painful position.

The wider use of mirrors in this way is known as mirror therapy or mirror visual feedback (MVF). Mirror therapy has expanded beyond its origin in treating phantom limb pain to the treatment of other kinds of one sided pain, for instance in stroke patients suffering from hemiparesis or limb pain in patients with chronic regional pain syndrome. A review article published

⁴ V.S. Ramachandran and , Sandra Blakeslee, *Phantoms in the Brain: Probing the Mysteries of the Human Mind*, (New York: William Morrow Paperbacks, 1999).

in 2016 concluded that “mirror therapy, is a valuable method for enhancing motor recovery in poststroke hemiparesis”.

The effectiveness of mirror therapy continues to be evaluated and further research with better methodology is still needed. But it is my hypothesis that mirror therapy and approaches inspired by it can be adapted to treat body dysmorphia, working with a psychologist who understands this condition. But for many people, suffering from ordinary body dysmorphia, literal mirror therapy may not be necessary or fruitful. I have two separate offices. In my family medical office, clients with body dysmorphia are only treated with referrals to a psychologist, or a psychiatrist if its so severe that they need medication. But others come to my spa and anti-aging clinic and I meet them with the most brutally honest assessment that I can give. *I become the mirror that corrects the way that brain has distorted* . And then I do my best to help them see themselves in the mirror differently, to begin to unlearn the way they looked at themselves before, and re-learn through my eyes.

Of course, not everyone can come to my office in New York and be treated to my verbal mirror therapy. Fortunately, there are plenty of other options. Cognitive behavioral therapy (CBT) has shown some promise in addressing body dysmorphic disorder (BDD) and so there is strong reason to believe that CBT can effectively treat more ordinary body dysmorphia. Recognizing that our culture is polluted with unrealistic beauty norms and that social media and the use of filters is further distorting our perception and amplifying these pressures is a start. Thinking skillfully, slowly, carefully and critically about what we want to accomplish through the use of Botox and other aesthetic medical procedures and whether our aims are realistic and healthy is a further crucial step. We also need to recognize that our brains may resist these efforts, since we have internalized unrealistic and unhealthy expectations long before we developed the ability to think skillfully and critically about them. We also need to surround ourselves with people who assist and support us in this struggle, who affirm

us and encourage us to develop and maintain reasonable, healthy goals and expectations.



All of this should be done before you enter Botox land, so that if and when you choose to enter the world of aesthetic medicine, you do so for the right reasons. I am absolutely convinced that the tools available in this world can be used in ways that contribute to your well-being and vitality- if you use them in the right way. This requires, among other things, finding the right practitioner: a doctor who does not cater to or encourage unrealistic

expectations or body dysmorphia, and who instead, guides you in determining how to use aesthetic medicine responsibly. Such a doctor can be part of your team in the same way you have the support of friends, loved ones and peers. Without reasonable expectations, skillful thinking, and friends and loved ones who assist you in seeing your true self, unfiltered and undistorted, no injection is going to do what you want it to.

If I accept the fact that my relationships are here to make me conscious, instead of happy, then my relationships become a wonderful self mastery tool that keeps realigning me with my higher purpose for living.

Eckhart Tolle

From Body Dysmorphia to Bodily Health and Self-care

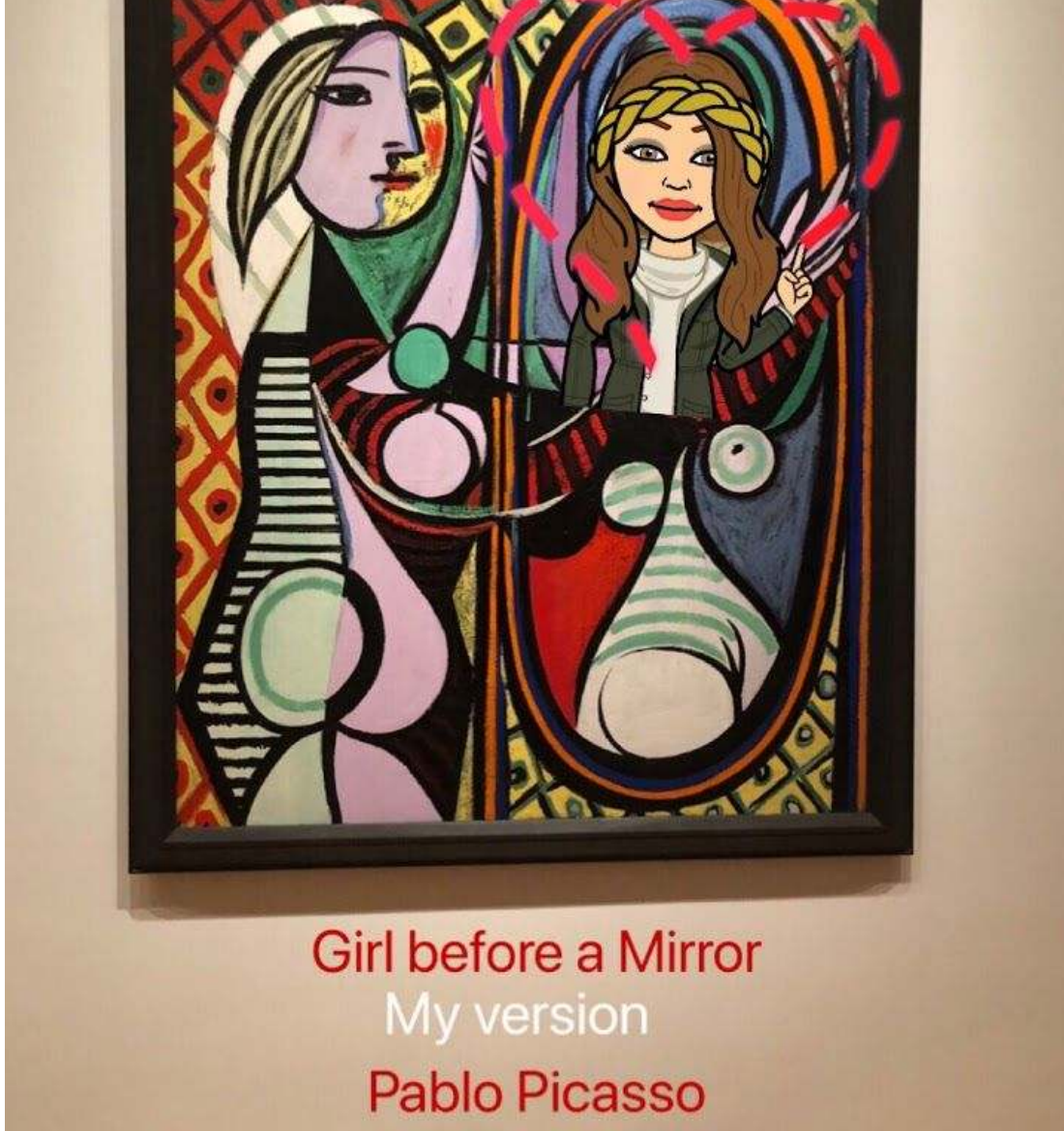
Used irresponsibly, aesthetic medicine can reinforce body dysmorphia and other aspects of self-perception and presentation that are unhealthy, both psychologically and physically. On the other hand, used responsibly, aesthetic medicine can contribute to both psychological and physical health and well-being. Ultimately, as I will emphasize in the chapters to follow, responsible aesthetic medicine can lead to lifelong vitality. Botox and other forms of aesthetic medicine are important tools in the pursuit of lifelong productivity and flourishing but they are far from sufficient. And they certainly are not a substitute for maintaining health and well-being through diet, exercise, sleep, stress-management and meditation, and routine medical care. These strategies, among others, will also be covered in the chapters to follow.



That's just me celebrating my mid life crisis on my 40th birthday after divorcing my second husband. *Botox had made my journey aesthetically bearable if not easy.* Subsequently, I quit all alcohol intake to maintain my botox dose. Knowing how alcohol is metabolized in the body through the liver, I hypothesized to myself that it's probably causing a lot of inflammation at a cellular level in my body thereby increasing the botox and filler requirements on a yearly basis. So I decided to cut down, but that didn't work because alcohol is highly addictive and so I had to completely quit drinking to maintain my skin and botox dose. I also hypothesize that

our botox dose is roughly equal to our skin age (and not our chronological age), and therefore to anti-age my skin, leaving alcohol was a no brainer. The price we pay for beauty and youth. Goodbye my favorite wines and spirits, Sorry, Not Sorry!

Do you know about True Mirrors?



Your Body is not a Temple, It's a Car

In discussing anti-aging with my patients, I sometimes use a car analogy. If God gave you a Honda Civic and you want to turn the body of that car into a Rolls Royce, well you may need to get realistic: very few people have Rolls Royces. And on top of that, the few that actually do have this attractive car may not even be happy or consider it a blessing. Perhaps instead of the Rolls Royces, you should set a more realistic objective, something more like a Mercedes, which is still a luxury car. If you aspire to

upgrade your Honda's body to that of a Mercedes, you will also need to upgrade the engine. A luxury car body can only take you far if you maintain the engine and other mechanical parts.



I see women who get a tremendous amount of aesthetic work done; yet, they have poor quality eating habits and toxic lifestyles. Despite the

aesthetic work, they remain unhappy and unfulfilled. On the contrary, I also see people with very healthy lifestyles who don't maintain or care about their outward appearance. Some even act as if it's taboo to keep up one's appearance. Sticking to the car analogy I ask them: if God blessed you with a Lamborghini and it got bumps and scratches from routine driving, would you get it fixed at some point? Will you put bad quality gas in a performance automobile? Will you keep it dirty? People don't think twice about maintaining and upgrading their cars. In fact, most will agree it's absolutely necessary. If this is automatic thinking, why then are you neglecting your own body? How is your own body any less important than any Lamborghini in the world?

I CAN BE
READY IN
5 MINUTES

Juwanni Medspa

LIFE BEGINS AT 40

So do Wrinkles, Arthritis, Hemorrhoids,
Chills, Backaches, Leg Cramps and
Liver Spots!

I understand that people can potentially object to being compared to a vehicle, but this comparison does make sense to most of my clients. After all, our bodies are the vehicles that carry our souls and represent them to the world. *Our body is like a vehicle that we can't get out of. When we get out of this vehicle we die.* But attending exclusively to outward appearance is simply not enough. Just like a car is known for its functionality, interior, speed and safety, a human is also known by his or her actions and inactions in life. Lifelong well-being, health and beauty are all relative.

IN A SOCIETY
THAT PROFITS
FROM YOUR
SELF DOUBT,
LIKING YOURSELF
IS A
REBELLIOUS
ACT

Chapter 2 Do we Really Need Botox?

First...The story of Botox..

Frist, Botox is a medication just like any other medicines you take. Let's start by understanding what Botox really is, how it works and how many different kinds of botox-like products are currently available on the market. The story of how Botox was first discovered never ceases to fascinate me as it reveals how humans are getting better and faster at deciphering the language of the universe around us. This does not ignore good luck.

Botox was first discovered in 1978 and it was ophthalmologists who initially studied its effects on eye muscle hyperactivity and blepharospasm (twitching in the eyelids). Botulinum toxin (the active ingredient in Botox) is a protein that prevents the release of a neurotransmitter and hence shuts down a muscle, causing it to atrophy. At the start, they absolutely didn't realize the other potential applications of Botox. They began to notice that people's wrinkles started disappearing as they were getting treated with Botox for other ocular problems. Ten years later Allergan acquired the rights to distribute the drugs and it was mostly being tested as a medication for twitching and cervical dystonia (uncontrollable contraction of the neck muscles). They realized that as the muscles started getting inactivated the appearance of lines and wrinkles improved. Like so many other off label uses, the discovery of anti-aging properties of Botox was accidental. Finally, in 1992 Alastair and Jean Carruthers issued the first report suggesting that Botox could be used for cosmetic purposes

Let's get medical, medical...(everything you wanted to know about Botox but were afraid to ask)

Now that we know how Botox evolved into the aesthetic world, let's dive deeper. Botulinum toxin is a very potent protein produced by a bacterium (clostridium botulinum). It prevents the release of a neurotransmitter (it's a kind of fuel that helps the muscle contract and make movement) from the axon endings of nerves at neuromuscular junctions thereby causing the muscles to paralyze or reduce movement. *In simpler words it works by inactivating nerves that stimulate the muscles to contract.* And the way it does that is by blocking the neurotransmitter acetylcholine from being

received by a nerve. Without acetylcholine, the muscle atrophies, and it takes 3 to 4 months for the old terminal activity to get restored. The idea that the Botox molecule sits around actively blocking the acetylcholine is a misconception. In reality Botox does its job in 3 to 4 days and what you see over the next few months are simply the results.



Of course like any other thing in the world, if used inappropriately, it can cause severe damage. Further, since the discovery of the anti-aging properties of Botox is relatively new, the doses injected are still based on trial and error. Some people need more, others need less and only experienced doctors can best make these determinations. A scalpel in the

hands of a surgeon can be life-saving, but in the hands of a child, it can hurt someone badly. Similarly a car that's being driven by a new driver can be a hazard, but an experienced driver will take you to your destination safely. Is there still a remote possibility of an accident? Of course, but that doesn't make us stop driving cars. So what are the potential side effects when you use Botox for anti-aging your skin?

Top five common complications and how to prevent or manage them...

1. Pin-point bleeding. To be expected since the Botox is injected. Not a big deal—just apply pressure with a gauze pad as you would with any other injection.
2. Infection of injection site. Easily preventable if the injector cleanses the skin with alcohol prior to injecting.
3. Diplopia (double vision). This occurs when the injector mistakenly injects the inferior oblique muscles, something experienced doctors know to avoid.
4. Ecchymosis (bruising). A very common side-effect, especially in patients who are on prescribed anticoagulants. They should be advised, if possible, to avoid these medications for 1-2 weeks before injections. In some cases it is not possible to avoid medication. Also some patients just bruise easily. An experienced doctor will apply ice immediately after injection.
5. Ptosis (a droopy or 'dropped' eyelid). Results from an inexperienced injector injecting in the wrong areas. Ptosis usually resolves itself in 2 to 3 weeks without additional interventions. 2.5% phenylephrine solution may be administered to the inside of the upper eyelid.

The best way to avoid these complications? You must be an informed consumer, and ask the right questions to make sure the doctor is experienced, successful and a good match for you. More on this below...



Contraindications: Please **don't** use Botox if you have:

- a neuromuscular disorder
- If you are on antibiotics, especially an aminoglycoside which can cause increased sensitivity to the drug
- if you are pregnant
- if you are actively trying to get pregnant
- if you are breastfeeding

Please note: if you have an egg allergy, there might be a slight risk of cross reaction, since the Botox molecule is stabilized by human albumin, a protein similar to egg albumin. There is a risk, although Allergan representatives state that the chance of cross reaction is very low.

Can a Botox dose be lethal when used cosmetically? Humans have been using Botox regularly for over 20 years and there have been no known reports of death either directly or indirectly. Yes, people ask about risks of Botox but there are a lot of other things that harm or kill us daily; for example, poor quality food, pollution, lack of hydration, lack of quality sleep, and (perhaps worst of all) stress. It is equally important to note how these things can be lethal as well.

What are the other botox-like products and how are they used? There are 8 Botulinum types, referred to as A to H. Types A and B are capable of causing diseases in humans if used incorrectly by either companies or individuals but are also the ones used commercially and as medication. Commercial forms are marketed under different brand names.⁵ (I used to get paranoid about bioterrorism when I thought about unqualified people getting Botox from Allergan, but after learning about the safety measures that the company takes to protect this medicine, I was relieved, even though I have never visited the headquarters of Allergan personally.)

- Botox (onabotulinum toxin A, owned by Allergan)
- Dysport (abobotulinum toxin A, owned by Galderma)
- Xeomin (incobotulinum toxin A, owned by Merz)
- Jeuveau (prabotulinum toxin A, owned by Evolus)

The indications for the use of Botox or the above mentioned botox-like-drugs are ever increasing. This is especially true where muscle spasticity is an issue. It's used to treat post spinal cord injury spasms, head and neck spasms, jaw spasms, lower urinary tract spasms, esophagus spasms, improper eye alignment, and even to relax the anal sphincter in people who suffer from really painful anal fissures. Dysport has been FDA approved for use in pediatric spasticity in the lower limbs of children over the age of two years old. Botox is approved for treating excessive underarm sweating or hyperhidrosis, which can't be treated with topical agents. Botox is also used in prophylactic management of chronic migraine headaches and it is now even recommended for arthritic shoulder joints to reduce chronic pain and improve range of motion.

⁵ For a more technical medical discussion of Botox and kindred drugs, see: Fagien S. Botulinum Toxin Type A for Facial Aesthetic Enhancement: Role in Facial Shaping. *Plastic Reconstr Surg.* 2003;112 (Suppl.): 6S; Fagien S. Botox for the Treatment of Dynamic and Hyperkinetic Facial Lines and Furrows: Adjunctive Use in Facial Aesthetic Surgery. *Plast Reconst Surg.* 1999;103:701; and Fagien, S. Treatment of Hyperkinetic Facial Lines with Botulinum Toxin. In: Putterman A, ed. *Cosmetic Oculoplastic Surgery: Eyelid, Forehead, and Facial Techniques.* 3rd ed. Philadelphia, PA: W.B. Saunders Co.; 1998:377-388.

The cosmetic application of Botox is considered safe and effective for reducing the appearance of facial wrinkles, especially in the upper third of the face. It is FDA approved for the glabellar lines in the center of the forehead, or “11s” or “1s” or “111s” as I lovingly refer to them. We also use Botox ‘off label’ (i.e. in a way not explicitly medically approved by the FDA) for crow’s feet and forehead lines. The effect starts 3 to 7 days after the injection and lasts 2 to 4 months depending on age, gender and lifestyle.

Botox and the Juvanni Philosophy of Anti-Aging and Life-long Flourishing

As I noted earlier, I embrace the idea of anti-aging as far more than a cosmetic concern. I consider it a comprehensive project that contributes to the long-term, overall well-being and flourishing of my patients. It is this core philosophy, I believe, that accounts for the rapid growth and success of my wellness center. I know that some of my colleagues, especially the more academic ones, begin to roll their eyes when I preach the benefits of Botox not just for making faces look younger but also for making people feel younger and healthier. So let me offer further explanation for why I maintain that *Botox is not just cosmetic or aesthetic but instead part of a new vision for healthcare that must accompany the extension of the human lifespan.*

what aging naturally in Hollywood
REALLY looks like...



@botoxbunny

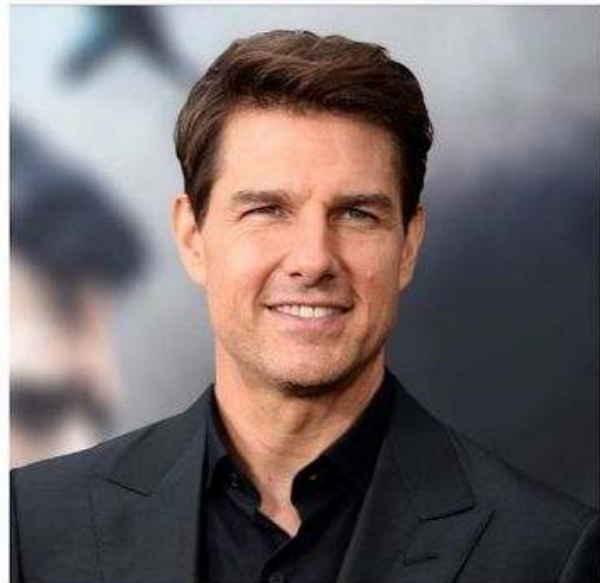
Human beings are living longer than ever, and we are just in the early stages of a lifespan revolution. Advances in medicine, nutrition, fitness, and even genetics (arresting telomere degeneration) are picking up speed and promise to radically increase longevity in the coming generations.⁶ But surely the point isn't just to live longer but also to live better. For this to be the case, healthcare needs to contribute not only to curing disease but also to maintaining vitality, well-being, productivity, and the capacity to

⁶ See, for instance, Yuval Noah Harari, *Homo Deus: A Brief History of Tomorrow*, (New York: Harper Perennial, 2018); and David Sinclair, *Lifespan: Why We Age--And Why We Don't Have To* (New York: Atria Books, 2019)

participate in the central goods of human life like love, sex, friendship, work and creative endeavors (flourishing for short) across an extended lifespan.⁷



foreveryoungcosmeticsurgery



Here is where we can run into some important obstacles if medicine takes a reactive instead of a proactive approach. First, we are learning more about implicit biases and their roots in unconscious mental processes all

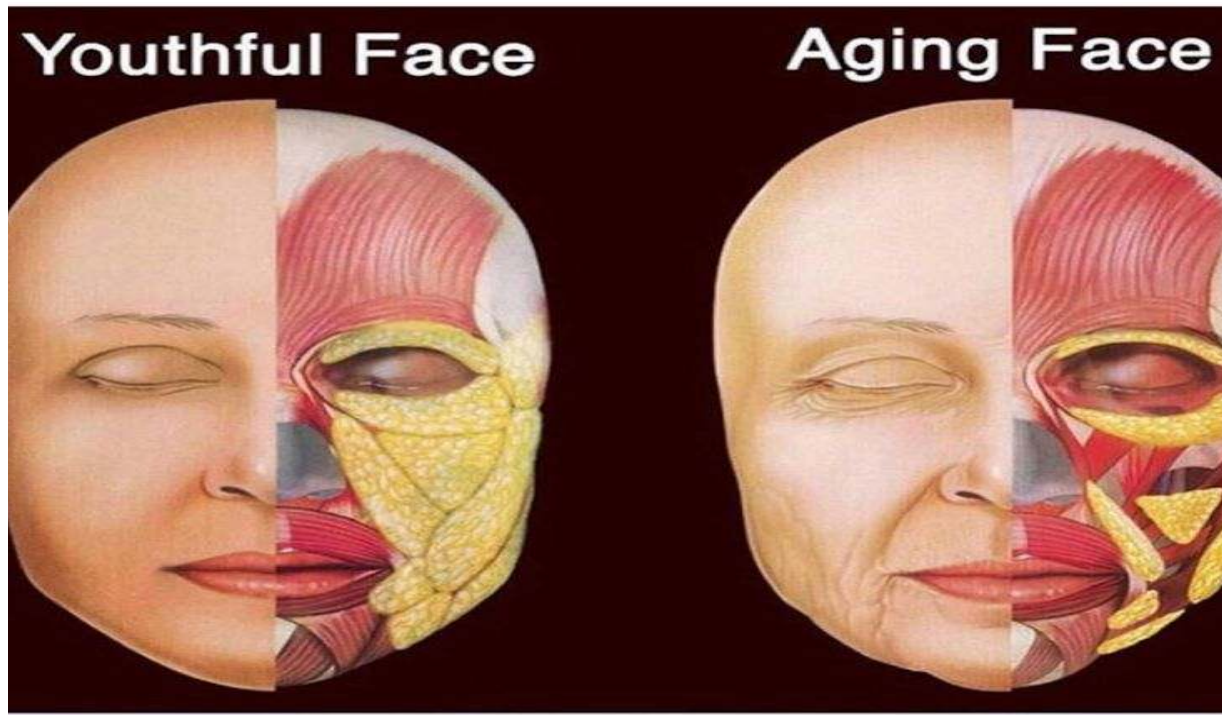
⁷ Here I find myself in strong agreement with Louise Aronson's *Elderhood: Redefining Aging, Transforming Medicine, Reimagining Life*, (New York: Bloomsbury, 2019).

the time. Empirical research suggests that almost all of us have implicit biases against the aged. You may have heard of a similar concept regarding implicit racial bias and unconscious stereotypes. Implicit bias against the aged is triggered by entirely superficial indications, primarily the appearance of the face and body.⁸ While we may often think of this in terms of the young being implicitly biased against those they think of as old or aged, *it is also the case that older individuals are also biased against older people, and so older people, who constitute an ever larger portion of the population, may experience these same anti-age-biases against others of their own age and also those who are older.*

Here is another consideration point stemming from theories in psychology and philosophy as they relate to self esteem, self-worth and self-love. Let's use self-respect as a catch all term for these different ways of valuing the self. *Self-respect is the foundation for almost all other forms of success in life and hence for human flourishing.* But self-respect isn't a brute psychological fact. It is, as the philosophers say, mediated by self-conceptions, or the ideas we have about ourselves which are formed and transformed based in part on what we think of ourselves (implicitly and explicitly) and, of course, what others think of us.⁹ So if we and those in our social world are implicitly (or explicitly) biased against those whom we think of as aged or old, *when we and others begin to think of ourselves as old, we may lose self -respect and -confidence, and begin acting in ways that undermine our own health, well-being and flourishing.*

⁸ See, for instance, Chopik WJ, Giasson HL. "Age Differences in Explicit and Implicit Age Attitudes Across the Life Span," *Gerontologist*. 2017;57(suppl_2):S169–S177. doi:10.1093/geront/gnx058

⁹ See, for instance, Charles Taylor, *The Sources of the Self* (Harvard University Press, 1989); and Kwame Anthony Appiah, *The Ethics of Identity* (Princeton University Press, 2005).



As the lifespan revolution advances and humans live longer and longer, we need to 'upgrade' our biological systems that were not made for such longevity. Certainly no one thinks of joint replacement as a cosmetic procedure, though it wasn't necessary until humans started living long enough for overuse or auto-immune disorders to interfere with joint function. The skin is the largest organ in the body and perhaps most relevant for our purposes, the one that is most visible. An important range of impressions are formed on the basis of the appearance of the skin, and especially the face, where we usually look first and most frequently.

We can bring these considerations together by noting implicit bias is unconscious and so hard to counter through explicit conscious thought. There may be some evolutionary biological impact for our implicit bias against the aged (rooted, of course, in human sexuality). With that being said, simply changing your mind or raising your consciousness may be easier said than done. So, as people live longer, it becomes important not only to be functional, healthy, productive and vital longer, but also to appear to be—not only to others, but also to ourselves.



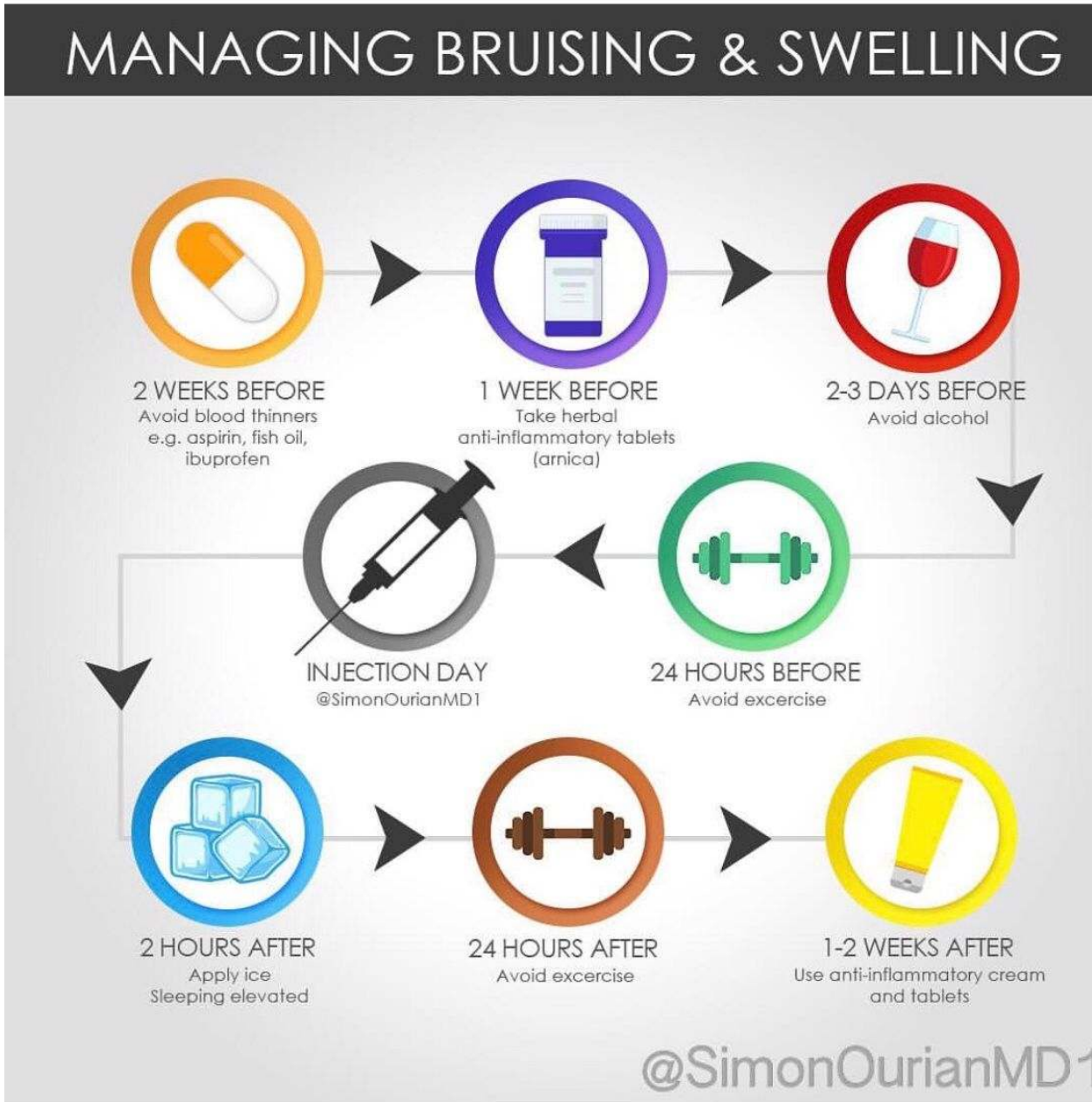
Of course, Botox is just one aspect of an overall, integrated approach to life-long wellness. I have developed a more comprehensive integrative approach over the last decade at Juvanni. The overall approach includes additional procedures that are currently miscategorized as 'cosmetic' or purely aesthetic. Examples of these procedures include collagen fillers, skin tightening, vaginal tightening, and fat reduction. Additional treatments include diet and nutritional counseling, vitamin D, antioxidants, sleep and stress management strategies, and meditation lessons. This book offers guidance on the full suite of anti-aging procedures and techniques with Botox being front-and-center. All of these aspects are an integral approach to aging that allows you to look and feel younger and healthier throughout

your life--which, after all, is the most important goal.



simonourianmd1

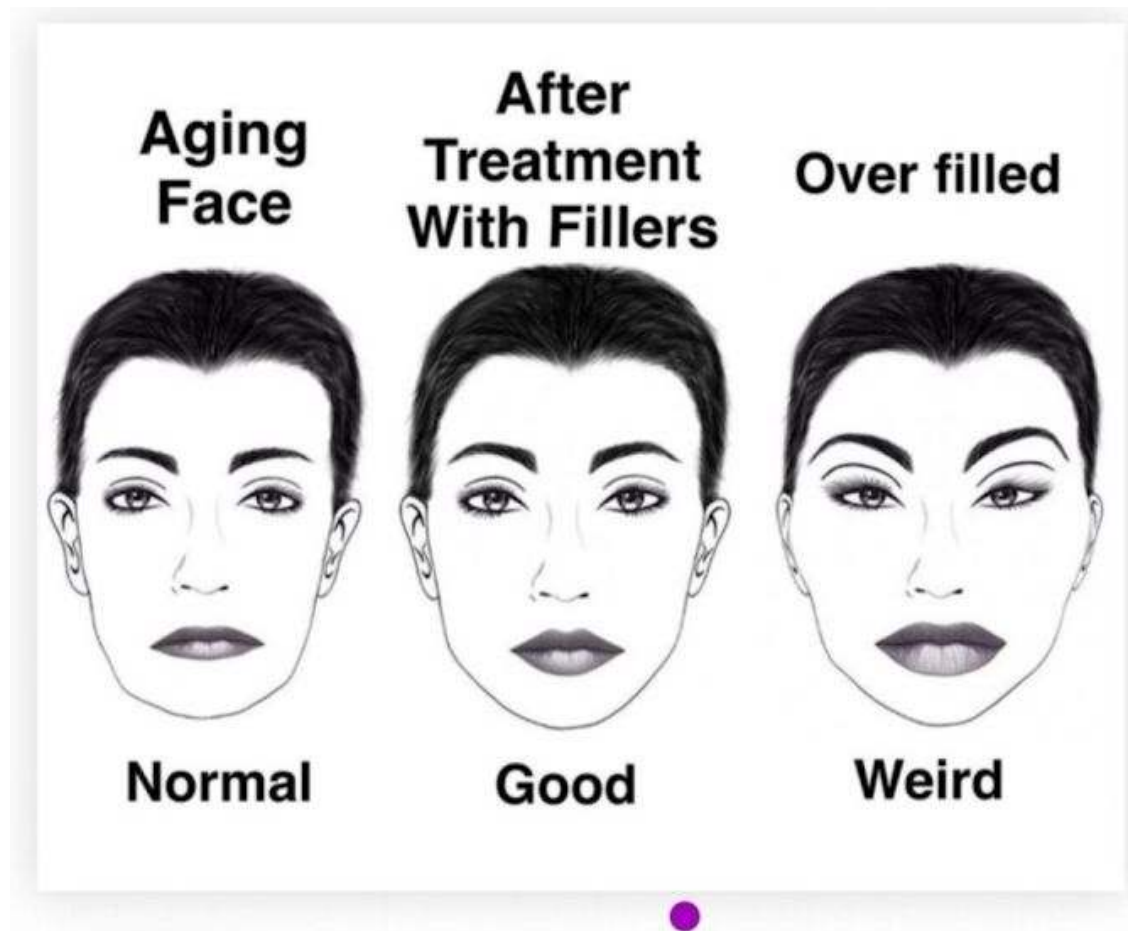
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Do we really need Botox regularly?

This is a philosophical as well as a spiritual question as far as I am concerned. One must never really “need” anything, but one must desire things that can help them live with vigor, kindness and beauty. So consider the following Botox ‘catechism’:

- Can Botox make you a nicer person? No it won't.
- Can Botox give your life a purpose or meaning? No it won't.
- Can Botox improve your IQ? No it won't.
- Will Botox make you feel spiritual? Maybe ..lol..I don't know..(there still are so many people I meet who don't know what “lol” is..it stands for laugh out loud)
- Will Botox improve your emotional intelligence? I don't know, it improves mine, since I frown less and appear less frazzled...



But as you reach your 40s and 50s, your face starts losing collagen by 2-3% every year. For most people, the body stop producing new collagen around age 35. Using Botox can arrest the rapid aging of your skin in the upper parts of your face where most of your dynamic muscles are located. These are the muscles that make you frown and look shocked, or make creases around your eyes when you are smiling. I believe our early ancestors needed these muscles before language developed to convey their emotions to each other. I mean if there was danger, people could look shocked or scared and communicate to others in this way.



With the arrival of language and all the other modern methods of communication available to us now, it is no longer necessary to move your forehead muscles that much or to rely exclusively on facial expression. *An average person still raises their eyebrows at least 500 to 700 times in a day. It's probably no longer necessary to use the dynamic muscles this much, though recognition of facial expression is still an essential part of emotional intelligence—especially picking up on subtle cues or reading emotion from those who are not communicating it verbally.* For this reason, I don't like frozen faces. A human face must have capacity for some expression and animation. A frozen face is not normal and your brain doesn't like it either. I routinely refuse to freeze people's foreheads and suggest they seek professional help elsewhere (preferably with a psychiatrist) if this is what they want. I have fought many battles with some of my favorite clients to not make their faces look plastic.

How to Prevent the Frozen Face Barbie Doll Look

One of the ways that you can prevent an overly frozen or botoxed face is to know your dose. Our Botox dose changes as we age. How do you calculate your Botox dose? *In my years of injecting I have realized that our Botox dose is generally equal to our skin age.* So if your chronological age is 40 but you were a sun worshipper, smoker and an alcohol consumer who never took care of their skin, and people tell you that you look tired and like a 55 year old, maybe your Botox dose should be 55 units. (Note that Botox is dosed in its own unit of measurement.) For example, I am 48 but I use 35 units every four months; that is because my skin age is better than my actual age. I avoid unnecessary sun exposure, except when I am snorkeling, which is one of my favorite things to do in life. I don't snorkel more than 2 or 3 times in a year. I use a lot of sun protection. Plus having suffered from psoriasis and its routine dry skin, I always moisturize twice a day. I also learned to drink adequate water. I smoked and started drinking alcohol when I came to America at 25 years old. Thankfully I was able to quit these highly addictive habits and have maintained my smoke free and alcohol free life for a couple of years now with great success. I am grateful as it has made my skin so much nicer, and now my Botox lasts much

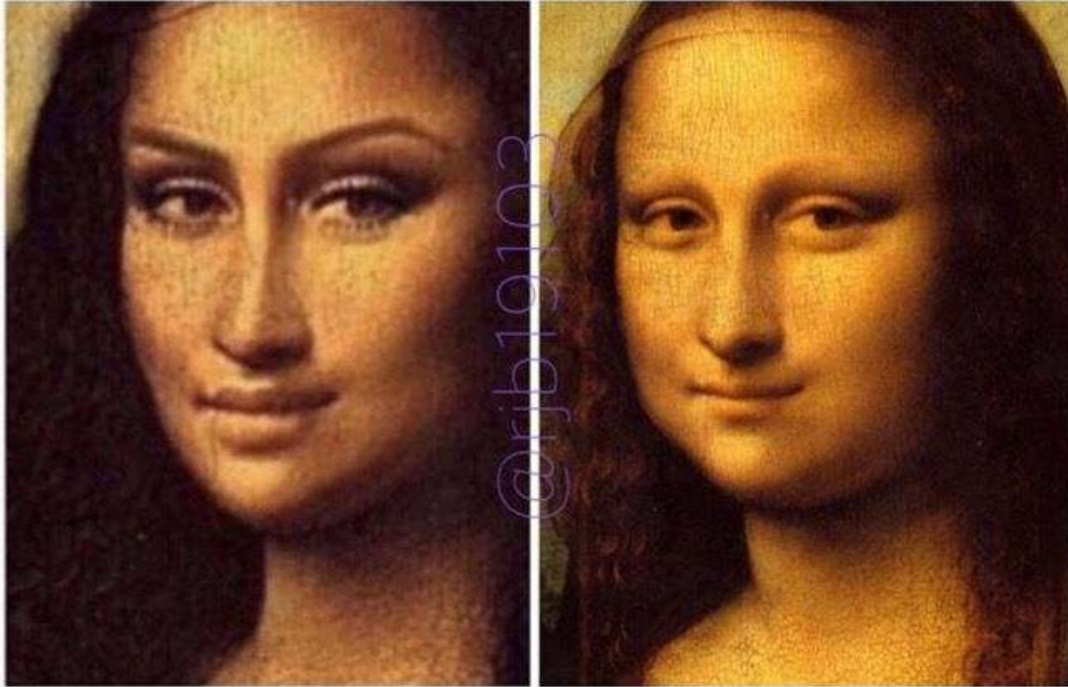
longer. I not only save money by not purchasing cigs or booze but I also save by having to inject less Botox.

What people think aging “naturally” in Hollywood looks like vs...



When you have injector friends

When you don't



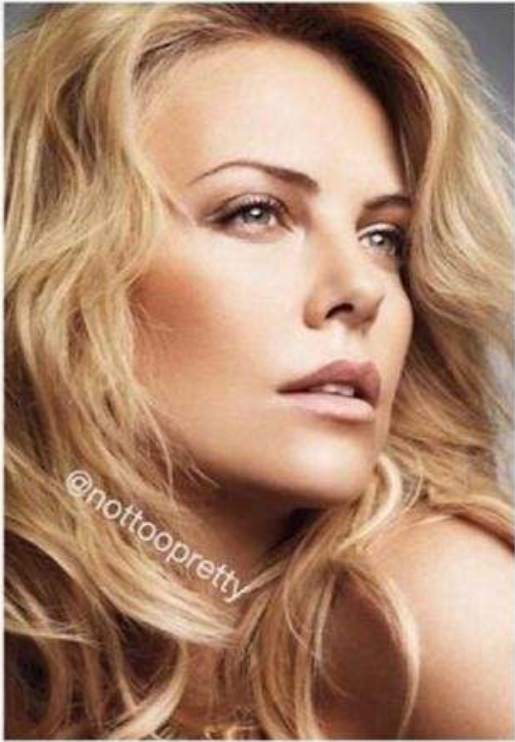
@celebrity_skin_canberra

Back to the Botox: you should have a sense of your face age, and then ask for a free consultation with a prospective Botox doctor. Ask them what dose they think you need, and what result they hope to produce with that dose.

FAQs

- What do you think is my facial skin age?
- How much botox will you use?
- Will I still be able to animate or have some movement in my forehead?

The right side of my face vs. the left side of my face



@botoxbunny

! K's !

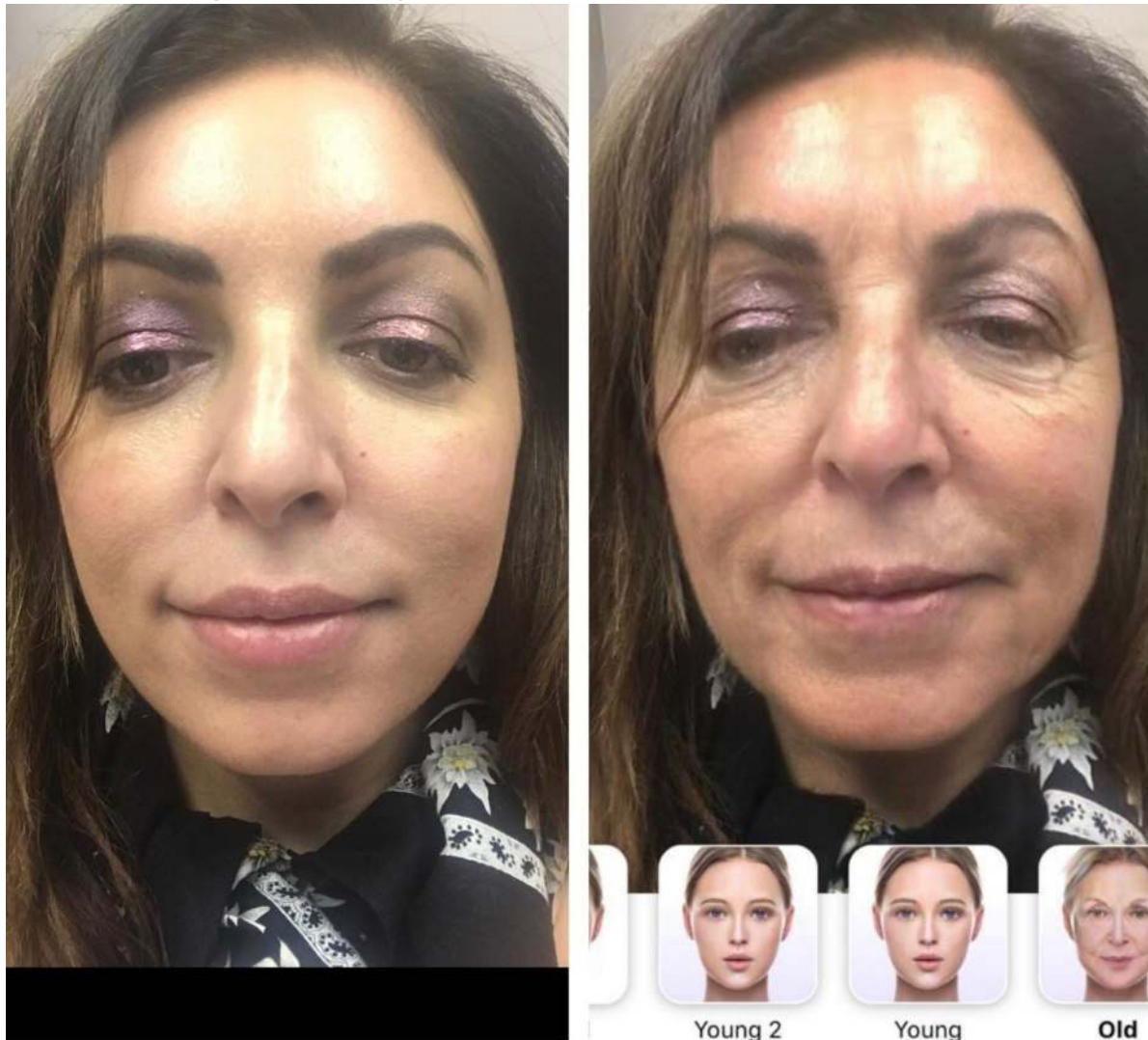
- How often should you get it? What's the recommended minimum dose?
- How can you make your dose last longer?

Should you start as soon as the signs of skin aging begin?

Modern science is opening up new possibilities, both enticing and scary. In the future, not only will we be able to use genetic engineering for things like designing babies but medical advances will also have people living very long lives. In my opinion, *the early reduction of wrinkles will lead people to feel and look youthful for at least twenty or thirty more years, which can lead to enhanced productivity, well-being and flourishing.* As future generations live longer than all prior generations (except maybe Methuselah), we will need to start finding methods to decrease the physical signs and symptoms of aging. Botox and similar products are great solutions and they are currently available; we do not need to wait for medical advances.

In my opinion all doctors, nurses, and healthcare workers should be trained in anti-aging. They may decide not to offer these procedures but learning them and educating their clients and patients must be encouraged.

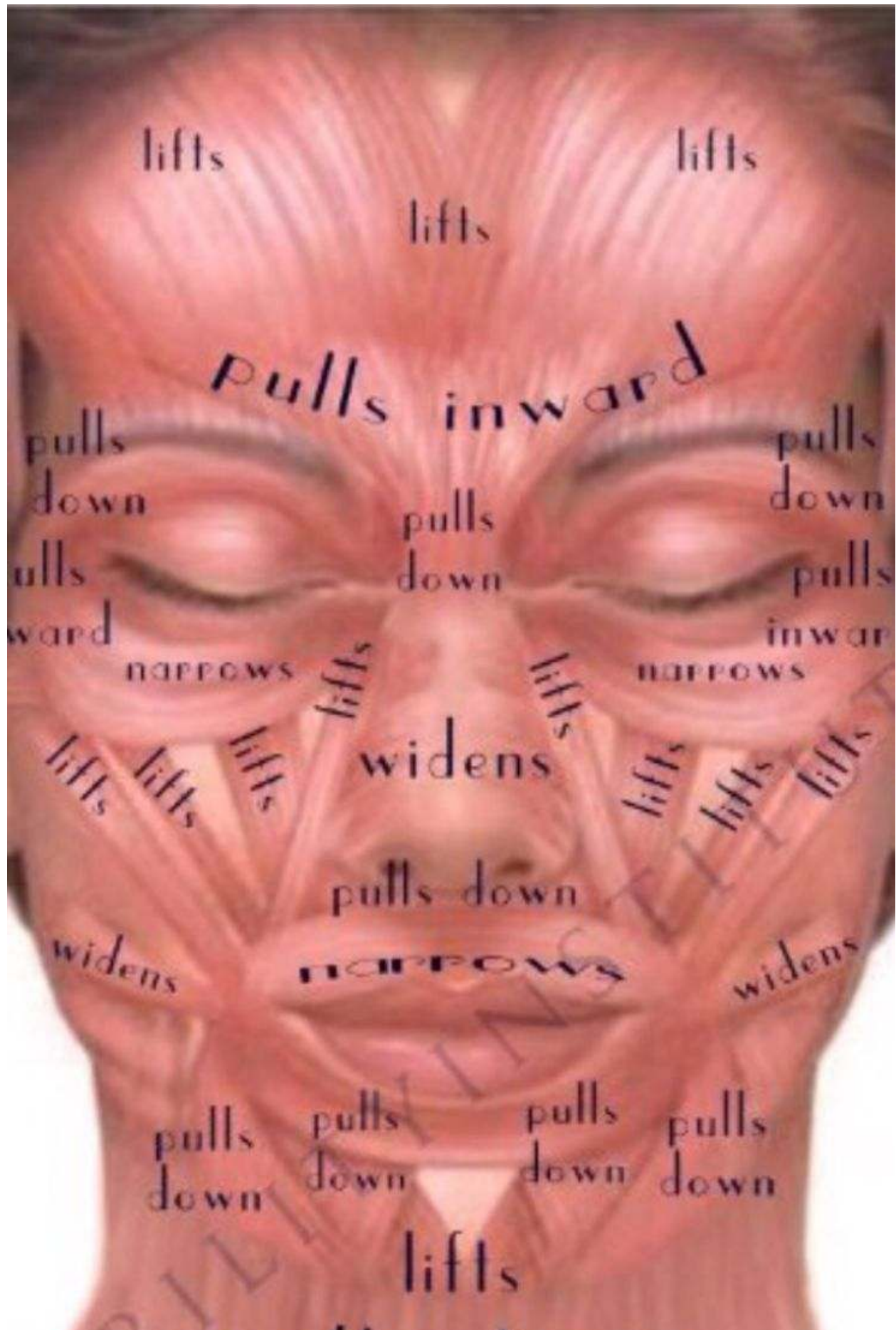
My own pic from the recent face app which I want to turn into Andy Warhol design someday.



-Personal impact of botox on myself and others.

When I was 38 and struggling to get out of my emotionally abusive marriage, I had filed for divorce and the lawyers were having a field day. I was hemorrhaging money and was an emotional mess. Leaving a bad marriage is even more painful when you share a child. I remember being sad about losing 13 years of my life with someone I didn't love. "It's like a life sentence" I would say to my mom, who would just look at me as if she knew what I was talking about. On top of all the stress of undergoing an

acrimonious divorce, I also started noticing lines appearing between my eyes. Although after making my ex leave my house, life was much more calm and the daily battles quieted down. My aging face started causing me anxiety. I also started developing acne, probably due to long hours of mental and physical work and sleep deprivation. Botox and a little bit of filler at a local plastic surgeon's office (where I had previously worked as surgical assistant during oculo-plastic surgery procedures) was nothing less than a blessing. Suddenly I started looking 7 to 8 years younger. I felt as if God gave me another shot at my lost 30s. I never looked back after that. I no longer needed any more proof that these things worked. I knew that I must learn how to do them myself in order to help myself in a more cost effective way.



I learned all the new techniques, went to several training sessions, brought consultants over to my office to train me and guide me to do it well. Then in 2012, I started providing these services to my clients from my family medicine practice. In a sense, I had a lifelong interest in aesthetics, starting as a school girl in Pakistan when I learned the fine skills of threading eyebrows and selling DIY homemade hair and eyelash growth elixirs to earn some extra lunch money. Starting my own aesthetic business as a doctor was a far cry from what I had imagined myself doing in medicine. Doctors usually have lack luster lives which are spent in dealing with the death and diseases of fellow humans. But here I was, committing myself to the continued wellness and anti-aging of my clients and patients. I wrote my own narratives about services and discussed how they will improve the quality of their lives and health. My aesthetic following got quite large and started overwhelming my insurance-dependent medical practice. As a result, I decided to build and open another office in 2017 solely for wellness

oriented clients.





JuvanniMedSpa New Location taking shape

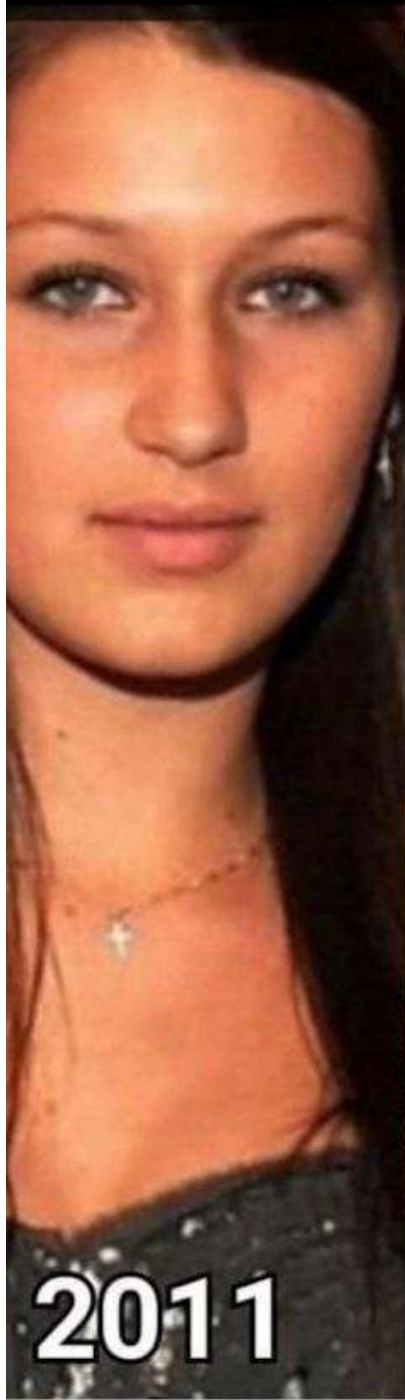
Now I have hundreds of clients who tell me how much benefit they derive from these routine services. From headache relief to improved energy and self-esteem, these services add benefit if used correctly and consistently.

Antiaging is no longer simply a shallow concept about someone's vanity. It can't be done via topical applications or expensive creams for too long. It's also no longer like owning a luxury bag, for example, a Birkin or a Gucci or even their knock-offs. This is important stuff that has the potential to add several years of vitality and confidence to your life, enhance your physical appearance and who knows it may even make us sound wise beyond our years, (since no one can really tell your age if you anti-age).

Well everyone learns more from experiencing life. And if you are 60 but you look and feel like someone still in the prime of life, that's just twenty more years worth of wisdom under your belt and another shot at the two decades that you just spent. I just council people to start early *like most celebrities do; however, just don't do more than what is essential for the anti-aging of your face.*



Aging gracefully redefined



@celebface