Annals of R.S.C.B., ISSN:1583-6258, Vol. 25, Issue 3, 2021, Pages. 793 - 814
Received 16 February 2021; Accepted 08 March 2021.

Fascination towards Cosmetic Treatments among College Students

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ABSTRACT

Cosmetic surgery is a voluntary or elective surgery that is performed on normal parts of the body with the only purpose of improving a person's appearance or removing signs of ageing. It is popular among college students, but most of the population are unaware of the risks associated with cosmetic treatment. Obsession to cosmetic treatment is because of the influence of the media and body dysmorphic disorder. This study involves college students in the age group of 18-25 years. A well structured questionnaire was prepared comprising 12 questions covering socio-demographic information, knowledge, attitude, perceptions was framed and administered to the participants through an online google forms link. Of the total participants 39.6% of them are male and 60.4% of them are female. 52.5% of people had undergone cosmetic treatment and 47.5% of people did not undergo cosmetic treatment. 55% of people think of undergoing cosmetic treatment whereas 45% of people don't think of undergoing cosmetic treatment. It may be concluded that the level of awareness about cosmetic procedures is inadequate. With the progressive increase in the number of people who undergo cosmetic treatments, there is a need in understanding the requirement, assessing the risks of cosmetic procedures both surgical and nonsurgical by the college students.

KEYWORDS: Attitudes, Cosmetic procedures, Cosmetic treatment, Body Dysmorphic disorder, Students, Survey

INTRODUCTION

Cosmetic treatment is an aspect of plastic surgery that deals with maintenance,restoration or enhancement of one’s physical appearance through surgical techniques. Physical appearance and its attractiveness has an influence in our everyday lives.(Furnham and Levitas, 2012) During world war I thousands of soldier's facial structures were damaged, so to restore their structures and for the reconstruction of the facial features, methods to restore the facial features as well as body features and those processes rapidly gained popularity.(Bradbury, 1994) In the modern era, people undertake those surgeries due to their mental state and lack of confidence in their own bodies. Something getting changed about themselves via surgery reduces body dysmorphia.

Body dysmorphia is an imagined defect in physical appearance and leads to disruption in daily function. This disorder is mostly common in those who seek cosmetic surgery. Previous studies suggests that persons with body dysmorphia do not benefit from any of the cosmetic treatments and they often experience worsening of body dysmorphic disorder symptoms.(von Soest*et al.*, 2006) Important part of determining patients is the identification of body dysmorphic disorder symptoms for cosmetic procedures. Body dysmorphic disorder occurs in 1% of the general population but more prevalent among cosmetic patients. In some of its sufferers it can even lead to suicide.(Glaser and Kaminer, 2005) The procedures do not treat body dysmorphic disorder and it can worsen the problem ultimately. The psychological root is unidentified in this problem, therefore the treatment becomes even more difficult. Some studies say that fixation in an area could be because of sub disorders such as muscle dysmorphia or anorexia.(Miller, 2005)

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Cosmetic surgery is a voluntary surgery that is done in normal body parts with the only purpose of improving the appearance of a person or removing aging signs.(Honigman and Castle, 2006) It is both surgical and non surgical. Many procedures are done to meet the society's definition of beauty. The most popular procedures done are nose reshaping, eyelid surgery. These surgeries are still expensive and they are being covered by health insurances.

In today's world most college students are getting addicted to cosmetic treatment because of the influence of the media. The three factors that play a role in it is media, medical advancement and characteristics of a patient.(Kim, Chae and Kim, 2017) Media has a large impact in determining the appearance of a person and also one's decision to select cosmetic surgery. Media influence affects the body image satisfaction and self esteem.(Champion and Furnham, 1999)(Swami, 2009) It is important to know that psychological processes are the only thing that leads a person to undergo cosmetic surgery.(Sarwer*et al.*, 1998; Mühlan, Eisenmann-Klein and Schmidt, 2007) Factors such as low self-esteem, low life satisfaction, low self-rated attractiveness and little religious beliefs leads to cosmetic surgery.(Furnham and Levitas, 2012)

All surgeries have risks and in cosmetic surgery the risk include nerve damage, infection, organ damage and scarring. Researchers believe that cosmetic surgery treatments are linked with psychological disorders like body dysmorphic disorder.(Ribeiro, 2017) There always exists some correlation between people suffering from body dysmorphic disorder and their obsession in cosmetic treatment in order to correct their defective appearance.(Veale, 2008)

The anterior maxillary teeth and mandibular teeth primarily satisfy aesthetics.(Ariga*et al.*, 2018a)(Jain, Ranganathan and Ganapathy, 2017) Temporary partial dentures affect the aesthetic(Jyothi *et al.*, 2017) of the face. Implants increase the aesthetic of the face.(Duraisamy*et al.*, 2019)(Vijayalakshmi and Ganapathy, 2016) Methicillin-resistant Staphylococcus aureus causes infection in skin and soft tissues.This reduces the aesthetic of the face.(Ganapathy, 2016; Selvan and Ganapathy, 2016) Aloe vera is used for aesthetic purposes.(Subasree, Murthykumar and Dhanraj, 2016) Cellulitis causes swelling.(Vijayalakshmi and Ganapathy, 2016) Restorations maintain the aesthetic of the face.(Vijayalakshmi and Ganapathy, 2016)(Ajay *et al.*, 2017) Replacing the lip contour is one of the cosmetic procedure.(Ashok *et al.*, 2014)(Kannan and Venugopalan, 2018a) The acquired facial deformity due to trauma and tumor can cause severe disfigurement and facial impairment and also such individuals even reported to have depression.(Venugopalan*et al.*, 2014) Maintaining oral hygiene helps to maintain aesthetic of face.(Basha, Ganapathy and Venugopalan, 2018a)

In recent years it became popular among younger people with the influence of the western media.(Ashok and Suvitha, 2016) Therefore with the reconstruction of facial features, one can enhance their attitude, self - esteem, confidence and psychological well being and it is imperative that one should contemplate the risk factors associated with cosmetic surgeries(Rohrich and Steinstraesser, 2013)investigate their level of understanding regarding the risks and benefits of such procedures.

Our team has rich experience in research and we have collaborated with numerous authors over various topics in the past decade (Ariga*et al.*, 2018b; Basha, Ganapathy and Venugopalan, 2018b; Hannah *et al.*, 2018; Hussainy*et al.*, 2018; Jeevanandan and Govindaraju, 2018; Kannan and Venugopalan, 2018b; Kumar and Antony, 2018; Manohar and Sharma, 2018; Menon *et al.*, 2018; Nandakumar and Nasim, 2018; Nandhini, Babu and Mohanraj, 2018; Ravinthar and

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Jayalakshmi, 2018; Seppan*et al.*, 2018; Teja, Ramesh and Priya, 2018; Duraisamy*et al.*, 2019; Gheena and Ezhilarasan, 2019; Hema Shree *et al.*, 2019; Rajakeerthi and Ms, 2019; Rajendran *et al.*, 2019; Sekar*et al.*, 2019; Sharma *et al.*, 2019; Siddique *et al.*, 2019; Janani, Palanivelu and Sandhya, 2020; Johnson *et al.*, 2020; Jose, Ajitha and Subbaiyan, 2020).

The aim of the study is to assess the fascination towards the cosmetic treatment among college students, by investigating their level of understanding regarding the risks and benefits of such procedures

MATERIALS AND METHODS

Study setting

It is a prospective observational study. The study was approved by the scientific review board of the institute. The sample size is 100 college students.

Sampling for survey

The population of the study was based on simple random sampling. The sampling size selected was based on reviewing the existing literature related to cosmetic procedures among youth, where the study sample size was 1500 students, with population having cosmetic surgery experience among 559 participants.(Ng *et al.*, 2014)(Sarwer*et al.*, 2005)(Ganapathy, Kannan and Venugopalan, 2017) The sampling method was a simple random sampling. The measures taken to minimize the sample bias are to check validity (ie) internal and external validity, to minimize errors in questions and to avoid errors in questions.

Data collection

A self structured questionnaire was prepared. The set of questions were validated. The survey was circulated through an online survey google forms link. Data was collected and tabulated in Excel sheets. Output variables include demographic information, cosmetic treatment, risks and knowledge. Age, sex, lifestyle and family are the list of independent variables. Awareness, interaction, knowledge, attitude, perception are lists of dependent variables.

Analysis

The data from the google forms is analysed and then put into the excel sheet and then tabulation of the data finally and the question comparison is done. The representation of the data is through the pie chart or bar graph. The statistical software IBM SPSS V22 was used. The statistical test used was the student T test. Types of analytics used were descriptive analysis, demographic data. The independent variables of the present study is the gender and educational qualification.

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RESULTS AND DISCUSSION

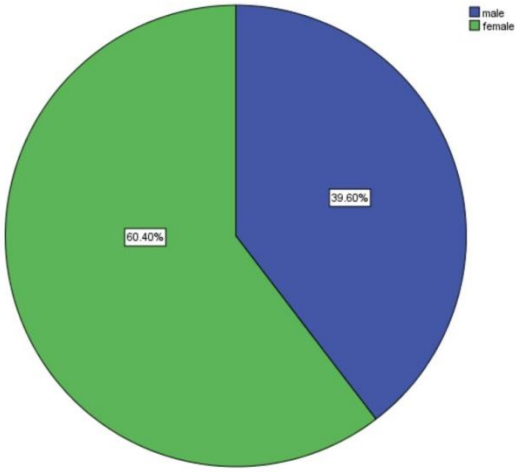

Fig : 1 The pie chart represents the gender distribution of the participants. 39.6%(blue colour) are male and 60.4%(green colour) are female.

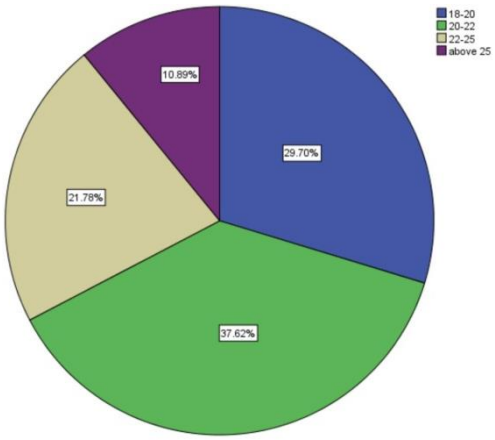

Fig: 2 The above pie chart represents age distribution of the study population. 10.89%(purple color) of people belong to the age of above 25 years, 21.78%(sandal color) of people belong to 22-25 years, 29.7%(blue color) of people belong to 18-20 years and 37.62%(green color) of people belong to 20-22 years.

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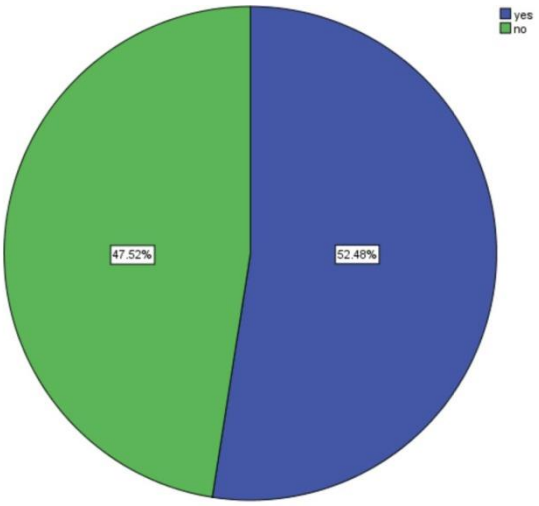

Fig: 3 The above pie chart represents percentage distribution of the study population who underwent cosmetic treatments. 47.52%(green color) of people who did not undergo any cosmetic treatment and 52.48%(blue color) of people who have undergone cosmetic treatment.

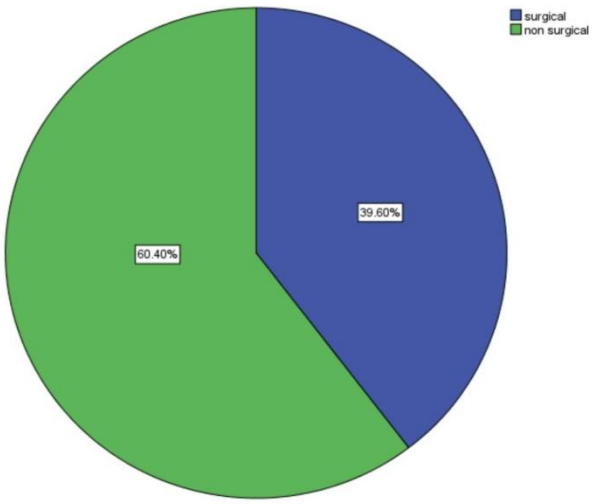

Fig: 4 The above pie chart represents distribution of the study population who have undergone cosmetic treatment surgically and non-surgically. 60.40%(green color) of people who have undergone cosmetic treatment non-surgically and 39.60%(blue color) of people who have undergone surgery.

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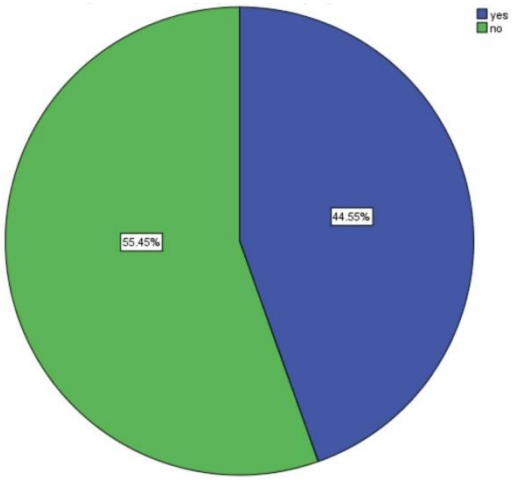

Fig: 5 The above pie chart shows distribution of the study population representing awareness on cosmetic treatment for dysmorphia, 44.55%(blue color) of people who have responded that body dysmorphia plays a role in cosmetic treatment and 55.45%(green color) of people responded that body dysmorphia does not play a role in cosmetic treatment.

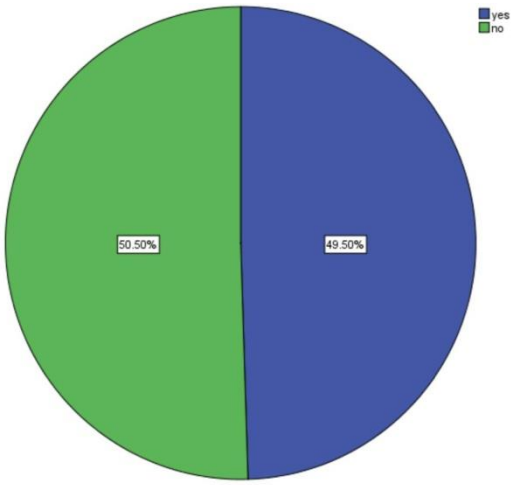

Fig: 6 The above pie chart shows distribution of the study population who think that cosmetic treatment enhances socio-economic position, 49.50%(blue color) of people who have responded that cosmetic treatment enhances socio-economic position and 50.50%(green color) of people responded that cosmetic treatment does not enhance socio economic position.

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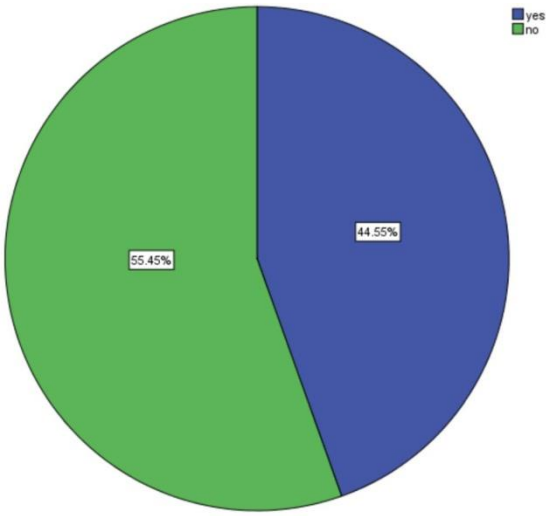

Fig: 7 The above pie chart shows distribution of the study population who think of undergoing cosmetic treatment, 44.55%(blue color) of people think of undergoing cosmetic treatment whereas 55.45% of people do not think of it.

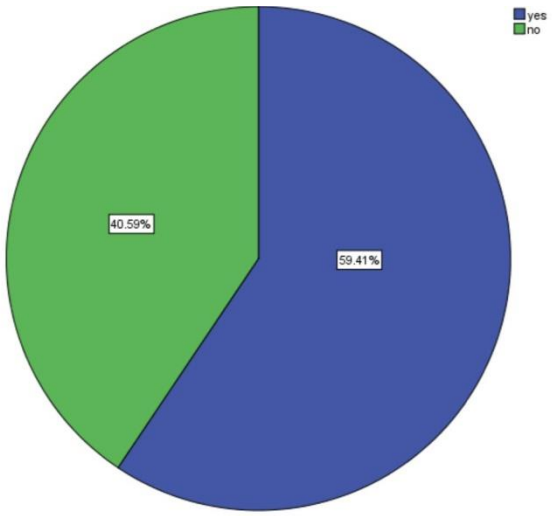

Fig: 8 The above pie chart shows distribution of the study population representing awareness of the risk associated with cosmetic treatment, 59.41%(blue color) of people are aware of the risk associated with cosmetic treatment, 40.59% (green color)of people are not aware of it.

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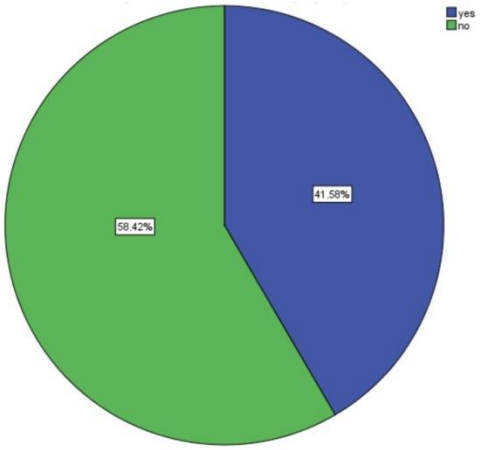

Fig: 9 The above pie chart shows distribution of the study population who think cosmetic treatment improves self esteem, 41.58%(blue color) of people who have responded that cosmetic treatment improves self esteem and 58.42%(green color) have responded that it does not improve.

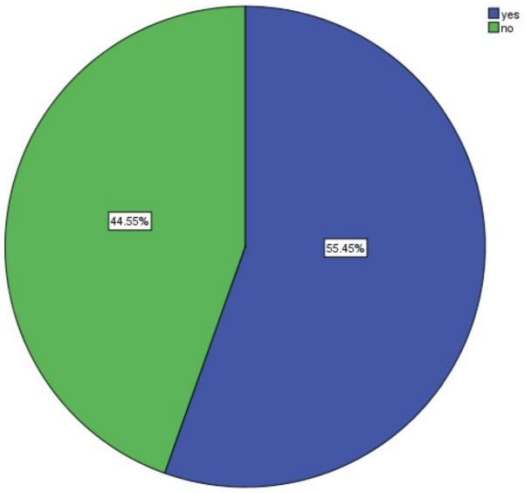

Fig: 10 The above pie chart shows distribution of the study population representing awareness of the procedures done on cosmetic treatment, 55.45%(blue color) of people who have responded that Cosmetic treatment is safe and complication free, whereas 44.55%(green color) of people have responded that it is not safe.

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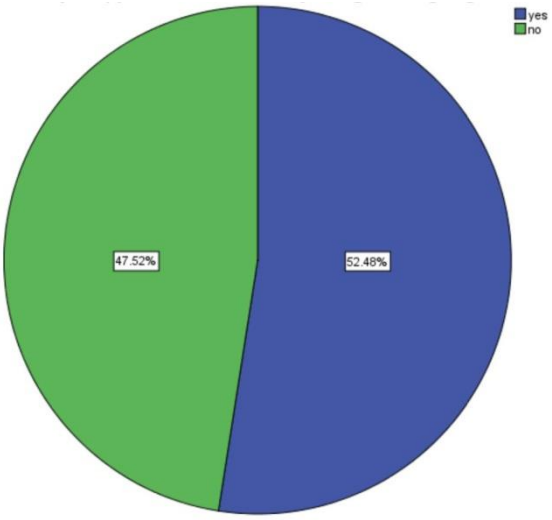

Fig: 11 The above pie chart shows distribution of the study population who approve of people undergoing cosmetic treatment, 52.48%(blue color) representing people who approve of students their age undergoing cosmetic treatment and 47.52%(green color) of people do not approve.

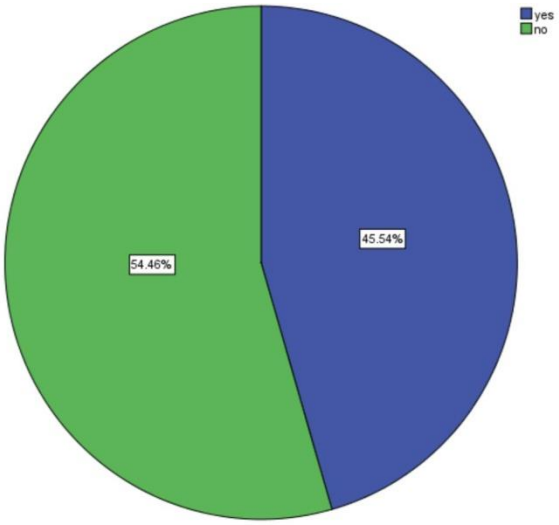

Fig: 12 The above pie chart shows distribution of the study population representing embarrassment on cosmetic treatment, 45.54%(blue color) of people who are embarrassed about cosmetic treatment and 54.46%(green color) are not embarrassed about it.

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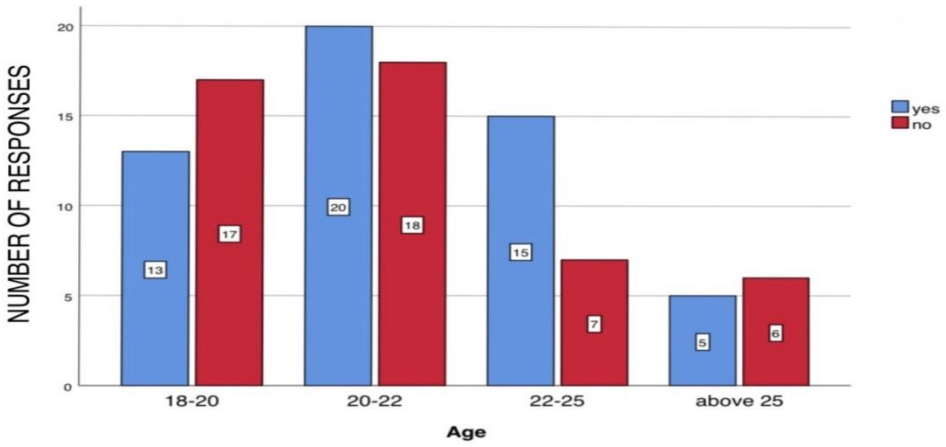

Fig 13: Bar chart represents the association between age and cosmetic treatment. X axis represents the age and Y axis represents the participants who have undergone cosmetic treatment. Blue colour represents participants who have undergone cosmetic treatment and red colour represents the participants who have not undergone any cosmetic treatment. Pearson Chi square value = 3.3, p=0.33 (>0.05) indicating statistically not significant.Though statistically not significant, this implies the majority of students within the age group 20-22 years have undergone cosmetic treatment.

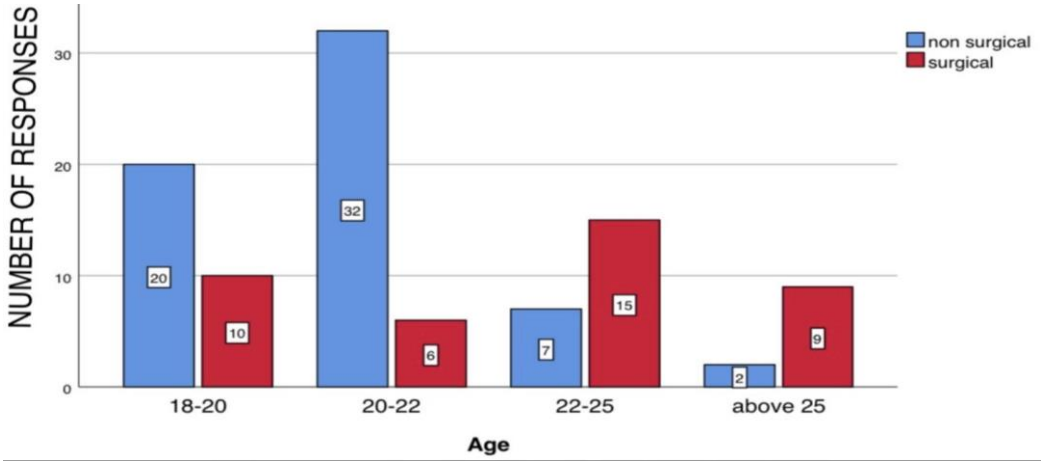

Fig 14: Bar chart represents the association between age and the type of cosmetic treatment. X axis represents the age and Y axis represents the treatment undergone by the participants whether surgical or non surgical. Blue color represents non surgical treatment undergone by the participants. Red colour represents surgical treatment undergone by the participants. Majority of the participants of age 20-22 have undergone non surgical methods of cosmetic treatment. Pearson Chi square value =25.21, p= 0.00 (< 0.05 indicating statistically significant). This proves that the participants between the age groups of 20-22 have undergone more nonsurgical treatments.

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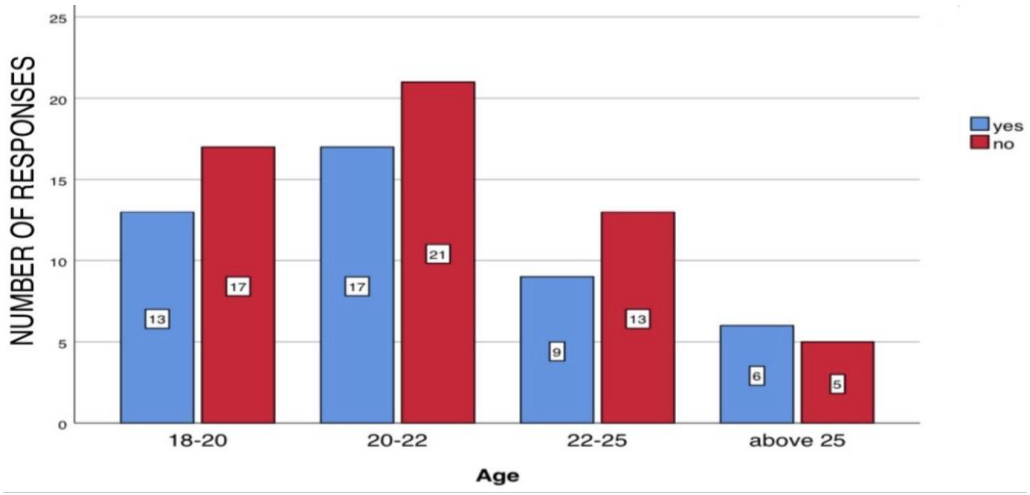

Fig 15: Bar chart represents the association between age and awareness on the role of body dysmorphia. X axis represents the age and Y axis represents the number of the responses. Blue colour represents participants who think body dysmorphia plays a role in cosmetic treatment. Red colour represents participants who do not. Majority of the participants of age 20-22 are unaware that body dysmorphia plays a role in cosmetic treatment. Pearson Chi square value= p=0.90 (>0.05) indicating statistically not significant.Though statistically not significant, this implies the majority of the participants within the age group of 20-22 are aware regarding cosmetic treatment for body dysmorphia.

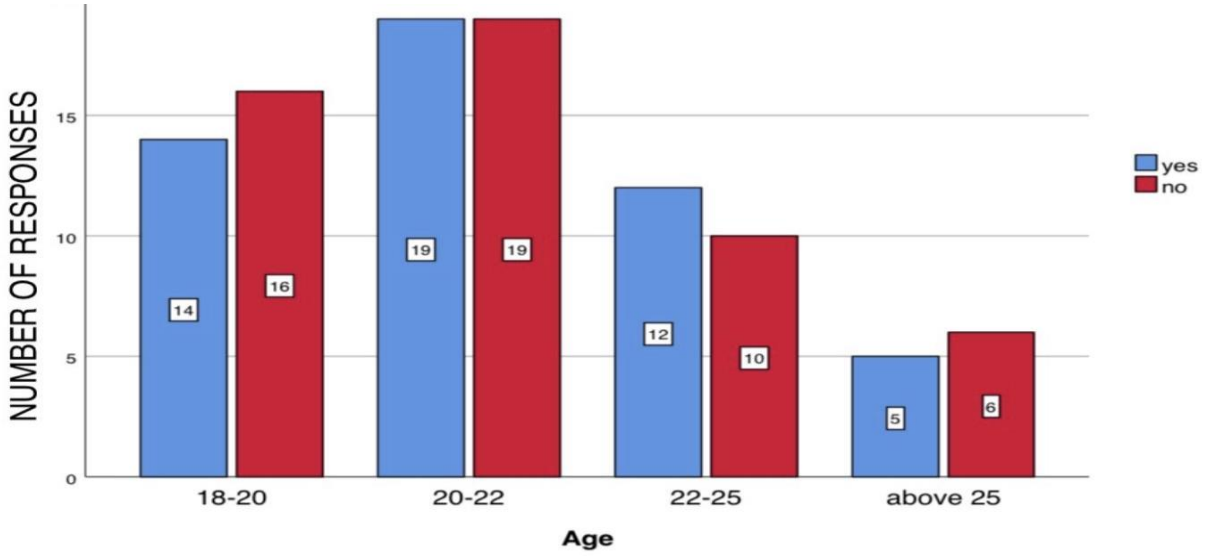

Fig 16: Bar chart represents the association between age and socio economic position. X axis represents the age and Y axis represents responses on whether cosmetic treatment enhances socioeconomic position. Blue colour represents participants who think cosmetic treatment enhances socioeconomic position. Red colour represents participants who do not think cosmetic treatment enhances socioeconomic position. Majority of the participants of age 20-22 think that it enhances their socioeconomic position. Chi square test shows p=0.94 (>0.05) indicating statistically not significant. Though statistically not significant, this implies that the majority of

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the students within the age group of 20-22 are aware regarding cosmetic treatments and its influence in socio economic position.

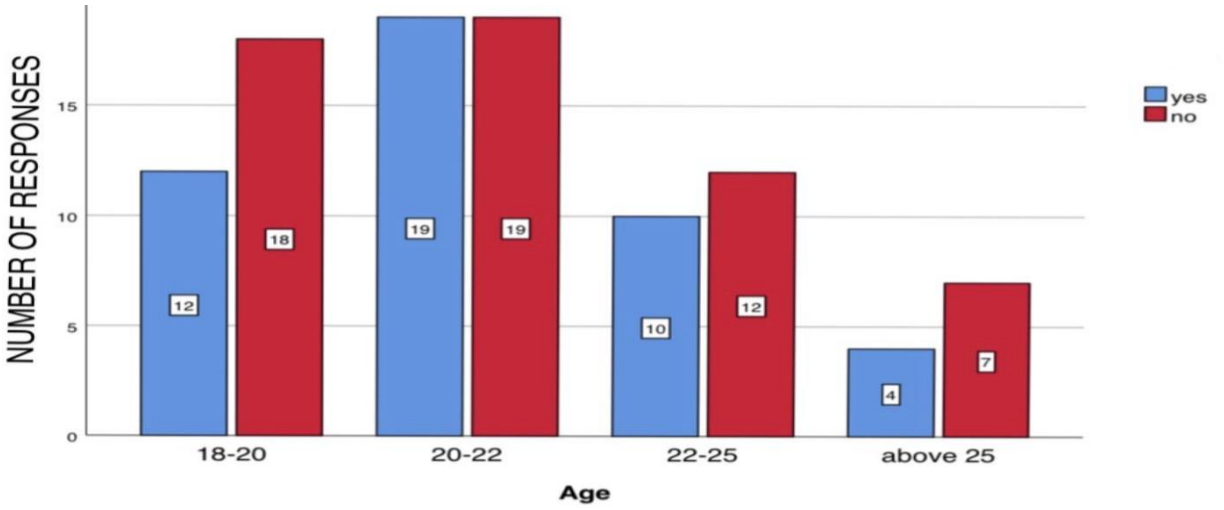

Fig 17: Bar chart represents the association between age and cosmetic treatment. X axis represents the age and Y axis represents the participants who think of undergoing cosmetic treatment in future. Blue colour represents participants who think of undergoing cosmetic treatment. Red colour represents participants who do not .Majority of the people of age 20-22 think of undergoing cosmetic treatment in future. Chi square test shows p=0.79 (>0.05) indicating statistically not significant. Though statistically not significant, this implies the majority of the participants within the age group of 20-22 years show their willingness to undergo cosmetic treatments.

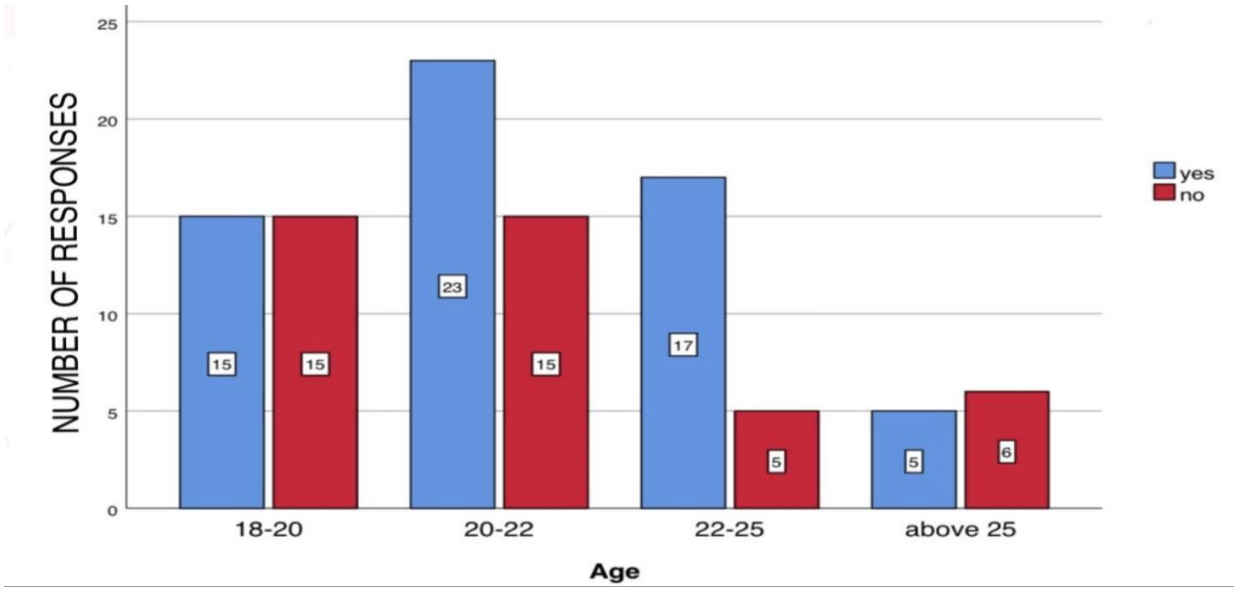

Fig 18: Bar chart represents the association between age and risks associated with cosmetic treatment. X axis represents the age and Y axis represents the number of responses related to

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awareness of the risks associated with cosmetic treatment. Blue colour represents participants who are aware of the risks associated with cosmetic treatment. Red colour represents participants who are not aware of the risks associated with cosmetic treatment. Majority of the participants of age 20-22 are aware of the risks associated with cosmetic treatment. Chi square test shows p=0.17 (>0.05) indicating statistically not significant. Though statistically not significant, this implies the majority of the students within the age group of 20-22 years were aware about the risks associated with cosmetic treatments.

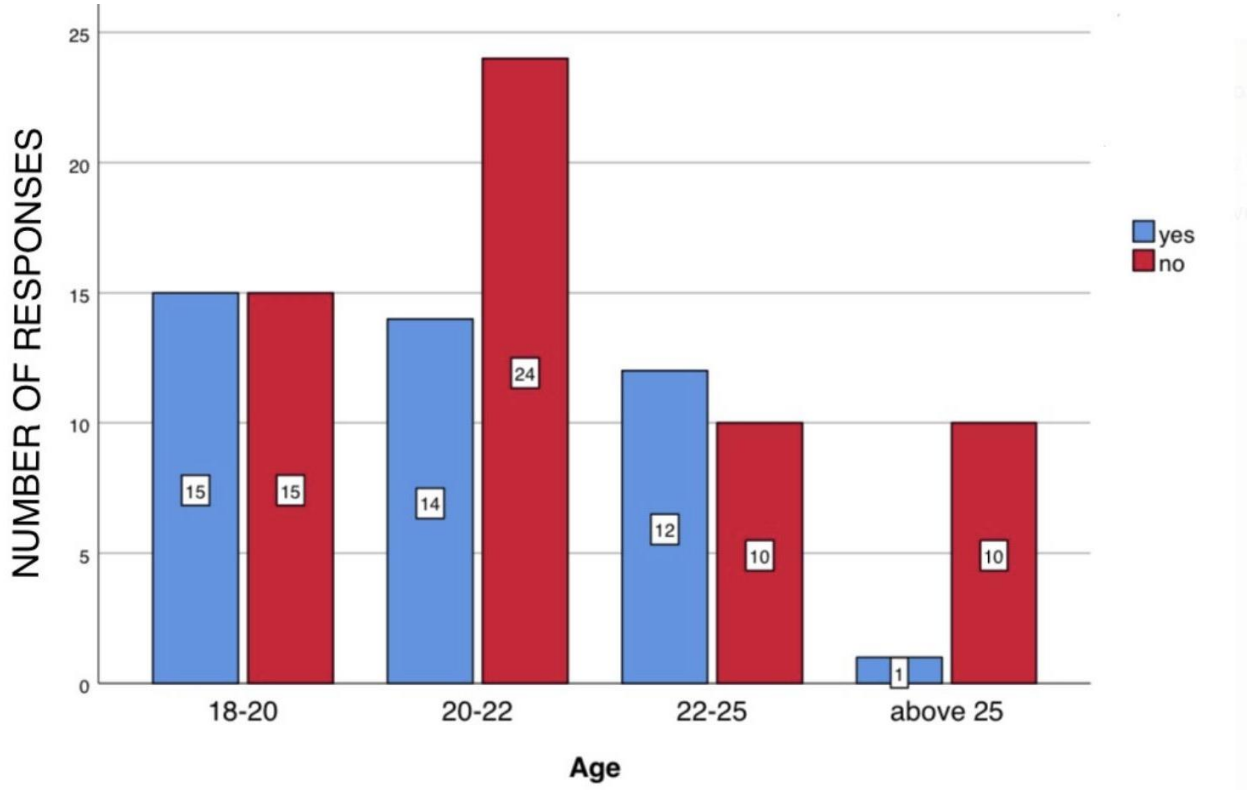

Fig 19: Bar chart represents the association between age and self esteem. X axis represents the age and Y axis represents the number of responses related to the role of self esteem in cosmetic treatment. Blue colour represents participants who think that cosmetic treatment improves self esteem and Red colour represents participants who do not think that cosmetic treatment improves self esteem. Majority of the participants of age 20-22 think that cosmetic treatment does not improve self esteem. Chi square test shows p=0.06 (>0.05 indicating statistically not significant) Though statistically not significant, this implies that the majority of the students within the age group of 18-20 years agree cosmetic treatments elevates the self esteem of the individual.

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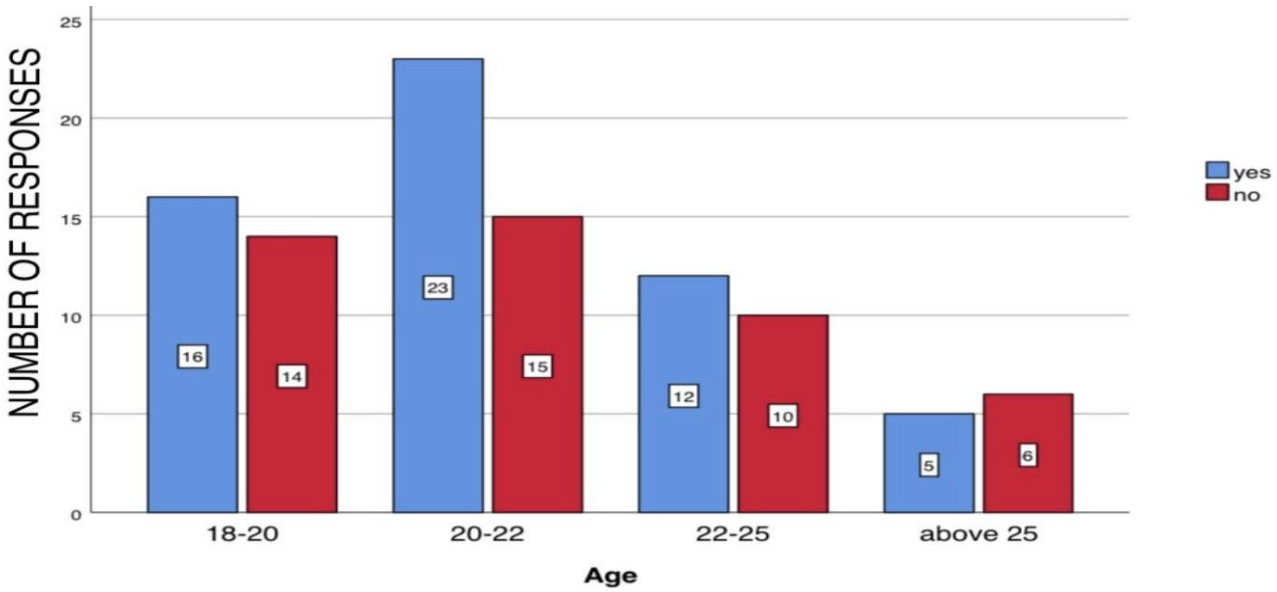

Fig 20: Bar chart represents the association between age and cosmetic procedures. X axis represents the age and Y axis represents the number of responses related to awareness that the procedures done in cosmetic treatment are safe and complication free. Blue colour represents the participants who think the procedures done in cosmetic treatment are safe and complications free. Red colour represents the participants who do not think the procedures done in cosmetic treatment are safe and complication free. Chi square test shows p=0.82 (>0.05 indicating statistically not significant). Though statistically not significant, this implies that the majority of the participants within the age group of 20-22 years are aware of the procedures done in cosmetic treatment.

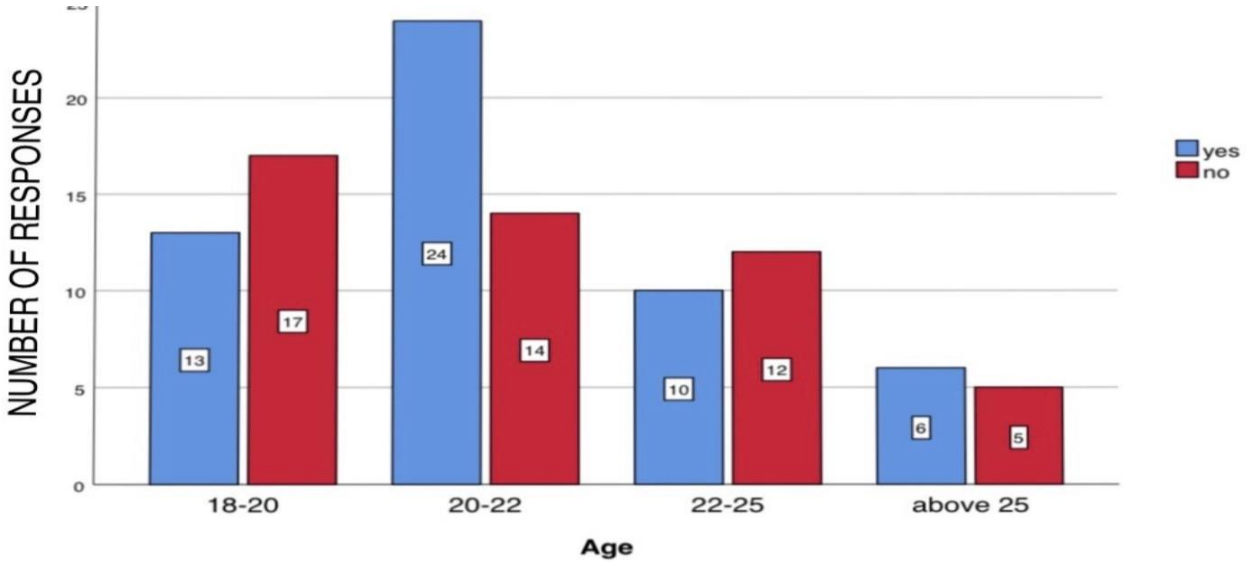

Fig 21: Bar chart represents the association between age and whether the participants support that students of their age undergoing cosmetic treatment. X axis represents the age and Y axis represents the participants who approve the students of their age undergoing cosmetic

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treatment.Bluecolour represents the participants who approve students of their age undergoing cosmetic treatment. Red colour represents the participants who do not approve students of their age undergoing cosmetic treatment. Majority of the participants of age 20-22 approve of students their age undergoing cosmetic treatment. Chi square test shows p=0.36 (>0.05 indicating statistically not significant). Though statistically not significant, this implies that the majority of the participants within the age group of 20-22 years support students of their age undergoing cosmetic treatments.

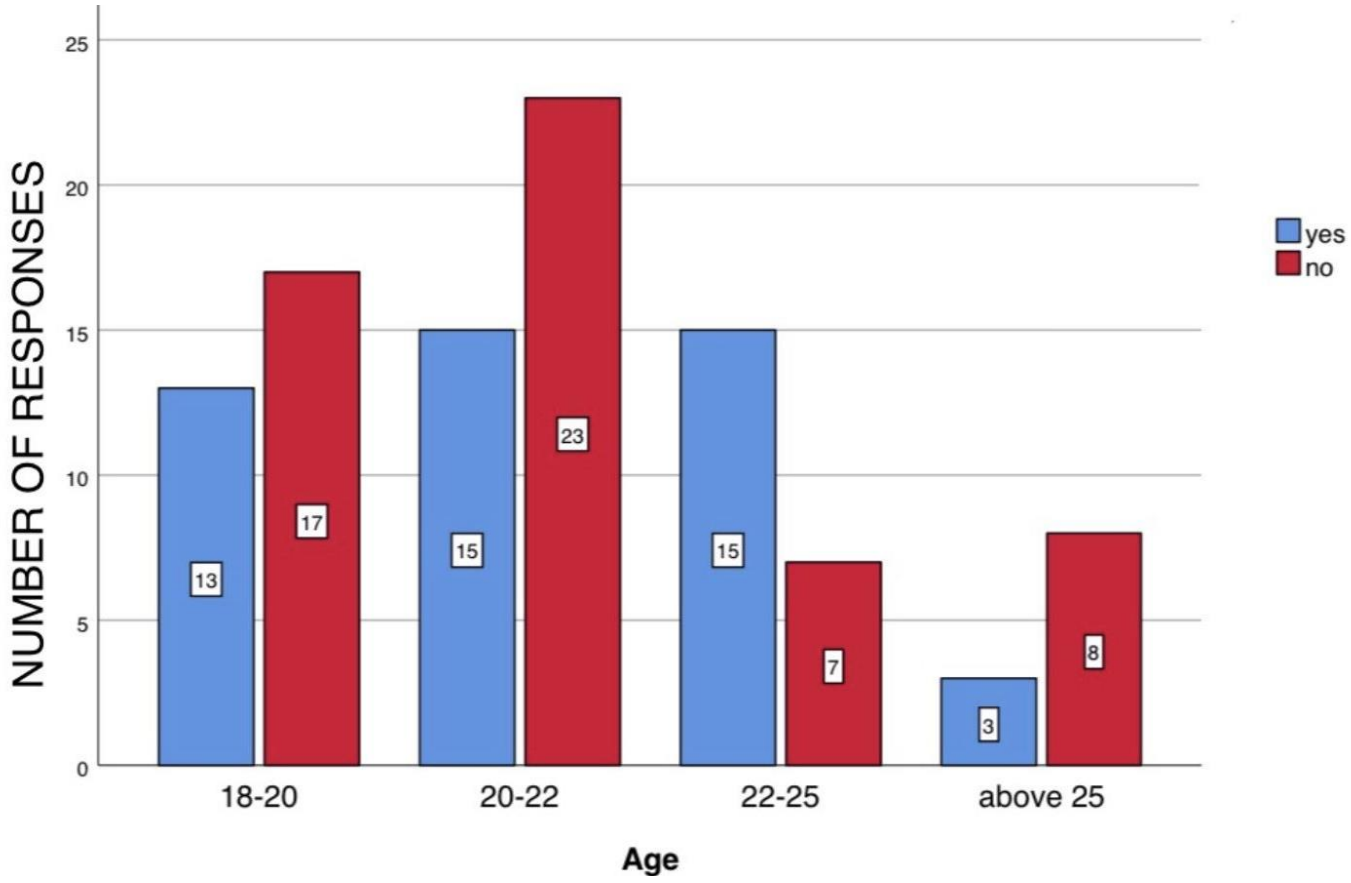

Fig 22: Bar chart represents the association between age and embarrassment in undergoing cosmetic treatment. X axis represents the age and Y axis represents the participants who will be embarrassed about undergoing a cosmetic treatment. Blue colour represents the participants who are embarrassed about undergoing cosmetic treatment and Red colour represents the participants who are not embarrassed about undergoing cosmetic treatment. Chi square test shows p=0.08 (>0.05 indicating statistically not significant) Though statistically not significant, this implies that the majority of the participants within the age group of 20-22 years are also embarrassed about undergoing cosmetic treatment

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Fig: 1 shows 39.6% of them are male and 60.4% of them are female. Fig: 2 shows 10.9% of people belong to the age of above 25 years, 21.8% of people belong to 22-25 years, 29.7% of people belong to 18-20 years and 37.6% of people belong to 20-22 years. Fig: 3 shows 47.5% of people did not undergo any cosmetic treatment and 52.5% of people have undergone cosmetic treatment. Fig: 4 shows 61% of people have undergone non-surgically and 39% of people have undergone surgery. Fig: 5 shows 44.6% of people have responded that body dysmorphia has a role in cosmetic treatment and 55.4% does not have a role in it. Fig: 6 shows 49.5% of people have responded that cosmetic treatment enhances socio-economic position and 50.5% of people responded it does not enhance. Fig: 7 shows 55% of people think of undergoing cosmetic treatment whereas 45% of people do not think of it. Fig: 8 shows 40.6% of people are aware of the risk associated with cosmetic treatment, 59.4% of people are not aware of it. Fig: 9 shows 41.6% of people have responded that cosmetic treatment improves self esteem and 58.4% have responded that it does not improve. Fig: 10 shows 45% of people have responded that Cosmetic treatment is safe and complication free, whereas 55% of people have responded that it is not safe. Fig: 11 shows 47.5% of people do not approve of students of their age undergoing cosmetic treatment and 52.5% approved it. Fig: 12 shows 45.5% of people are embarrassed about cosmetic treatment and 54.5% are not embarrassed about it. We have seen association using chi square analysis between age and people who have undergone cosmetic treatment (Fig 13), method of cosmetic treatment undergone by the participants (Fig 14), awareness on the role of body dysmorphia in cosmetic treatment (Fig 15), enhancement of socioeconomic position (Fig 16), participants who think of undergoing cosmetic treatment (Fig 17), awareness on the risks associated with cosmetic treatment (Fig 18), role of self esteem in cosmetic treatment (Fig 19), awareness on the procedures done in cosmetic treatment (Fig 20), participants suggestion on cosmetic treatment to the students of their age (Fig 21), participants behaviour towards cosmetic treatment (Fig 22). Comparing the variabilities (Chi square analysis) between age and the method of cosmetic treatment undergone by the participants p=.00 and is statistically significant ($p<0.05$) (Fig 14). Comparing the variabilities between between age and people who have undergone cosmetic treatment (Fig 13), awareness on the role of body dysmorphia in cosmetic treatment (Fig 15), enhancement of socioeconomic position (Fig 16), participants who think of undergoing cosmetic treatment (Fig 17), awareness on the risks associated with cosmetic treatment (Fig 18), role of self esteem in cosmetic treatment (Fig 19), awareness on the procedures done in cosmetic treatment (Fig 20), participants suggestion on cosmetic treatment to the students of their age (Fig 21), participants behaviour towards cosmetic treatment (Fig 22) are statistically not significant ($p>0.05$).Our institution is passionate about high quality evidence based research and has excelled in various fields ((Pc, Marimuthu and Devadoss, 2018; Ramesh *et al.*, 2018; VijayashreePriyadharsini, SmilineGirija and Paramasivam, 2018; Ezhilarasan, Apoorva and Ashok Vardhan, 2019; Ramaduraiet *al.*, 2019; Sridharan *et al.*, 2019; VijayashreePriyadharsini, 2019; Chandrasekar *et al.*, 2020; Mathew *et al.*, 2020; R *et al.*, 2020; Samuel, 2021)

A previous study conducted by Sarwer DB et al, in which 30% of people have undergone cosmetic treatment which is slightly similar to the result of present study (fig: 3) (Sarwer*et al.*, 2005). A previous study conducted by Crerand CE et al stated that 7-15% of people suffer from body dysmorphia(Crerand, Franklin and Sarwer, 2006) which is compared with the awareness of body dysmorphia in the present study (fig: 5). A previous study conducted by Yeak S et al, 44% of people considered undergoing cosmetic treatment(Ng *et al.*, 2014) which is compared with the present study(fig: 7). a previous study conducted by Yeak S et al , 51.8% are not aware of the

Annals of R.S.C.B., ISSN:1583-6258, Vol. 25, Issue 3, 2021, Pages. 793 - 814
Received 16 February 2021; Accepted 08 March 2021.

risks(Ng *et al.*, 2014) and this is compared with the present study (fig: 8). A study conducted by Yeak S et al, 35% of students approve students of their age undergoing cosmetic treatment(Ng *et al.*, 2014) which is compared with the results of the present study (fig:11).From a previous study conducted by Yeak S et al, 28.5% and 31.5% of people Junior college and medical students are embarrassed about cosmetic treatment (Ng *et al.*, 2014)which is compared with the present study(fig: 12). The limitation of the study is inclusion of more criteria and increase in sample size. The future scope is to get awareness of the risks and complications of cosmetic treatment.

CONCLUSION

Within the limitations of this study the following conclusion can be drawn, It may be concluded that the level of awareness about cosmetic procedures is inadequate, there is more fascination towards the cosmetic treatments in the studentsbelow the age 22 years age groups. With the progressive increase in the number of people who undergo cosmetic treatments, there is a need in understanding the requirement, assessing the risks of cosmetic procedures both surgical and nonsurgical by the college students.

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