

The Sydney Morning Herald

National [Cosmetic Cowboys](#)

Botox and other injectables the focus of cosmetic industry crackdown

[Laura Banks](#)

September 5, 2023 – 12.05am

Injectables such as Botox and fillers will be the focus of an upgraded health regulator review targeting rogue operators in the cosmetic industry in an attempt to “strengthen the hand of the consumer”.

The Australian Health Practitioner Regulation Agency (AHPRA) and the Medical Board of Australia (MBA) will begin scrutinising doctors, nurses, dentists and other practitioners who perform fillers, anti-wrinkle and fat-dissolving injections and thread lifts.



Cosmetic injectors are in the spotlight as a review of the industry turns its attention to Botox and fillers. ISTOCK

AHPRA chief executive officer Martin Fletcher said while injectables were not in the original scope of the review, it was time to broaden its purview as injectables became more affordable

and accessible and consumers and injectors flocked to the industry.

“It’s clear that the cosmetic sector is booming, you can’t walk down a high street and not see people offering a range of injectables, and we need to put in place guidelines to ensure consumer safety,” he said.

“We see the role of social media, and we see this trend that plays up the benefits [of injectables] but they don’t address the risks, they emphasise the benefits and downplay the risks. This is what we hope to address with these new guidelines.”

Medical practitioners are already subject to MBA guidelines but nurses, dentists and other health practitioners are not.

Proposed new guidelines will apply to all registered health practitioners advertising non-surgical cosmetic procedures.

“We are looking to ensure that things like expertise is true and correct, and will introduce a ban on testimonials, and we no longer want to see idealised before and afters,” he said.

“[Injectables are] highly accessible, and we have seen some worrying examples of up-selling, a patient goes in for a treatment they can afford, and they’re coming out having spent far more than they should have.”

The review also hopes to ensure greater informed consent, better training for practitioners to recognise mental health conditions, pre-procedure consultation and treatment carried out only by registered health professionals.

Clinical psychologist Dr Ryan Kaplan, who specialised in the treatment of body dysmorphic disorder, said the reforms could not come soon enough as the industry had created a market for itself “by creating a problem that truly doesn’t exist, and that problem is the natural ageing process”.

“The golden rule for healthcare professionals is ‘do no harm’, but the reality for some patients is that these procedures do harm and care is needed, appropriate training is needed, to minimise the risk,” he said.

The [Independent review of the regulation of medical practitioners who perform cosmetic surgery](#) report, released last September, identified 16 reforms to ensure patient safety. AHPRA said almost all had been introduced.

The [Cosmetic Hotline was launched following the release of the report](#), and has amassed 428 calls from patients with complaints about their treatments, and from other doctors who have flagged concerns about other practitioners.

Of those calls, 179 have resulted in formal complaints, with 14 doctors no longer practising cosmetic surgery or significantly restricted. A further 12 were penalised with restrictions following an investigation.

Cosmetic injections require a valid prescription from an authorised prescriber, such as a nurse practitioner, a dentist or a doctor. The prescriber is meant to consult the patient to explain risks and possible side effects, but Fletcher said this does not always happen.

MBA chair Dr Anne Tonkin said there had been a positive impact from new advertising guidelines for the cosmetic surgery industry and hoped to see the same outcome in the non-surgical sector.

The Nursing and Midwifery Board of Australia said it would work with AHPRA and the MBA on the roll-out of the new guidelines and had moved to “strengthen” its position statement. Public consultation on the new guidelines will begin in the next month, with the roll-out to be flagged for early 2024.

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