



THE OTHER SIDE OF THE MIRROR

Incorrigible Botox bum **Elizabeth Hayt** became curious to know how her compulsions appeared from where her own Dr. Lookgood, the renowned Fredric Brandt, MD, stood. And so a sociology of cosmetic dermatology was born

On a Friday night at 7:30, 12 hours and 17 patients since the day began at Dr. Fredric Brandt's Manhattan office, all seven examining rooms were still in full swing. The lasers were pulsing, the syringes kept coming, and the good doctor, wearing navy blue Prada stirrup pants, a black Prada belt with a seat-belt-size buckle, metallic Gucci sneakers, and apple green Alain Mikli glasses—a look part Flash Gordon, part Ziggy Stardust—was full of beans. Only his white Dolce & Gabbana shirttail, half untucked and smeared with traces of some emollient, betrayed his blistering pace.

"Dry cleaning's part of the overhead if you want to look like a runway model at work," Brandt told me cheerily. Preternaturally youthful-looking at 58, he has an unlined and jowl-less face, courtesy of self-administered Botox and Restylane injections, liberal use of hydrating and exfoliating solutions, and laser treatments that tone and tighten his skin. His golden

blond hair shows not a glint of gray, thanks to colorist Kyle White of the Oscar Blandi Salon. And at 5'11", his frame, nourished by egg-white omelets, pomegranate seeds, and Ashtanga yoga, holds at an unvarying 155 pounds. Between his lilting spirit, his spry step, and his utter fixation on youthful beauty, he is cosmetic medicine's Peter Pan.

Singing, "Squirt, squirt, squirt went the needle/Plump, plump, plump went the lips" to the tune of "The Trolley Song" from *Meet Me in St. Louis*, Brandt bounded from appointment to appointment. "So what are we doing today?" he asked one woman whose face was slathered with cold, goopy numbing cream in preparation for whatever teeth-gritting cosmetic procedure was to come. "*A biseleh* of Bo?" Brandt asked, using the Yiddish word for "a tiny amount" and shorthand for "Botox."

In 2006, almost 11 million cosmetic procedures were performed in this country, ringing up more than \$11 billion in fees, according to the American Society of Plastic Surgeons. But this data left me wanting more: Where was the human-interest

side? Who were the living subjects crunched into these numbers? I—a seasoned consumer, staunch defender, and longtime voluntary lab rat for professional cosmetic interventions—felt it was incumbent on me to flesh out the findings, which is how I came to spend two days tailing Dr. Brandt, a man who, with a loaded syringe and needle, would rival Michelangelo, were he not a dead sculptor but a living cosmetic dermatologist.

I temporarily stepped outside my usual role as a habitual user of injectables, forever chasing the intact collagen fibers of youth. Besides myself, I wondered, what sorts of patients—in Brandt's office they're tellingly referred to as "clients"—will pay as much as \$7,000 for a full face of injections, not once, but up to three times a year? (I'm waiting an extra month for my next round because, according to my loved ones, my cheeks are starting to become bulky-looking.)

One thing I knew: These women were die-hard beauty bums. Just after 9/11, a mother, 68, and daughter, 43, who live in Michigan but come frequently to New York for Brandt, couldn't get a flight out. Rather than miss their appointments or

rebook them for a later date, they opted to drive some 700 miles to make it—on time, no less.

With Brandt's permission as well as his clients' (who shall all remain nameless), I chronicled the goings-on at his two offices, between which he divides his time—two weeks in Manhattan, two in Miami—as a cosmetic-dermatology candy stripper. Donning an unglamorous pair of baggy black scrubs—Brandt's staff uniform—I fell in, bringing up the rear of the conga line of “girls,” as the nurses call themselves, who follow Brandt from room to room, arranging

laid my gaze as a psycho-socio spectatrix and dermatological taxonomist.

The Middle-aged Virgin

She was a 53-year-old Upper East Sider, a senior executive at a financial firm, and a first-time patient. It was hard to believe, not because she looked younger than her age, but because she looked 10 years older—or what 10 years older would look like if 50 weren't the new 40. Dressed in a simple white shirt, black pants, and beat-up black mules and carrying a no-name

most or corrupt her moral fiber (much).

In the meantime, Brandt was hard at work, sinking Restylane-jacked needles into her face while he explained, “It's not wrinkles that make a person look old, it's the collapse of the rounded surfaces that reflect light and lend fullness to the upper face and cheeks, with a tapering toward the lower face, like an inverted triangle. That's the shape that makes a woman look beautiful and younger. In older women, the lower part of the face gets heavier, while the upper part gets hollowed out. The Restylane can reverse that change.”

Instead of using plain straight needles, Brandt bends the tips 30 to 45 degrees. He delivered the fillers at an angle under the patient's skin, adding volume to the woman's cheeks and chin, distributing the material closer to the surface in a fan-like fashion in order to blend the edges of the filler agents with her new facial contours. This process made them appear natural and gently sloped.

By adding dermal fillers on both sides of the woman's nose and around her cheekbones, the injections did double duty, lifting and firming up her lax lower face, and pulling up and smoothing the deep nasolabial folds known by the cloying euphemism “marionette lines.” When he finished, an hour had passed and the red biohazard waste bin was spilling over with empty vials of Botox and used syringes.

“What I would suggest next is to fill in the outline of your lips,” Brandt said, stepping back for one last look. “But you've had a lot of needles. Let's leave your mouth for another day.”

What a gentleman. He knew that any virgin, middle-aged or otherwise, needs to be broken in slowly, be reassured there will be a next time, and have reason to hope for something more that will still be new and special. Thus, when the woman stepped into the elevator, she had a change of heart. Suddenly liberated from her freshly plowed-under moral compunctions, she stuck her leg into the closing doors, popping them back open, and rushed Brandt's receptionist.

What's the alternative? Pull a Greta Garbo, become a recluse at 36? Better to coat all the mirrors with Vaseline.

trays of cotton gauze, sharp medical instruments, and latex gloves filled with frozen peas to be used as ice packs for postinjection swelling and bruising.

Feeling left out, I snatched up a clipboard as a prop, which doubled as a steno pad for recording my thoughts and insights. I now felt part of the team, offering “oohs” and “aahs” of encouragement to a client who was clenching her fists and curling her toes as she submitted to Brandt's needlework.

“Your lips look so, uh, pillowy,” I complimented her, trying not to wince as Brandt jabbed another dollop of plumper into the tender tissue of her meager mouth, prompting tears to spring from her eyes, the numbing ointment on her lips about as effective as holding a newspaper over your head in a downpour. “Take a look,” I said approvingly, holding up a mirror.

“Hoo-dah-hah,” she moaned, doing her best to say *beautiful*, but her lips—each now inflated to the size of Swedish gummy fish—were in no shape to form words. Still, her eyes beamed at her reflection.

A mirror maid, that was me. Rather than slavishly scrutinizing and obsessing over my own appearance, I would freely observe other women doing as I do: embracing an array of cosmetic procedures that, on the one hand, enable ordinary-looking women to achieve a sense that they are noticeably pretty, and on the other hand are, to all appearances, complicit in a socially sanctioned form of self-mutilation.

Here, then, are my field notes documenting the simultaneously memorable and stereotypical characters on whom I

black bag, her brunette hair in desperate need of a good cut, she was clearly low maintenance.

But at a recent NARAL luncheon, she'd had an epiphany: All the women in the room had looked great, she said, which made her acutely aware of her sorry state. She decided that it was time for a “boost.” Her husband was all too gung ho. (Ouch.)

“I have the face of a gerbil,” the woman announced to Brandt. Despite this brutally honest self-assessment, she was scared to death. It wasn't the needles that terrified her or that she might look “different,” altered but not necessarily better. Her fear was altogether more profound: “I wouldn't want to seem narcissistic, that this is all I think about,” she said.

Her equivocation clearly stemmed from a misguided Puritanical Guilt Complex. Given my long history with manufactured cosmetic enhancement, I wanted to assure her that improving her appearance wouldn't corrode her belief that what's inside matters



dr. brandt's laser in a bottle™ laser relief™
all skin types

Jurlique Arnica Cream

FEELING NEEDLY?
Brandt's regulars could school the best makeup artists on how to hide every postinjection issue. Patients speed bruise healing with Jurlique Arnica Cream (far right), soothe redness and inflammation with Brandt's own Laser in a Bottle Laser Relief (above), and finish with a few dabs of heavy-duty Cover Fx Cream Concealer Foundation SPF 30 (right).

"My lips!" she cried out. "They need to be plumped. When's the next available appointment?"

The Work in Progress

For the past five years, this Upper East Side psychologist has maintained monthly appointments with Brandt. As we awaited the doctor, I sized up her fashion sense, which had Barneys written all over it: dark Marni skirt, black Miu Miu gold-button-studded belt, black Prada heels, and a caramel Bottega Veneta bag.

While her outfit was fab, there was something off about her face. It looked ageless, a tour de force of erasure: no lines, creases, crinkles, folds, discolorations, or hollows—nothing to indicate any lived experience.

This was especially irksome, as I'm pretty good at figuring age. I had to stoop to asking: forties? Fifties?

"Sixty-one," she answered.

My mouth dropped. How could she be a mere four years away from a senior-citizen discount? Was it human growth hormone? Cryogenics? I stood up and walked around, peering out the window over East 34th Street, picking up an *Us Weekly*, all the while trying not to make it obvious that I was angling for a glimpse behind her ears.

"No scars," she said, busting me. "Never had a face-lift. It's all Fred."

"What are we doing?" Brandt asked, popping in on cue and pecking her cheek.

Rummaging in her bag, she pulled out a magnifying mirror and showed him a teensy depression, no bigger than a pencil point, on the side of her face.

She explained that several months ago she brought Brandt a picture of herself in her twenties so he could see her cheeks. They had long ago deflated, and she wanted them back. Little by little, with each visit, he'd been building them up with Perlane.

Was she deranged? What woman in the seventh decade of her life wants to look like a co-ed? Then again, maybe when I'm her age I'll want chipmunk cheeks too. A squirt of Juvéderm did the trick on the microdent. Next, Brandt injected Sculptra into her temples because she didn't like the indentations. He also used a laser to zap a few broken blood vessels around her nose.

"How about some laser toning?" she suggested to him.

"You don't need it. Your tone is so good. You're a vision!"

"I'm a work in progress," she corrected.

"How will you know when to stop?" I asked.

"There is no stopping," she said. "I come to maintain what's been done so I never look bad." I couldn't help but think of a

gerbil—not the gerbil-faced lady but the kind in a pet store that runs on a wheel, round and round, going nowhere but never giving up, not until it drops.

The Chinny-Chin-Chin

Two years ago, when she was only 31, this SoHo-dwelling ballet philanthropist nipped her crow's-feet in the bud and has refused to let up, thanks to Botox injections from Brandt. While some might think her battle against Father Time is a bit premature, and even though statistics indicate that most cosmetic procedures are performed on women over 40, this woman represents his fastest growing market, says Brandt, describing the 30- to 39-year-olds currently flooding his practice.

"Truthfully, you do see the first signs of aging in the midthirties," he says. "People are realizing they don't have to wait until they look really old to do something about it. I've had women in their twenties come in, and we have to send them away. They ask for Botox to prevent wrinkles!" You might not get crow's-feet until you're 60—so why bother starting when you don't even know where the wrinkles will form? It makes more sense, Brandt says, to use sunscreen, good skin care, and other protective measures to keep your skin looking young.

As for the ballet philanthropist, between her platinum pixie haircut, apple cheeks, bright blue eyes—which remain crow's-feetless—and perky 5'4" figure, she could pass for a Junior Miss, were it not for a cruel vestige of her heredity: her double chin. The "fullness," as Brandt tactfully called it, interrupted the ideal profile: a sharp right angle between jaw and neck.

The woman had already made the leap to advanced Botox user, this being the second time that Brandt would be performing his trademark "Botox Neck Lift" on her—a technique he pioneered a decade ago.

"Stick your jaw forward. Now twist it all the way to the left and stay like that," he instructed her, the contortion causing vertical, ropy-looking muscles running below the jaw line to the clavicle, known as the platysma muscles, to tense up and jut out. Brandt grabbed the tissue between thumb and forefinger and pumped it with Botox, a process he repeated on the other side.

Because these muscles function to pull down the lower face, Brandt figured out that immobilizing them with the paralyzing agent would allow the opposing muscles in the lower face (the superficial muscular aponeurotic system, to be exact) to contract, pulling up the corners of the mouth and lifting a droopy jaw, neck, and chin. One might say the Botox Neck Lift is dermatologic

proof of Newton's Third Law of Motion—the bit about every action having an equal and opposite reaction. Practically speaking, Brandt's innovation provided an alternative to, and a way to bide one's time before, going under the knife.

"Doing the double-chin thing with Botox is genius," said the woman. "It totally works. Basically, it makes my profile cleaner."

Boosted by her compliments, Brandt left improvising to the tune of "Bye Bye Blackbird," his voice drifting down the hall: "Pack up all that extra skin/ Let's get rid of that double chin/ Bye bye turkey neck...."

The Penitent Cheater

Nervously jiggling her foot and fiddling with an iPod, the patient, a 44-year-old woman, was reclining in the examining chair, waiting for Brandt to appear.

"Nothing lasts in my lips, maybe because I smoke," she said loudly, oddly eliciting no response from the normally chirpy nurses, who remained suspiciously mum. What had this woman done to become a pariah?

She told me she lived in the Meatpacking District and owned a fashion business. Judging by her look—unbrushed raven hair, oxblood nail polish, no makeup, an ankle-length washed-denim prairie skirt, brown suede boots, a gray hoodie unzipped to reveal three sheer, layered pastel tanks, and a formidable white-diamond Rolex jangling, bracelet-like, around her wrist—I suspected her enterprise involved grunge revivalism, Rodeo Drive-style.

"I know exactly what you mean about your lips," I said. "I have the same problem—but with my entire face. It's overly animated, which means the muscles are constantly contracting, and that causes the fillers and stuff to break down and wear off too soon. Two months after I get my Botox, my forehead looks like it's got guitar strings tattooed across it all over again."

"My problem was I *had* to have the Restylane," she said furtively, cupping her mouth so the nurses couldn't hear her. "It was an emergency."

What kind of an emergency could call for Restylane? I wondered. I brought my face close to hers to express bonding and empathy, an interrogation technique I learned from *Law & Order*.

"I just joined Soho House, and I wanted to look extra good in case I ran into my ex there," she explained. "But I couldn't get in to see Brandt, so I went to my old dermatologist from when I had acne. I let her inject me with Restylane."

So that's why the nurses were dissing her! She was a traitor.

"The other doctor was cheaper," the

patient continued. "She filled in the hollows under my eyes. But it was bumpy and black-and-blue. I had black eyes for three weeks! I couldn't go out in public."

"So what did you do?" I asked.

"I went to India. I was ugly."

Self-exiled to another continent? That was a harsh sentence for a crime that, I'm ashamed to say, I, too, have committed. What to do when the best dermatologists are booked? Or your gynecologist has begun giving Botox injections and offers to no-charge you? Situations come up and shit happens...like you cheat.

Yes, I have dallied, strayed, slutted around from needle to needle, my infidelity always triggered by the first twitch of my frozen brow, that flicker of a nerve alerting me that

as a walking neon sign warning all cosmetic dermatology junkies about what can happen when you wing it with any ol' doctor. She was lucky to have gotten off so easily. Had the procedure been permanent, every day for the rest of her life, whenever she looked at her reflection, she would always have regretted, and could never have forgotten, that she had been unfaithful to her man.

Welcome to Miami

Once one has visited Brandt's office in Miami, it's clear that his New York outpost lives up to the city's reputation as one that never sleeps; fast and intense, the scene seems all work and no play. But in Miami, the staff—the whole environment, really—

there is a female phenotype indigenous to South Beach, the coastal magnet for the surgically svelte and the breast-implanted. She may or may not be of legal drinking age or even the age of sexual consent. Her thirtieth birthday is in any case a good way off.

Observable traits include sun-drenched skin not yet showing the ravages of her reckless UVA exposure; long, loose hair, either stiff with dry saltwater or shiny, supple, and a little bit greasy from the Hawaiian Tropic oil that her beau has massaged into her shoulders; and a figure—from good legs to rounded bottom to narrow waist—sculpted into shape by nightly salsa dancing.

The particular example presenting herself to Brandt was 20, Hispanic, and, had it been up to me, would have been padlocked from the premises. Certain things should be outlawed, like meddling with the appearance of a woman graced with nature's perfection (full-body laser hair removal being the obvious exception).

However, this woman was just like the rest of us: hyper-self-critical and panting to participate in the alluring artificial-beauty movement. Thus, she had cooked up two complaints, the first being her hair, which wasn't as thick as the mop-tops of her closest family. Worse, when she shampooed it, she claimed it fell out so copiously that it clogged up the shower drain.

The other problem was on her hips and upper thighs. Although their contours were lovely, neither excessively voluptuous nor excessively boyish, across the surface of her bronzed skin a small school of silver minnows appeared to be swimming by: stretch marks, the unsightly result of rapid adolescent weight gain, which as a young adult she had now lost. However, their visibility had caused the young woman to sink into a depression for which a psychiatrist had prescribed 30 milligrams of Celexa, an impressive dosage that nevertheless did little for her flatlining serotonin levels. The worst of it was that she felt forever tied to wearing a sarong over her bathing suit in order to keep her stretch marks under wraps.

Brandt was unusually subdued. I wondered whether we were sharing the same thought: Was this patient nitpicking for flaws to gain sympathy and comfort? Her hair looked as good as a Garnier Nutrisse ad. And her stretch marks? Oh, come on.

Then again, maybe Brandt was experiencing a rare feeling of failure. Ninety-nine times out of 100, he can wave his magic wand of needles and work miracles. But here, all he could do was silently run his hands through her dark tresses, pulling out no hanks and clumps but only a few silky threads. Did I detect a whiff of boredom on his part? His sole recommendation to the



Was she deranged? What woman in the seventh decade of her life wants to look like a co-ed?

my face is coming back to life. Like Rush Limbaugh running low on Oxycodone, I waste no time scrolling through my mental Rolodex of beauty docs, shopping for one who hasn't seen me in a while and thus won't turn me away.

Suddenly, Brandt swooped into the room. "Okay, ladies, what did I miss?" he asked.

"I'm telling her The Story," the patient said.

"Oy, what a *shandeh!*" he said, using the Yiddish word for "shame."

This charmer of a patient was the last thing from a victim. She had the chutzpah to return to the dermatologist who had done the botched job. She had admitted the results were less than fabulous and refunded the woman \$1,000 because she said she'd have to go back to Brandt.

The problem was that the doctor injected the Restylane too superficially, leaving palpable lumps, Brandt said. So a week earlier, Brandt had injected the cheater's face with an enzyme called Hyaluronidase, which successfully dissolved the lumps, and now she was back for a Restylane redo. Wearing aqua-colored medical magnifying goggles over his green Miklis, Brandt peered intently through both sets of lenses at the crescent hollows under her eyes.

"Syringe, please," he said, and began methodically reintroducing the filler, inserting the needle under the patient's skin, pushing the plunger ever so slightly, the droplets released making her beautiful again.

"I wish this was permanent," the patient said, sighing, after I gave her the mirror.

Hadn't she learned her lesson? I asked myself in disbelief. This patient should serve

appears to make play out of work.

During the wait to see Brandt, his staff offers clients "antioxidant water booster," a customized green tea served either chilled or hot in flavors such as lemon and pomegranate. All around the office, baskets brim with little black packets for the taking: samples of Brandt's creams, lotions, and gels from his skin-care line. And that's not all: Edible goodies abound, including special low-fat, low-sugar granola squares made by the office skin-care analyst, Germaine Butler, whom Brandt affectionately calls "Lady Germaine."

With 24 rooms in all, the Miami office is nearly four times the size of Brandt's Manhattan outpost; it's an oasis of shiny white surfaces, high-modernist interior design, and splashy contemporary art. There are aestheticians for facials and microdermabrasion; a nurse practitioner who does laser hair and tattoo removal and operates two new devices—the Aluma, a radio-frequency machine that is supposed to quickly and painlessly tighten the skin, and the Isolaz laser, which vacuum-cleans clogged pores; and lastly, Lady Germaine, who—charged with the Visia Complexion Analysis System, which uses computer-generated photographs to measure a patient's facial wrinkles, pore size, skin texture, and sun damage relative to others in her age group—maps out personalized skin-care regimens based on products from Brandt's line.

Barely Legal

Among Brandt's sunshine-state clientele,

ELLE

Drive in Style!

Enter to Win a 2008 Pontiac® Solstice®!

At *Elle*, we value your opinions! That's why we're inviting you to sign-up today at www.elle.com/dreams to participate in our online surveys and for a chance to win big in the *Dream Come True Sweepstakes*. When you enter, you'll be eligible to win one of over 1,000 incredible prizes including:

FIRST PRIZE: Health Club Membership for 1 year – a \$2000 value!

SECOND PRIZE: TiVo® plus Cable Service for 1 year – a \$1000 value!

THIRD PRIZES: Sharper Image® Jiffy Esteam Portable Steamer – a \$100 value! (50 prizes)

FOURTH PRIZES: Helbros Dress Watch – a \$64 value! (1000 prizes)

or the **GRAND PRIZE:** 2008 Pontiac® Solstice® or \$25,000 in cash! No purchase is necessary, but hurry – you need to be entered to win!

For official rules and details, visit:

www.elle.com/dreams



GRAND PRIZE:
2008 Pontiac Solstice
or \$25,000
in Cash!

NO PURCHASE NECESSARY TO ENTER. Sweepstakes begins 10/15/07; ends 1/30/09. Sweepstakes open to legal United States and Canadian residents and to residents of other countries and U.S. territories and possessions only where offered & permitted by law. Void where prohibited by law. For a copy of the official rules, which govern this Sweepstakes, visit www.elle.com/dreams or write to: "Dream Come True Sweepstakes" Official Rules, c/o Ventura Associates Inc. Customer Service, 1040 6th Avenue, New York, NY 10018. Sweepstakes registered by Ventura Associates, Inc., 1040 6th Ave., NY, NY 10018 & may be presented in different creative presentations by different organizations (the "Presenting Promoter(s)").

Pontiac® and Solstice® are registered trademarks of the General Motors Corporation

patient was Biotin, a vitamin supplement for hair loss, and a blood test to rule out thyroid problems (the result: negative).

a year to see results. And while you're using it, you can't go in the sun. It makes your skin more sensitive to sun damage."

Just before my thirty-sixth birthday, I got an eyelift, paid for by Mom.

As for the minnows in her skin, the only way to beat them back would be the old-school way: a prescription for Renova, a Vitamin A compound cream to increase collagen and improve skin texture.

"No lasers?" the patient asked, sounding completely crestfallen.

"They won't work on dark skin," Brandt said sorrowfully.

"What about those miso injections that I keep hearing about?"

"Mesotherapy? It's supposed to treat cellulite, but there aren't any clinical studies to prove its efficacy, so I'm not behind it. I'm sorry," he added, the weight of an anticlimactic appointment pressing down on everyone in the room. "But the Renova will help," Brandt said, brightening up. "It'll take anywhere from three months to

"But I go to the beach every day," she said, her eyes now welling up. "That's my life. That's why I came here. So you could get rid of my stretch marks and I could finally look good in a bikini."

As if she didn't already.

Mother Botox

"My favorite is when you do my ears," the 59-year-old patient said, blissfully relaxing in the examining chair, her silver Tory Burch sandals gleaming.

"They're nice and chubby now," Brandt reassured the woman, injecting Restylane into her earlobes, which, after a lifetime of heavy, dangly earrings, had become as flaccid as an elephant's.

"That's the only place I like chubby," she said.

Her daughter, 34, laughed. She had accompanied her mother on the three-hour drive from their Fort Myers home. The mother had been a patient of Brandt's for the past four years, but today would mark her daughter's entrée to his Neverland of needles.

"She's the virgin one who's never been done," the mother said, thumbing at her daughter. Though she was still baby-faced and could easily wait another five years, it was wise of her mother to encourage an early start. That way, they could shore up the memories of who had which injections and pick apart the pupu platter of rejuvenating possibilities—the kind of girl talk that makes an al fresco lunch at the Lincoln Road Mall taste even better.

My mother had been good to me that way. Just before my thirty-sixth birthday, I got an eyelift by plastic surgeon David Hidalgo, paid for by Mom. In fact, she practically gave me the leg up onto the operating table, insisting I tough it out and go ahead with dermabrasion, a procedure to sand off of the feathery lipstick lines around my mouth, which Hidalgo had recommended. I was scared because my mother had had it done during one of her face-lifts, and I had watched how agonizing and disgusting

(CONTINUED ON page 360)

THE OTHER SIDE OF THE MIRROR

CONTINUED FROM page 283

the oozing and crusting of the recovery had been for her. But still, she said I'd regret it if I didn't do it. The lines would only worsen. I wouldn't want to go back for another surgery. So, before going under anesthesia, I abided the echo of her last words: "Get it over with, Daughter!"

"There must be drugs in the cookies," Brandt's chubby-lobed patient said. "I keep coming back here. You just want more."

But there was little else Brandt could do, since her previous visit only a few months earlier had involved a major renovation, from scalp to neckline, requiring so many syringes that the total cost could have bought a car, she said (well, maybe just a used one). And judging by her face, which looked round, smooth, and 10 years younger than her age, she'd gotten her money's worth.

"Look again!" she insisted. "Should I add more to my lips?"

"No!" Brandt, the daughter, and I cried out in unison.

"Can you lift up my brow?" the mother asked.

"I've already done that," Brandt said.

"Shoot me some more," she begged. "How could you be finished so soon?"

Brandt didn't answer. Defeated, the mother offered up her daughter.

The fact that the mother had confessed to jonesing for still more sticks made me question her motives. Perhaps they were less pure than I had thought. Maybe the psychodynamic I was witnessing was that of a mother looking for a Dina Lohan-like vicarious thrill.

"Show him the crease," the mother said.

The daughter pointed to a small horizontal line under her left eye.

"It's a sleep line," was Brandt's diagnosis. "Botox won't work. If you fill in a fine line with collagen, it'll only last a few months. It's not worth it."

"How about her bunny lines?" the mother pressed on. She was pushing hard now, referring to the barely visible diagonal wrinkles at the top of her daughter's nose that came from squinting in the sun.

"No one sees them but you," Brandt says.

"She definitely needs her 11s injected," the mother said stiffly.

Brandt took a look at the daughter's "11s," the two parallel lines between her eyebrows that came from frowning.

"Those I can inject," he conceded.

With that, the mother catapulted herself from the examining chair, grabbed two fistfuls of gauze pads from the counter, and, waving them like a pair of pom poms, cheered, "B-O-T-O-X! Go, Botox! Go!"

The Primal Scene

Being a terminal narcissist, I could only remain behind the mirror for so long. After a whole morning of watching Brandt's Manhattan patients getting poked and plumped, stuck and smoothed, I was wracked with envy. So, during my lunch, I raced upstairs to dermatologist Roy Geronemus (he's in the same building as Brandt) and had him laser away all the broken capillaries on my face. Brandt was too booked to zap me—besides, I was supposed to be "working for" him! It just wouldn't have been professional. Still, I just had to get in on

all the action I was witnessing.

Then, at Brandt's Miami office, I greedily accepted Lady Germaine's offer to analyze my complexion. The results confirmed that my face was almost wrinkle-free (the needles, the lasers, the peels, the creams—all working! Yippee!), but the UV damage beneath the surface (otherwise known as the biological half-life of adolescent sunbathing with an aluminum-wrapped album cover during the '70s) was so severe that I wanted to check myself into a crypt. Permanently.

The Visia results left me with no choice: On my way home, the minute the airplane began its descent into LaGuardia I flipped open my cell phone, shrugging off a flight attendant who furiously tapped at my shoulder, insisting that I was interfering with the navigation system. How could that matter, now that I knew of the latent wrinkling I was facing?

Because Brandt wasn't due in town for another two weeks—a duration seemingly so interminable that the mere thought of it caused me to hyperventilate in a brown paper lunch bag—I once again yielded to my inner Hester Prynne and made an appointment with another dermatologist, my longtime friend David Colbert, MD. The time had come for Fraxel laser treatments, the last hope for the hopelessly sun-damaged, or so I've been told—and, more importantly, want to believe.

Because really, to believe, no matter how blindly, is the fundamental trait of the cosmetic dermatology client: She believes that looking younger will make her feel better about herself; that her boosted self-confidence, plus the luster of her cosmeceutically infused skin, will sustain her sexual desirability; that lip plumpers aren't just an antidote to shriveling up in old age but an affirmation of life and a subconscious (okay, maybe not so sub) denial of death, especially when a bright lipstick is applied.

Of course, the "she" I'm speaking of is me. But when I held up the looking glass to the women in Dr. Brandt's office, their reflections (no matter the postprocedural bleeding, bruising, and swelling) bore an unmistakably beatific expression.

That said, I've got to tell you a truth you might not want to hear: All this talk about "maintenance" is pure dissimulation. Honestly, I have never reached a point where my pursuit of being bright-eyed and pink-cheeked has leveled off. No matter what I do to myself, or how much I have done, the five or 10 years that a dermatologist initially succeeds in sloughing off will come back in proportion to my increasing age. The climb just keeps getting steeper, the comeliness harder to reach.

But what's the alternative? To pull a Greta Garbo, becoming a recluse at 36, leaving the world an illusion of eternal pulchritude but never getting out of your pj's? Better to coat all the mirrors in the house with Vaseline and cover the lightbulbs, Blanche DuBois-style, with paper lanterns (pink ones are the most flattering, should you need to know).

I refuse to buy into growing old gracefully, whether in hiding or in plain sight. My mother is my inspiration: At 71, she has pledged to stick with Brandt until the day she needs a walker and is too frail to maneuver it through his office door. As her daughter, I am adding a codicil to my living will: Skip the DNR and send me out, instead, on a final Botox Bender. ●

ARMY BRAT

CONTINUED FROM page 311

decorated general arrives for a visit and many, many boots suddenly go thumping in his direction, she rolls her eyes at this "rock-star-itis." More often, though, McFate sincerely tells me how much she respects the politeness and competency service breeds. "These guys are so dedicated, so smart, and they try so hard. They're Americans, you know? To be an American is to believe in some fairly simple yet difficult-to-attain virtues: freedom, fairness, patriotism, rendering assistance when it's required. You may think they're deluded, but more than anything, these guys want to win, and they know you're not going to win with a bullet—you're going to win with a kiss. They're trying so hard to learn a new way to fight in the middle of a war."

These days, nothing provokes McFate's own pugnaciousness like anthropologists who think her angel-on-the-shoulder, "win with a kiss" rhetoric is nonsense—and that cozying up with the military is her own weird way of working out issues with her bohemian upbringing. "I've been accused of prostituting the science. I've been accused of being in this for the money. I've been accused of being unethical. I've been accused of being stupid. I've been accused of being fat—all kinds of things," McFate says, her normally low-key patter sharpening. It's true that these charges have all been made on Savage Minds and other blogs where anthropologists go to blow steam—with, yes, sometimes surprising savagery—and that the American Anthropological Association has issued a statement disapproving of the Human Terrain Teams (HTT).

But it's also true that McFate has a knack for inflaming the debate she sits atop, giving as good as she gets. With bile that Rush Limbaugh would admire, she charges that these "Ivory Tower academics" are unduly "concerned with keeping their hands clean," that they're just trying to claim "a political and moral higher ground." Defending her choice to work with armed forces to *The Wall Street Journal* last summer, she suggested that her brand of in-the-system activism was better than "waving a big sign outside the Pentagon saying 'You suck.'" At the anthropological group's 2006 meeting, after George Mason University professor Hugh Gusterson disparaged McFate in a talk, she reportedly approached him and whispered in his ear, "Hugh, I know why you're so cruel to me. It's because you want me." (Though this story has "spread like wildfire in the community," one anthropologist told me, McFate insists she merely said, "You must have a crush on me, Hugh, if you're this mean to me.")

Anthropology, as McFate well knows, is a discipline struggling with its own identity. As funding for long-term study of indigenous cultures dwindles, anthropologists are increasingly taking their research skills to corporations, foundations, and government, where they're largely free (unlike doctors and lawyers, who need licenses to ply their trades) to operate by whatever ethical codes they choose. Even academic anthropologists realize that in this Internet age there's something poignantly antique about their desire to control how their scholarship is applied. So it's tempting to write off their objections as the embittered gnashing of "a moribund discipline" that, in fact, has a long history of engagement with the military, as McFate says. (Anthropology's embarrassing nickname—"the handmaiden of colonialism"—springs from the British

government's practice, starting in the early twentieth century, of using ethnographic research to stabilize occupied African colonies.) One irate anthropologist floats the perfectly unprovable theory that the Pentagon positions McFate as a bad girl to give that square (okay, pentagonal) institution fresh street cred to counter acute war fatigue. Others tell me, with audible sniffs, that anthropologists who join human terrain teams aren't smart enough to hack it in academia, or they're just doing it for money (which at \$100,000 a year is quite good, especially compared with the measly sums beginning professors command).

Yet some concerns anthropologists raise about McFate—about the risks her program poses for civilians in war zones and for the field's reputation as a whole—do give one pause. Catherine Lutz, a Brown University anthropology professor who helped start a petition against projects like McFate's, says it's "very seductive" to want to serve the humanitarian aspects of counterinsurgency: to listen to the Iraqis' hearts and minds, to help armed forces deliver school supplies and vaccinations. But those who buy that by bringing scholars into the war we're somehow "fighting smarter" are "extremely nearsighted," she says. That's because, in her opinion, the Bush administration's real reason for invading Iraq was to secure long-term access to the country's oil; the professed interest in exploring the souls of the people is just a "PR line" to pretty up the picture for an enduring occupation, she says. "There is no evidence [the human terrain program] does anything but prolong the war, and to the extent that it prolongs the war even a day, it creates more deaths."

Another petition author, David Price, an associate professor of anthropology at Saint Martin's University in Washington, has written extensively about the history of anthropologists' engagement with the military, for better and worse. He tells me that HTT members wearing uniforms—and carrying guns if they choose—inevitably create a coercive dynamic in which ordinary Iraqis and Afghans will feel pressured to speak. Anthropologists also know from previous experience that cultural knowledge is not always used benignly in battle, most egregiously during the Vietnam War, when U.S. Special Forces employed social science research to identify and assassinate suspected Viet Cong sympathizers. Fast-forward 46 years, and Price says that while HTTs are supposedly all about the "soft," nation-building aspects of counterinsurgency, there is always the danger that their information can cross over to the "hard" side of the effort. To wit, anthropologists could end up helping the military figure out who's against us—at worst, help soldiers "delin-eate who should be a target."

When I meet with McFate in DC in early December, she's just back from South Africa, where Sean was delivering a paper at a security conference, and she's still jet-lagged. She takes me to a restaurant near her apartment in Adams Morgan where transvestites suddenly bust out of the back room for a long, loud floor show. She forgot all about this Sunday brunch spectacular, she says with a Cheshire smile. Could she have chosen this discombobulating spot because I told her up front that I had some tough questions? Nah, not Mitzy.

Back at her apartment—a series of elegant rooms decorated with antiques; Persian and

Afghan rugs; and a select few artifacts from her past, including a gorgeous, glowing red glass ship's lamp from the boat on which she grew up—we finally begin. McFate tells me the decision to put scholars in uniform was made out of concern for their safety. (Since Western civilians have become high-value targets for insurgents, the uniforms are "discouragement to the sniper.") Sure, she shrugs, the military garb might compel people to speak to her teams, but she insists that by this time Iraqis and Afghans are so accustomed to the military that they can distinguish who wants to sit and chat from who has deadlier business in mind.

Maybe so. As for the risk that the academics might actually get ordinary people killed, McFate denied "vehemently" to *The New York Times* that her teams contribute to intelligence-gathering—tagging insurgents for elimination, that is. She has also told me repeatedly that one U.S. commander in Afghanistan says the HTT embedded in his unit last spring (there are now nine in Iraq and two in Afghanistan) helped reduce combat operations by 60 percent, with military and civilian deaths dropping correspondingly. To me, however, she admits that control is not perfect. Yes, the data her teams collect go "into the intelligence lane, the logistics lane," she says, with rising irritation, but that's better than the alternative. "If you're sitting in your little office, at your little university, what opportunity do you have to influence how the brigade does business? Absolutely none!... Not that I'm advocating taking over countries, but that's the situation we find ourselves in now, and to pretend otherwise is to hide your head under a blanket and say, 'Naanananana.'"

If an anthropologist discovers that someone is, say, working with the Taliban planting roadside bombs, he or she will work with soldiers to see if the insurgent can be persuaded to come over to the other side: "Why is this person a member of the Taliban? Are they ideologically committed?" McFate says, ticking off the kinds of questions her people will explore. "Are they doing it because their family is threatened? Do they need the money?" Commanders are increasingly willing to consider options other than elimination because they now appreciate that when the military offs one guy, it's likely to trigger a chain of killings—on both sides.

As we run through the battery of charges leveled at her (Price, for instance, has accused McFate of plagiarizing portions of her chapter in the counterinsurgency manual; but she included footnotes—it was her editors who decided to cut them), McFate sinks down in her seat. "I'm tired of it. I'm trying to be honest, and I'm trying to be fair. But it's very alarming to suddenly find you're a public figure, and people expect you should do this and that," she says, looking genuinely whupped. After McFate says she's finished for the day, I speak with Sean, who's taking a break from writing in his office. A brawny, thoughtful guy, he takes up where his wife left off. The anthropologists' uproar over the HTTs is "a proxy for their antiwar sentiments," he says, "which, ironically, [Mitzy and I] share."

The real issue is that for all her subtlety of mind, McFate can't seem to grasp that *anybody* could fail to see the wisdom of embedding scholars with soldiers. If her at times bitter incredulosity toward her opponents weren't so deeply felt, it might, in fact, seem disingenuous. "In Washington," says Jacki Lyden, "for every position, there's an opposite. One has to hold back a

little of oneself. It's that old saw: 'If you can't take the heat, don't stand in the kitchen.'"

The next morning, I meet McFate for coffee at Starbucks and—perhaps after a good night's sleep—she seems less defensive and more reflective. When I ask what really explains her military calling, she pauses. "I guess in some ways it was my father's having lost his mind after the Korean War," she says, for the first time seeming willing to earnestly grapple with her family's legacy. His death, she says, prodded her to want to reduce "the deep personal consequences" for "individuals in extreme situations that involve violence." Marrying a soldier was another push factor, she says. "In the best relationships, you incorporate the experiences of people you love."

McFate also says something that may explain why she's so quick to draw bright lines around who's with her and who's against her. "My father died when I was very young. My mom was an iconoclastic artist," she says. There is pride in her voice when she talks of the person her mother was, yet "she was disengaged," McFate says, undoubtedly putting it kindly. And so, she continues, "I think it's very important that the people you love stand with you rather than outside. What really matters is that the people you respect and love respect and admire you—that matters much more than public approbation."

McFate tells me her greatest hope for teaching soldiers to study culture now is that one day, when they're military leaders—and, who knows, maybe even defense secretaries—they'll "fully comprehend" the costs of going to war before they plunge in. "If they don't, that's a failure of the American political and executive system," she says, though she cops to the "sad fact" that we often haven't learned from history: "These mistakes have been made by the U.S. again and again and again."

Whether the Human Terrain System will succeed in the near term depends on many things—including Americans' will for committing troops to the painstaking work of counterinsurgency (lo so many years after "Mission Accomplished"), as well as how closely our leaders decide to heed the message of people who, in Iraq at least, are telling pollsters they want us out. Skeptics in the DoD also need to continue to be convinced that the "culture and nuance" corps is worth its price (to date, it has cost American taxpayers close to \$60 million), and, of course, McFate will need to keep drawing on her diplomatic skills, not to mention her charm. Because if any anthro-embeds come forth to describe moral dilemmas they couldn't stomach, you can bet her opponents will spread the bad news far and wide.

Part of me wishes I could come at this thorny debate from the side, tackle it, and take it apart to clarify absolutely where the clearest voices of conscience lie. But I can't, and I'm not sure anybody can just yet. As Jay Cohen notes, "Montgomery at this point in her life is an applied pragmatist, as opposed to a theoretical idealist. There is no right or wrong. These are shades of gray, and there are roles for all these different attitudes."

What does seem indisputable, however, is that the passions underlying McFate's, her allies', and her opponents' arguments all stem from essentially the same place: a deep, collective well of shame over the havoc we wreaked going to war as hubristically unprepared as we were. Since then, many of us have been too complacent, confused, or frightened to voice our