

Facial Plastic Surgery *Requires Constant Training*

Dr. Cynthia Gregg, a pre-eminent facial plastic surgeon in Cary, spends many of her waking hours in the pursuit of perfection.

“A physician I worked with in my early years of training told me ‘You always have to keep getting better; to continue to evolve.’ He taught me that the smartest person in the room is not the physician who believes he or she knows everything, but rather the physician who could answer a patient’s question by saying, ‘You know, I’m not totally sure about that, but I will find out for you.’”

That early advice continues to guide Dr. Gregg who is most often described by her patients—male and female alike—as a kind, thoughtful, and highly skilled plastic surgeon. Her ongoing interest in continuing education and her open-minded approach to her work creates a model of person-centered care not only for her patients’ aesthetic concerns, but their overall health, as well.

“To always be getting better in what you do is a challenging aspiration,” she acknowledges. “Things change quickly in this profession. This specialty is now different from when I originally trained. And it’s actually the patients themselves who most often make it possible to keep up.

“For example, I recently had a patient

with celiac disease,” she notes. “She needed the prescription I was writing to be gluten-free. Never before had such a thing occurred to me. I spent my lunch hour that day researching gluten-free prescriptions so I could meet this specific need. And now I know,” she smiles. “If this topic comes up again, now I have current knowledge on the subject. That’s how it works for me, every day.”

CONTINUING EDUCATION

Spending her lunch break researching a topic is not an uncommon practice for Dr. Gregg. In fact, it is what occupies much of her ‘free’ time on a regular basis. “As a physician I am required to obtain 150 hours of continuing medical education every three years—CMEs. This can be in the form of conferences, reading specific types of journal articles, or on-line tests through credentialed organizations. I may spend a Sunday afternoon on my back deck reading five journal articles to make sure I’m keeping up with current research. And that’s important; staying on top of it all would be too much to absorb if I didn’t have a passion for what I do.

“Then, every year I attend one, two, and sometimes three meetings on all sorts of topics, and in doing so get exposed to

CONTINUING NEED FOR TRAINING: FOR THE WHOLE TEAM

A “patient” volunteer, seated, elicits comments from Dr. Gregg and her aesthetics team, from left to right, Nena Clark-Christoff, RN, CANS (Certified Aesthetic Nurse Specialist); Andrea Crane, RN, CANS; Dr. Gregg, and Jennifer Quigley, Licensed Medical Aesthetician.



Dr. Gregg points out that she and all members of her staff, without exception, are constantly engaged in training activities to support and extend their skills.

“That applies,” she says, “to my nurse injectors, for example. Only doctors, nurses, or physician assistants can inject Botox and a variety of fillers in the state of North Carolina. Injectors are encouraged to attain additional certification as aesthetic nurse specialists—CANS. This was a very big deal when our two nurse injectors were among the first six in North Carolina to earn this certification.

“The requirement for certification also holds for aestheticians. There is a licensing board for this specialty, just as there is for nurses. All of these specialists have continuing medical education requirements that must be attained and maintained. It is part of our staff policy that we encourage continuing education across the board. That includes, for example, special training for our practice administrator in Florida on an advanced medical records software system. A passion to learn is a common characteristic of all members of our staff.”



Polly Addison, before (above) and after (below) endoscopic brow-lift surgery.



“In the world of facial plastic surgery . . . *endoscopic surgery* is one of the *biggest game changers* of all.”

the most up-to-date resources, data, and technology in the particular area of the conference.

“What I really take the most from, however,” she notes, “is not simply the presentations, but the opportunity to interact with peers from all over the country. It’s an opportunity to discuss what we are doing that’s new, which things are working well that I may not have tried, and in many instances to expand the opportunity for interdisciplinary approaches.”

MEDICINE: THE ART AND THE SCIENCE

Among the many changes in the world of facial plastic surgery, Dr. Gregg says, the development of endoscopic surgery is one of the biggest game changers of all. And Polly Addison, a 60-year-old professional woman with drooping eyelids, can attest to Dr. Gregg’s skill in using this latest advanced technology (*see photos*).

“My eyes have always been my best feature. They are a brilliant hazel,” says Ms. Addison. “But the skin above my eyes was sagging, creating a tired, sagging look. Additionally, my make-up started smearing as the result of the drooping skin, something I found to be very distressing. A co-worker referred me to Dr. Gregg, and I went in for an evaluation. I was particularly impressed with the mission work she does. She gives of herself to help others. She felt like a person I could trust.

“I thought I wanted and needed eyelid surgery—but Dr. Gregg explained that it was actually my brow that had fallen and was pushing my upper lids down over my eyes.”

Ms. Addison’s issue is a common one, and, says Dr. Gregg, “what she really needed was a brow lift. When I was trained in brow

lifts, there were four options in terms of where an incision could be made: right above the brow; in the mid forehead; in the hairline; or a large incision from the top of one ear to the other called a coronal brow lift. There is nothing wrong with these approaches and many surgeons still use them, however they do result in sizable scars in most cases.

“However, endoscopic surgery—a technique I could never have fathomed when I was in medical school—allows me to make four tiny incisions in discrete locations and basically perform the procedure under the skin with the use of tiny scopes and robot-like tools. The procedure is far less invasive, the result is a more natural look, and the healing time is much shorter.”

Ms. Addison describes the result of this surgery as “stunning. I would do it again in a heartbeat,” she says. “After about six weeks of recovery, I feel confident not only in my appearance again, but in my job. I feel like people are once again listening to me when I speak. It’s sad, but the truth is we live in an ageist society, and while I still feel 20 inside, I looked past my prime. Now I feel I’ve regained some sort of relevance, in terms of how I look and, consequently, how I feel in terms of self-confidence. I’m delighted with this new look. I would never go back.”

For more information about the practice, contact:

CYNTHIA GREGG, MD, FACS
Cynthia Gregg, MD
3550 NW Cary Parkway
Suite 100
Cary, NC 27513
Telephone: (919) 297-0097
www.cynthiagreggmd.com