

Austria	€	7
Belgium	€	7
Denmark	DKK	53
Finland	€	7
France	€	7
Germany	€	6
Ireland	€	7
Italy	€	7
Japan	¥	950
Netherlands	€	7
Norway	NOK	54
Portugal	€	7
Spain	€	7
Sweden	SEK	67
Switzerland	CHF	10.50
United Kingdom	£	4.50
USA and others	\$	8

Special reprint for
Dr. Michael A. Kremer

European Business Report

Autumn 2003

Volume XII 30

Where
the
j **o** bs
are going and why



A passion for perfection

Of all the qualities that distinguish Dr. Michael A. Kremer, the one that stands out the most is his aim to excel in every thing he does. As a medical student, this quality set him apart, and now as an aesthetic plastic surgeon, it has become his crowning glory.

Trained and board-certified as a plastic surgeon, he is one of the handful of internationally qualified craniofacial specialists in Germany. Craniofacial surgery is a highly sophisticated branch of plastic surgery which encompasses the reconstruction of various deformities that affect the shape of the skull and face. The most common of such defects are clefts of the lip and palate, and the majority of cases require extensive reworking of the facial bones. Such clefting also involves deformities of the nose and jaws.

To get an idea of what craniofacial surgery is, one must understand the complexity of procedures that craniofacial surgeons perform. For instance in a condition called hypertelorism, the patient's eyes are too far apart. In many cases the nose is also deformed. The craniofacial surgeon dissects the facial bones and repositions the segments of the eye sockets, the facial soft tissues and skin to impart an appearance which is aesthetically as normal as possible. One needs to keep in mind that, because the face is such a complex three-dimensional structure of bones, soft tissues, blood vessels and nerves, even the slightest error can cause major problems. Another condition, called encephalocele, is characterised by the brain herniating through the forehead or the mid-face portion of the skull. This condition is often accompanied by additional deformities of the skull and face. Corrective procedures entail repair of bone defects and

"My objective is that when a person returns home from surgery, his or her friends do not say: 'Oh so you had a facelift!', instead, their comments are more like, 'Oh, you're looking good! What have you been doing!'"
—Michael A. Kremer

extensive reconstruction of the soft tissues. In each case, aesthetics are as important as the reconstructive component.

"Each year millions of children are born all over the world with birth defects affecting the head and the face." Explains Dr. Kremer, and further adds: "before the development of craniofacial techniques, many of them either died due to functional defects, growth-defect induced brain abnormalities or suffered from their appearance for the rest of their lives. Having conducted over 1,200 operations during my intense training in the United States, the experience I have gathered in craniofacial surgery has enabled me to think across inter-disciplinary lines and perform complex aesthetic plastic surgery procedures, particularly in the area of facelifts, rhinoplasty and facial contouring with or without implants."

In addition to rhinoplasty, facial contouring, rejuvenation of eyelids

(blepharoplasty) and facelifts, the procedures most commonly performed by Dr. Kremer include breast enhancement and breast lifting, especially for women after childbirth or weight loss; breast reduction for both women and men; body contouring, which does not just mean liposuction and tummy tucks but also surgery to tighten arms, legs and buttocks. In addition, his cosmetic skin-care services include natural salt micropeeling (Salt-A-Peel™) for removing blemishes and improving the texture of the facial skin; autologous fat transfer (Lipostucture™) for restoring facial soft-tissue volume and suppressing fine facial wrinkles, among other cosmetic surgery procedures.

Says Kremer: "As an aesthetic plastic surgeon I dislike blemishes, scars and surface flaws, therefore in all aesthetic surgery procedures, I place the incisions in areas where they later hide well, and try to minimise scar formation from the very beginning by meticulous, atraumatic tissue handling with delicate instruments and the use of fine suture

"The art of good aesthetic surgery is natural-looking results."

—Alexandra Kremer



A recipient of the coveted Hanns-Seidel-Foundation scholarship, Dr. Michael A. Kremer graduated with distinction from the Technical University of Munich Medical School. As early as his time in medical school, he enrolled in several preceptor programmes at renowned plastic surgery units in the United States, Sweden and Brazil and passed the US National Board Examinations (ECFMG) as well as the US Federal Licensure Examination (FLEX). He completed his clinical training in plastic surgery at the prestigious University of Hannover Medical School (MHH) in Germany where he received board certification. There he also served as the chief research resident in the experimental laboratory and as a lecturer and tutor at Hannover Medical School as well as at the School of Nursing. Subsequently he was awarded a fellowship at the International Craniofacial Institute at Medical City Dallas Hospital in Dallas, Texas: one of the three training programmes in the United States accredited by the Accreditation Council on Graduate Medical Education (ACGME). The institute, founded and directed by Dr. Kenneth E. Salyer, M.D., is considered to be one of the premier craniofacial surgery units world-wide, with Dr. Salyer being the current president of the International Society of Craniofacial Surgeons (ISCSF). Dr. Kremer spent two years in Dallas where he received extensive training in cran-

iofacial surgery, cosmetic surgery and paediatric plastic surgery. He then returned to his hometown of Munich and founded his own clinic. What is also interesting is that Dr Kremer did not go to America on a simple work visa, but on the prestigious O-1 visa. The American government grants the O-1 visa only to those foreign nationals who have risen to the very top in their field. To this end they need to demonstrate national or international acclaim and have to provide documentary evidence to substantiate that they are of extraordinary ability. Only the most exacting standards apply.

The International Craniofacial Institute's petition for Dr. Kremer stated that he had made invaluable contributions to the treatment of those born with congenital and/or acquired cranio-maxillofacial deformities. He had made significant and original contributions in the treatment of those children afflicted with deformities through his research on a novel distraction device which can be used in bone lengthening, a surgical technique for bridging bone defects and lengthening congenitally short bones. Furthermore, he was also selected due to his extraordinary scientific research in tissue engineering of artificial skin. His scientific research has been published in several national and international peer-reviewed journals.

material. For instance, in breast augmentation surgery, depending on the requirements of the patient, I use different procedures, such as peri-areolar where the incision is made around the nipple; or the transaxillary technique, where a small incision is made under the armpit. The incision is hidden inconspicuously in the folds of the skin and after healing is barely visible. Similarly, in procedures such as body contouring and liposuction, which I see more as liposculpturing, it is not just a matter of removing the fat, but also of visualising and understanding how to create the three dimensional contours so that the body curves look natural and proportional. Indeed, my extensive experience in craniofacial surgery has enabled me to perform many of the procedures, especially in facial surgery, with precision, safety and three-dimensional thinking.

For example, I prefer to perform closed rhinoplasty so that there are no visible scars. The only reason, if at all, to do an open rhinoplasty would be if the nose has been badly damaged through previous surgeries. In contrast, many of the so called 'aesthetic medicine' practitioners who are not board-certified, or are self-appointed 'cosmetic surgeons' with a poor training background, go for the simplest procedure and are incapable of understanding the long term effects of what they do. To give you an example, I quite frequently see patients in my practice suffering from an abnormal state or condition (iatrogenic deformities), due to incorrectly or inadvertently performed procedures. For example, because of incorrect rhinoplasty, some have problems such as trouble in breathing. Similarly, people suffer from poorly performed liposuction, facelift surgery or breast augmentation. Unfortunately the incidence of such complications seems to be on the rise, particularly as many of the aesthetic surgery procedures are being performed by those who do not have the right qualifications and experience."

He further explains, "Although artists such as da Vinci and Dürer have

defined beauty and symmetry in mathematical terms, there is no standard formula or set of rules to determine which procedures to combine to get a particular result or make a person look more attractive. As each face and body is different, each patient could require different types, forms and combinations of procedures to achieve a given result. When I look at a face for instance, I always see it as a three-dimensional work of art. It is not just the profile or the frontal view that has to be considered, it is always the complete look, from every angle, that is important. Sometimes the cheekbones or chin needs to be augmented, in other cases it could be that the nose needs reduction, or augmentation. The same is true for facelifts. There are so many different procedures, ranging from SMAS and extended SMAS to those which combine an S-lift with a non-invasive, endoscopic forehead lift and eye-lid surgery, that I could explain them to you for hours. For me it is always a matter of achieving the right balance and maximising the benefit for the patient. For instance, with a facelift we do not try to change people's faces. What we do is try to restore vitality that has been lost to time. In other words, make people look younger, not different; rejuvenate a face, not change it. Obviously nobody can set back the clock, but we can remove the bags, the flabbiness and the tired look, so that the face has a youthful appearance once again. My objective is that when a person returns home from surgery, his or her friends do not say: 'Oh so you had a facelift!', instead, their comments are more like, 'Oh, you're looking good! What have you been doing!'"

"This is the art of aesthetic plastic surgery and what differentiates excellent, natural looking results from those that are simply satisfactory," adds Alexandra Kremer, Dr. Kremer's wife and office manager.

Be it facial surgery, liposuction or breast enhancement, Dr. Kremer is at the forefront of developments, expanding upon new concepts and skills. His international experience and training have provided him with in-depth exposure to multiple subspecialties. It is not surprising therefore that he is emerging as one of the most sought-after aesthetic plastic surgeons in Southern Germany. ■

Contact:

Maximilianstr. 35, 89539 Munich, Germany
Telephone: + 49 (0) 89/24211081, Internet: www.cosmetic-aesthetic.com