Selfies—Living in the Era of Filtered Photographs

We live in an era of edited selfies and ever-evolving standards of beauty. The advent and popularity of image-based social media have put Photoshop and filters in everyone's arsenal. A few swipes on Snapchat can give your selfie a crown of flowers or puppy ears. A little adjusting on Facetune can smoothen out skin, and make teeth look whiter and eyes and lips bigger. A quick share on Instagram, and the likes and comments start rolling in. These filters and edits have become the norm, altering people's perception of beauty worldwide.

Earlier, photo-editing technology was widely available only for celebrities. Models and actors were made to look perfect in magazines and ads, but the general public did not have easy access to methods to alter their own appearance. They instead were left to idolize the standard of beauty present in the media, although most were aware of the editing and alterations that went into making celebrities look flawless. Today, with apps like Snapchat and Facetune, that same level of perfection is accessible to everyone. Now, it is not just celebrities propagating beauty standards: it is a classmate, a coworker, or a friend. The pervasiveness of these filtered images can take a toll on one’s self esteem, make one feel inadequate for not looking a certain way in the real world, and may even act as a trigger and lead to body dysmorphic disorder (BDD).

Body dysmorphic disorder is an excessive preoccupation with a perceived flaw in appearance, classified on the obsessive-compulsive spectrum. The disorder is more than an insecurity or a lack of confidence. Those with BDD often go to great lengths to hide their imperfections, engage in repetitive behaviors like skin picking or grooming, and may visit dermatologists or plastic surgeons frequently, hoping to change their appearance. A recent study analyzed the effect of edited selfies on body dissatisfaction among adolescent girls and found that those who manipulated their photos more reported a higher level of concern with their bodies and an overestimation of body shape and weight. The study also suggested that those with a dysmorphic body image may seek out social media as a means of validating their attractiveness. Finally, those with a higher level of engagement on social media—including those actively trying to present a specific image of oneself or analyzing and commenting on other’s photos—may have a higher level of body dissatisfaction.

The desire for cosmetic surgery is an important component of BDD. It is known that the angle and close distance at which selfies are taken may distort facial dimensions and lead to dissatisfaction. Patients may seek surgery hoping to look better in selfies and social media. Plastic surgeons first identified this trend in the 2017 Annual American Academy of Facial Plastic and Reconstructive Surgery (AAFPRS) survey. Current data show that 55% of surgeons report seeing patients who request surgery to improve their appearance in selfies, up from 42% in 2015. The survey also noted an increase in the number of patients sharing their surgical process and results on social media. In addition, excessive scrutiny of selfies is also changing the presenting concerns of patients. Prior to the popularity of selfies, the most common complaint from those seeking rhinoplasty was the hump of the dorsum of the nose. Today, nasal and facial asymmetry is the more common presenting concern. Along with rhinoplasties, hair transplants and eyelid surgical procedures are also popular requests to improve selfie appearance.

Previously, patients would bring images of celebrities to their consultations to emulate their attractive features. A new phenomenon, dubbed “Snapchat dysmorphia,” has patients seeking out cosmetic surgery to look like filtered versions of themselves instead, with fuller lips, bigger eyes, or a thinner nose. This is an alarming trend because those filtered selfies often present an unattainable look and are blurring the line of reality and fantasy for these patients.

In such cases, the choice of action is not surgery, which will not improve or may even worsen underlying BDD if present. The typical treatment consists of psychological interventions, such as cognitive behavioral therapy, as well as medications, such as selective serotonin reuptake inhibitors, often in combination. Management of the disorder should also include an empathetic and nonjudgmental approach by the clinician.

Overall, social media apps, such as Snapchat and Facetune, are providing a new reality of beauty for today’s society. These apps allow one to alter his or her appearance in an instant and conform to an unrealistic and often unattainable standard of beauty. While filters that add flowers or animal ears to a photograph are clearly an embellishment, other edits may be subtler and instead promote a pressure to look a certain way. It can be argued that these apps are making us lose touch with reality because we expect to look perfectly primped and filtered in real life as well. Filtered selfies especially can have harmful effects on adolescents or those with BDD because these groups may more severely internalize this beauty standard. It is important for clinicians to understand the implications of social media on body image and self-esteem to better treat and counsel their patients.
REFERENCES


