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SCIENCE

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INTERVIEW

"It's about making people happier"

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Getting the better of anxiety

The emotion designed to help us cope with certain situations becomes a problem when it grows out of control **P2-4**



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Anxiety, a warning signal that sometimes goes too far

It's just an emotion that helps us to face up to certain circumstances and perform better, but it can become uncontrolled and turn into a feeling similar to fear, except we don't know what's making us afraid

■ PILAR MANZANARES

"I've frozen, mortifyingly, on stage at public lectures and presentations, and on several occasions I have been compelled to run offstage. I've abandoned dates, walked out of exams, and had breakdowns during job interviews, on plane flights, train trips, and car rides, and simply walking down the street. On ordinary days, doing ordinary things - reading a book, lying in bed, talking on the phone, sitting in a meeting, playing tennis - I have thousands of times been stricken by a pervasive sense of existential dread and been beset by nausea, vertigo, shaking, and a panoply of other physical symptoms. In these instances, I have sometimes been convinced that death, or something somehow worse, was imminent.

"Even when not actively afflicted by such acute episodes, I am buffeted by worry: about my health and my family members' health; about finances; about work; about the rattle in my car and the dripping in my basement; about the encroachment of old age and the inevitability of death; about everything and nothing. Sometimes this worry gets transmuted into low-grade physical discomfort - stomachaches, headaches, dizziness, pains in my arms and legs - or a general malaise, as though I have mononucleosis or the flu. At various times, I have

developed anxiety-induced difficulties, breathing, swallowing, even walking; these difficulties then become obsessions, consuming all of my thinking..."

This is how journalist Scott Stossel, who wrote the bestseller 'My Age of Anxiety: Fear, Hope, Dread and the Search for Peace of Mind', describes his life as the result of a disorder that he began to suffer at the age of ten and has still not overcome now in his mid-forties. It will ring a bell with many people, because during the past 12 months about six per cent of the population of Spain has been affected by anxiety.

Actually, anxiety as such is not a bad thing, believe it or not. It is just an emotion that prepares us to adapt to, or face up to, certain circumstances. "It's a warning sign about a stimulus that could threaten our interests," says Dr Antonio Cano Vindel, president of the Spanish Society for the Study of Anxiety and Stress (SEAS).

Stress

Obviously, some situations are more worrying than others: "These are the ones that involve a major stress component, where there is a lot of uncertainty. They make the patient feel defenceless because they don't know how to get out of the situation and they see it as a threat.

"It's very similar to fear, but we know what is causing us to feel afraid. With anxiety we don't know why we're feeling like that, so we don't know what to do about it," explains Dr José García, psychiatric advisor of the Spanish Confederation of Associations for Families and People with Mental Illness (FEAFES).

Symptoms

It's quite logical for us to function



One of the common associated signs of a panic attack is hyperventilation, which causes a rapid increase in generalised physiological activation

■ ALBERTO FERRERAS

with a certain amount of anxiety, because it 'activates' us in situations where this is necessary, such as when we are sitting an exam, for example, and it 'deactivates' us afterwards, when we need to rest.

"It is important to bear that in mind, because anxiety is not a problem until it intensifies, becomes chronic or takes the form of attacks and crises which mean the person loses control, and it turns into a series of symptoms that are classified as a mental health problem," says Dr García.

So when people suffer permanent or chronic anxious reactions, more intensive symptoms occur and, over time, it becomes a type of illness. "At first anxiety helps us to perform better, but if it doesn't allow us to rest then it wears us out," says Dr Cano.

Stossel's testimony shows that anxiety produces numerous symptoms, including shaking, stomach pains, palpitations and hypertension, and these can sometimes be confused with physical illness. It can also occur the other way round, when what appears to be a symptom of anxiety is actually something else. "It is important to identify the difference," stresses Dr García.

What are these symptoms, though? The president of SEAS says they have to be considered on different levels: cognitive-subjective, physiological and motor.

At a cognitive-subjective level they can include feeling unwell, worry, hypervigilance, tension, fear, insecurity, a feeling of losing control, negative thoughts about oneself or the way one acts in front of others, difficulty in thinking or concentrating, and perceiving major physiological changes (cardiac, respiratory etc.).

At a physiological level different systems are activated, principally to do with the nervous, endocrine

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and immune systems. Many changes can occur, but the individual may only notice some of them such as heart rate, breathing, sweating, muscular tension, gastric sensations, dry mouth, nausea, dizziness etc. There can also be transitory psycho-physiological disorders such as headaches, insomnia, erectile dysfunction, muscle cramps, gastric disorders etc.

At a motor level symptoms may include restlessness, hyperactivity, repetitive movements, difficulties in communication (stammering), avoiding fearful situations, consuming substances (food, drink, tobacco...), crying, tense facial expression etc.

Anxiety disorders

Excessive anxiety, with its constant nervousness and activity, can cause an anxiety disorder. When it reaches this point, each person will have specific reactions and those will determine the type of disorder from which they are suffering.

When people who have an anxiety disorder are asked how much time they spend thinking about their problem, they normally say about 80 per cent of their free time. People who suffer from panic magnify their physical sensations of anxiety and pay them

WAYS TO PREVENT OR REDUCE ANXIETY AND STRESS

- | | | |
|--|--|--|
| <p>► Eat healthily and avoid large meals.</p> | <p>► Don't continually analyse a problem or the alternatives; that causes anxiety.</p> | <p>► When you do something well, give yourself a pat on the back.</p> |
| <p>► Sleep around eight hours a night.</p> | <p>► The stress produced by a situation depends on the consequences we foresee, but at times we exaggerate the negative consequences (we over-evaluate the probability of something bad happening)</p> | <p>► If you do something badly, don't beat yourself up about it. Just think: "I didn't do that too well this time, I'll put it right." And don't blame yourself.</p> |
| <p>► Take holidays and use weekends as times for leisure and rest.</p> | <p>► If you feel nervous, tell yourself it is natural and don't worry about it even more.</p> | <p>► Appreciate the positive behaviour of people who smile, offer kind gestures...</p> |
| <p>► Don't take your work home.</p> | <p>► Act naturally.</p> | <p>► Correct negative behaviour of others by providing them with correct information, but without criticising them or penalising them for it.</p> |
| <p>► Practising sport or moderate exercise can help to relax you, especially in the countryside and with friends. It is good to walk for half an hour every day.</p> | <p>► Remember that other people don't perceive our symptoms of anxiety with the same intensity that we do.</p> | <p>► Don't keep going over problems from the past.</p> |
| <p>► Organise your time and tasks properly so everything gets done and you don't overlook anything important.</p> | <p>► It is a good idea to remember that other people also suffer from anxiety, and we don't judge them because of it.</p> | <p>► Practise relaxation on a regular basis.</p> |
| <p>► Don't arrive late for appointments which you have made.</p> |  | <p>► Read good self-help books to learn how to think well.</p> |
| <p>► Be selective about activities when there isn't time to do everything.</p> | | <p>► Expose yourself bit by bit to situations which make you feel panicky.</p> |
| <p>► Tackle problems by deciding what is best in each case.</p> | | <p>► Learn to say no.</p> |
| <p>► Take decisions through a logical process: look at the problem, analyse the pros and cons, choose the one which seems best. Never go back.</p> | | <p>► Practise your best social skills</p> |
| | | <p>► See a specialist if this becomes necessary.</p> |



a lot of attention, while those with social anxiety are concerned about their conduct in social situations, which they consider inappropriate, so they focus their attention and spend a lot of time thinking about that.

Let's take a look at the different reactions and disorders:

Panic attacks (crises of anxiety or anguish). This involves an intense anxious reaction which you feel you are unable to control (especially the physical signs) and a conviction that you could die at any moment. Those feelings (such as imminent death, heart attack etc.) are caused by extremely worrying thoughts and you often hyperventilate, causing a very rapid increase in generalised physiological activation.

Agoraphobia. This is caused by anticipating and avoiding situations which could lead to an anxious reaction or panic attack which other people could not fail to notice. If it is not possible to avoid some of these situations, this can trigger the expected anxious reaction. Examples include crowded rooms and flying.



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Children can also be affected

➤ is produced in specific situations so people avoid them, such as being afraid of enclosed spaces.

Social phobias. Very intense anxious reactions occur when the individual is in a social environment, so they often try to avoid such situations, such as public speaking.

Obsessive-Compulsive Disorder. The obsessions can take the form of persistent ideas, thoughts, impulses or images which the individual considers intrusive and inappropriate and which cause them considerable anxiety or discomfort. These are not just simple concerns about everyday life. The person tries to control or neutralise obsessive thoughts (dirt, untidiness, illness, the gas valve, damaging others...) through other thoughts or actions (compulsions). The most common compulsions are checking something several times, counting, washing, avoiding being alone with somebody... in the end the sufferer wastes a great deal of time, which interferes in their life and causes them considerable discomfort and high levels of anxiety.

Post-traumatic stress disorder. This occurs after having suffered or observed a very traumatic event (an attack, rape, assault, accident...) in which people's lives were in danger. The images of the traumatic situation keep returning over and over again (flashbacks), against the person's will, in full detail, and they lead to intense reactions of anxiety (worry, fear, lack of control, high physiological activation, avoidance of related situations...)

Acute stress disorder. Similar to post-traumatic stress disorder, it appears immediately after the traumatic event.

Generalised anxiety disorder. This is suffered by people who have intense anxiety reactions (worry, high physiological activation etc.) for more than six months, in very common situations, which are not classified as phobia, obsession, panic or post-traumatic disorders.

It often seems as if anxiety is something which only affects adults, especially women, who are doubly vulnerable due to their dual roles as housewives and workers, and also because of their hormone system which "makes them experience stress-related problems more intensively," says Dr Cano. However, it can also affect children, because they too suffer from stress.

"They are increasingly being exposed to more stimuli and more activities which, although they are recreational (such as video games) increase stress levels and anxiety. Children with a perfectionist personality are more likely to suffer from anxiety, because they tend to be more obsessive and controlling," he explains.

As Dr García says, "if a parent isn't sure whether their child is suffering from anxiety or having an attack of nerves, they should consider certain aspects such as the child's attitude, irritability, difficulty in concentrating, whether they seem more restless than normal, etc."

When professional help is considered necessary, the child should be taken to a psychologist or psychiatrist. The SEAS website also has a service to help people who are concerned; they can send an email to seas.cons@psi.ucm.es, explaining their concerns, and receive guidance from a specialist.

People who suffer from this disorder show signs of worry and anxiety nearly all the time. The anxiety is caused by mistaken interpretations or anticipatory thoughts about everyday problems.

Anxiety disorder due to medical illness. Many anxiety symptoms are considered side effects of a medical illness such as hypothyroidism.

Substance-induced anxiety. The symptoms are associated with the consumption, abuse of or dependence upon a drug. Habitual consumers show higher levels of anxiety than non-consumers, even after they have stopped consuming the substance, and they are more



Anxiety is the result of thoughts and interpretations. :: SUR

likely to develop panic attacks.

Non-specific anxiety disorder. This is a classification which is used when there are strong signs of anxiety or phobic avoidance but they do not meet the criteria to be diagnosed in any other category of anxiety disorder.

Treatment

Reducing the amount of time that sufferers spend thinking about their problem and disarming those thoughts are part of the treatment to 'deactivate' anxiety. They also need to face up to the situations which cause them stress without giving them the normal ritual importance, such as people who wash their hands over and over again because they think there may be microbes on them, for example.

"They have to force themselves not to keep washing, not to keep

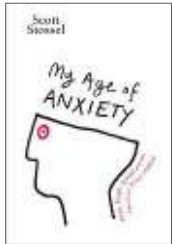
Medication which is not properly used to combat an anxiety disorder can have side effects which prevent the patient learning how to control their condition

checking that they have locked the door... and when nothing bad happens they begin to realise that what they thought was so important actually isn't important at all," says Dr Cano.

"There are also associated conditionings, such as if someone is attacked once when they are drawing cash at an ATM, they aren't go to a machine again because they are convinced the same thing will

USEFUL READING

Journalist Scott Stossel has suffered from anxiety since he was ten years old. He has tried everything to overcome it, but one day he decided that he might understand his illness better if he found out more about it. He has now written an interesting, very entertaining and also moving book about his long personal battle with anxiety.



MY AGE OF ANXIETY

Author: Scott Stossel
Published in the UK by William Heinemann

happen if they do. That affects their normal life. They have to relearn, and gradually the symptoms which caused them so much anxiety will start to disappear." In this way, people gradually learn how to use relaxation methods and control the anxiety caused by these problems.

This cognitive-behavioural treatment, which experts say is better than drugs, is now being carried out by some GPs. "It is being used in 14 health centres in Madrid, Castilla La Mancha, the Balearics, the Basque Country and Valencia to treat anxiety disorder. We give the patients information and teach them relaxation and cognitive skills so they don't magnify the situation, they don't see it as a threat and so they don't have to avoid situations which cause them anxiety," says Dr García.

When it comes to using medication, doctors need to be very rigorous because there has been a considerable increase in the use of hypnotics, antidepressants and anxiolytics in recent years and Spain is one of the countries with the highest consumption of anxiolytic drugs.

"Sometimes they solve the problem but they can also have a downside; they can have side effects which stop the patient learning self-control," explains Dr García.

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Hundreds of Estepona residents flock to see the plans for their future hospital

Work is scheduled to start at the end of March and when finished the hospital will handle 85,000 consultations and 91,000 emergencies a year

LEANDRO PAVÓN

ESTEPONA. "As we have been demanding a hospital for Estepona for more than ten years, I'm pleased to have the chance to see what it will be like because this time I can trust that it is actually going to happen." Those were the words of Antonio Rueda, who lives in Estepona and was at the Felipe VI theatre earlier this week, not for a concert or play but for the presentation of the CHARE project. Work is scheduled to begin on this hospital at the end of March, and the mayor of Estepona, José María García Urbano, and the regional Health minister Aquilino Alonso, organised the presentation to explain to local people what they can expect from it.

Nearly 500 people attended the event, filling the auditorium to find out more about their future hospital. It was due to have been built by 2007 but the works were suspended for several years.

Those present were able to see the layout of the building, which



Infograph showing what the future CHARE hospital in Estepona will look like. :: L.P.

will be on three floors, one of them at lower ground level.

The ground floor will house the Emergency Department, rooms for consultations and diagnosis, and the administration and management offices.

The Emergency Department will

have seven consulting rooms for adults, two for children, an observation room with 11 arm-chairs and a treatment room. The hospital will also have a helipad so that patients who are transferred by this method of transport can be taken into the building quickly. The hospi-



Aquilino Alonso and José María García Urbano. :: L.P.

tal is expected to handle 91,000 emergencies and up to 85,000 consultations a year.

The top floor will house the operating theatres and multipurpose hospitalisation departments, an assembly room which can seat 200 people and another administration department. The surgical unit is expected to carry out between 3,600 and 4,000 operations a year, and has three operating theatres with a five-bed recovery room.

Finally, the lower ground floor will contain a clinical support department, changing rooms, the Customer Service department, management and administration offices, the maintenance department, storage and the food preparation unit.

Negotiations

During the presentation, which was also attended by regional government representative José Luis Ruiz Espejo, and the Junta de Andalucía's Health delegate Ana Isabel González, the mayor explained that since he had been in contact with Aquilino Alonso the negotiations to restart the hospital project had been "fruitful".

"The president of the Junta de Andalucía, Susana Díaz, visited Estepona after the flooding and showed special interest in the hospital project being finished. She also promised to come back to lay the first stone of the project," he explained. Sr Alonso said that the CHARE will cover 90 per cent of the health needs of the area.

Unusually, most of the project is to be financed by Estepona council.

Malaga doctors are starting to use a pioneering technique to treat prostate cancer

The procedure, which means the patient's urinary and sexual function can be preserved, is already being carried out in private hospitals elsewhere in Spain

NIEVES CASTRO

MARBELLA. Two local doctors have become the first specialists in Andalucía to use a treatment called Irreversible Electroporation (IRE) for patients with prostate cancer, which is the most common type of cancer in men.

These experts, Ildefonso Santos, a specialist in Urology at the Gálvez Hospital in Malaga, and his colleague Erik Schulten, urologist and andrologist at the CERAM hospital in Marbella, say that the advantages com-

pare favourably with classic therapies and modern focal techniques. The principal difference is that this procedure can preserve the patient's urinary and sexual function.

Dr Santos and Dr Schulten explain that IRE not only means that a large part of prostate tissue can be preserved and can maintain its function, but because the technique does not use thermal energy it does not cause problems such as the dissipation of heat which affects blood vessels, conduits such as the urethra or critical structures like nerves.

Irreversible Electroporation, which is not yet available on the Spanish national health service, is already being used at a few private centres in Murcia, Zaragoza and Madrid. In Malaga province, the Ochoa and CERAM-Marbella hospitals will be the first to carry out these operations, but as the equipment is portable it can be used



Dr Santos and Dr Schulten, at the Ochoa clinic in Marbella. :: J.-L.

The operation is carried out under general anaesthetic and controlled by ultrasound

elsewhere. The operation costs between 15,000 and 17,000 euros.

In January these two doctors took part in a workshop at the Klinik für Prostatatherapie clinic in Heidelberg, Germany, where about 100 patients have been treated with this procedure. This new technique uses electrical impulses which last for microseconds to open pores in the membranes of the cancerous cells, which die in the weeks following the therapy.

The impulses are administered through needle probes situated on or around the tumour, and controlled through ultrasound. The operation is carried out under general anaesthetic, takes between 45 and 90 minutes and the patient can go home within 48 hours.

Alternatives

In Spain about 28,000 new cases of prostate cancer are diagnosed every year and about 30 to 40 per cent of cases are detected early.

Until a few years ago the standard treatment for these tumours involved the whole of the prostate, which had good results but also caused important side effects, such as incontinence and impotence. Focal therapies, which include electroporation, are seen as an important alternative.

"Medicine wouldn't be a science if we weren't constantly trying to improve treatments for the most common pathologies, and that is how focal therapy began about 10 years ago as a minimally invasive option, especially in low-risk cases. Because only a small area is affected the side effects are minimal compared with traditional therapies," says Dr Schulten.

The doctors stress that a cure can never be guaranteed, but the success rate of electroporation compares well with classic techniques, which are successful in over 90 per cent of cases.



The committee in charge of the exhibition. :: SUR

Guadalhorce hospital's new plans to tackle breast cancer

:: F. TORRES

CÁRTAMA. The Valle del Guadalhorce hospital has just announced that from November this year it will implement a new programme to help detect breast cancer early.

During the launch of the programme that took place last week, the hospital's representative for Equality, Health and Social Policy, Ana Isabel González, stated that they expect more than 15,000 women to benefit from the project. This is largely due to the programme's mobile unit which will travel throughout the region to provide women with a preliminary check-up.

González also explained that as

a result of the new programme more than 1,500 Guadalhorce patients will now be able to have a CTI scan at the new hospital, instead of having to travel to Virgen de la Victoria hospital in Málaga.

At the launch González was also accompanied by the president of the provincial committee for the Spanish Association Against Cancer (AECC), Francisco Aguilar, as well as the manager of Virgen de la Victoria hospital, José Antonio Media.

She thanked them for the important work they have carried out in the province in helping and supporting people who are suffering, or have suffered, from the disease.

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Eye tests can uncover many other conditions. SUR

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The Joe Wicks method

Today's 'king' of fitness and nutrition promises weight loss in 15 minutes by eating more and moving less. What's the secret?

▣ RUBÉN CAÑIZARES

Train hard and eat well. That, as long as you stick to certain criteria, will lead to success. That is the philosophy of Joe Wicks, who today is effectively the 'king' of fitness and nutrition. With 1.4 million followers on Facebook and 1.1 million on Twitter, Wicks is perfectly at home on social media.

Qualified in Sport Sciences at St Mary's University in Twickenham, a third level personal trainer and also a coach in advanced boxing, Wicks has helped tens of thousands of people to reach their goals in the world of fitness with his special method, which involves moving less and eating more.

"The book is called 'Lean in 15: 15 minute meals'. It is full of exercises to make you active and work your body, but it also contains recipes which are delicious and also very nutritious. The recipes are easy to make and you don't have to spend much time in the kitchen," says this popular 'body coach'.

This first book by Joe Wicks, which has already sold more than 700,000 copies, has become the most successful debut cookery book since 2006. It reveals how to modify and eliminate fat from your body by eating more and doing less exercise, exactly the opposite to the advice we have been given for decades. How is that possible?

'Lean in 15: 15 minute meals' is a guide which teaches people how to become stronger and maintain (or lose) weight simply, healthily and effectively. Wicks' system of physical activity is one of the key features.

"I am very much in favour of HIIT (High Intensity Interval Training), which is a training method using phases of high intensity. These enable you to train to the maximum for just 30 seconds, then rest for another 30 or 40 seconds. In total, you spend 20 minutes working your body hard. It is a type of training which considerably increases heart rate, in such a way that you burn fat for up to 18 hours



▣ S. R.

Training in intervals of high intensity means that your body continues to burn fats up to 18 hours afterwards

after doing it," explains Wicks.

This is known as the post-training effect. The body strives to replace this lack of oxygen and that increases your metabolic rhythm so more fats are burned and, therefore, more calories. "That's why there has to be maximum effort," he explains.

In his book, Joe describes two types of HIIT, one cardio and the other strengthening, in which the sit-ups, push-ups, combat exercises and the famous burpees take you to your limits. The idea is to achieve the fittest physical form possible and for that he says you need to combine both types of

training, be consistent and forget about weighing scales.

"Muscle weighs more than fat, so the more toned you are the more you weigh, but you feel, and see yourself as being, better than ever. Sometimes taking a 'selfie' is a better way of measuring your progress than scales. It's better to use your own eyes, instead of numbers. My advice is to take photos every month to see the real progress in your body, and not obsess about it," he explains.

The other aspect of his famous method is nutrition. In his book, Joe Wicks shows how to eat in accordance with your body's energy demands and how to combine foods and intensive exercise. "It is a way of life which is going to transform your body and your way of eating forever. It is not like going on a diet," he explains.

The book contains 100 recipes in two main sections, those which are low in carbohydrates and those which contain a high amount. "Dishes which are full of carbohydrates are ideal when you have done a session of HIIT and your body needs something powerful, like a burrito or a fantastic chicken pie. If you train for 15 minutes five times a week, you can eat carbs knowing that you have already beaten them. At a psychological level, this is important. In my opinion, the bad reputation of carbohydrates is unjustified and false. The recipes which have hardly any carbs are for the rest of the day, when you don't need as much energy, and for the days when you don't do the exercise. It is also important to reinforce this type of food with a good amount of proteins every day," he says.

His favourite method of doing that is to eat a 30-gram spoonful of vanilla-flavoured protein powder with 15 grams of honey, 100 grams of baby spinach leaves and plenty of water.

Finally, Wicks says he has not forgotten about the occasional tempting treat, something which other physical trainers tend to rule out of an eating plan.

"They are the third section in my plan. I talk about snacks like spiced cashews, peanuts with wasabi or spicy nachos. Everyone deserves a treat sometimes. It liberates the mind. Otherside, eating could become a bit boring," he says.



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Dr Pedro Barri (far left), Victoria Anna Perea (second from left), Louise Brown (second from right) and Anna Veiga (far right). :: ANDREU DALMAU / EFE

United through a scientific milestone

"I am proud to be part of such a medical milestone," said Victoria Anna Perea, the first test-tube baby born in Spain in 1984

:: CRISTIAN REINO

Louise Brown, the first ever test-tube baby, and Victoria Anna Perea, the first baby to be born through in vitro fertilisation in Spain, met for the first time yesterday as they both received an award from the Fundación Dexeus Salud de la Mujer, an award which recognises and

commends continual professional contributions to health sciences.

Brown was born in Oldham in England in July 1978, while Perea was born in the same month six years later in Barcelona. Both women, whose successful births have allowed thousands of women to become pregnant in cases where

it would be otherwise impossible, admitted that they were overwhelmed by the award, considering themselves as "famous yet anonymous".

Brown and Perea acknowledged that they had to do very little to win this award given they were the results of such a milestone, af-

ter their parents took the decision to use science to reproduce.

Perea was conceived scientifically after her mother discovered that she had a problem with her Fallopian tubes and was unable to conceive naturally.

Moreover, having already lost a child at the end of one pregnancy, the couple didn't want to take any more risks and looked to science for help.

Perea was born as a result and was given the second name Anna in name of researcher Anna Veiga, who, along with gynaecologist Pedro Barri, formed part of the team that carried out the birth of a test-tube baby for the first time in Spain.

Both admitted that being referred to as the first test-tube babies in the world and in Spain respectively does get tiring, but it allows them to walk around with their heads held high.

"I am proud to be part of such a medical milestone. As time has gone by I have understood more and more what I represent. It is all very satisfying," Perea stated.

The process of in vitro fertilisation has developed enormously since their births over 30 years ago, to the point where last week a 64-year-old woman gave birth to twins in a Spanish hospital.



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"Aesthetic medicine is all about making people happier with their appearance"

Petra Vega President of the Spanish Society of Aesthetic Medicine (SEME)

About 2,000 people attended a conference on this branch of medicine, whose techniques are now more effective and less aggressive

∴ **ÁNGEL ESCALERA**

MALAGA. The desire to look good is as old as humanity and one-third of all Spanish people use the services of aesthetic medicine; the numbers have grown by eight per cent in four years. Last week, around 2,000 professionals took part in a conference in Malaga organised by

the Spanish Society of Cosmetic Medicine (SEME). The society's president, Petra Vega, says the quality of this speciality in Spain is as high as that of cardiology or ophthalmology. "The techniques which we aesthetic doctors use are increasingly more effective and less aggressive," she says.

–This is the fourth consecutive year that the SEME has held this conference in Malaga. Why is that?

–On one hand, because the number of people attending has continually increased. This year 20 per cent more people attended than in 2016. On the other hand, because we have been authorised by the Health authorities to set up a mobile clinic, so we can

carry out treatments as if we were in an ordinary clinic. Thirdly, because the Palacio de Ferias y Congresos in Malaga is the ideal size for our needs, and there are excellent communications, including the AVE high-speed train and the airport. Malaga is also a province in which there is a great deal of aesthetic medicine.

–What is the present situation for aesthetic medicine in Spain?

–It is high quality and it is homogeneous. Proof of that is the fact that the number of users has grown by eight per cent compared with 2012. These days, one in every three Spanish people uses aesthetic medicine, according to a study which was carried out recently. There has also been an increase in the numbers of aesthetic doctors, employees and turnover. This growth in just four years shows us that this type of medicine is in good health: people are becoming more interested in it and are using it more.

–Why has it grown so much?

–Firstly, people want to look better. They need aesthetic medicine to do that, and it has become one of their priorities. Human beings have always wanted to feel better, ever since pre-historic times. Secondly, it is more easily available and the techniques we use are much more efficient and less aggressive now, so the results look more natural and there are fewer side effects. In other words, we have gained in effectiveness and safety. Finally, aesthetic medicine is affordable for most people.

–So the treatments on offer are not expensive, is that correct?

–Well, let's see. There is a cost associated with these treatments, they are not 'budget' or 'low-cost'. I want to stress that there is no such thing as 'low-cost' in medicine, but aesthetic medicine is affordable and the range of treatments is very extensive.

–I suppose people need to be careful when choosing the centre and the doctor who will apply this type of treatment.

–Of course, that is important. We now



Petra Vega, during the interview. ∴ **FERNANDO GONZÁLEZ**

find ourselves facing two fundamental problems. One is unqualified practitioners and the other is fraudulent publicity. There are people who are not doctors and who invent or try to imitate legal medical treatments. That is a problem, and it puts effectiveness and safety into jeopardy. With fraudulent advertising, you also have to be careful about low-price offers; you need to know who is behind the information you are being given, especially on the Internet. They create false expectations and false needs. All the products we use are legal and authorised by the Spanish Medications Agency, there is nothing secret about them. I can't just say that I was going to make a cocktail of things which I have invented.

–Another problem with fraudulent publicity is that it doesn't mention the side effects...

–Aesthetic medicine is effective because it also has side effects. Everything has some type of adverse aspect, arising from its own effectiveness.

–Which treatments are most in demand these days?

–On the body, treatments for cellulitis and depilation, on the face mainly the removal of birthmarks, making the skin colour homogeneous and removing wrinkles, through the botulinum toxin. Many people also want thread lifts and hyaluronic acid.

–Aesthetic medicine is one thing, but plastic, cosmetic and reconstructive surgery is another. Can an aesthetic doctor do breast implants and perform operations?

–Breast implants are part of plastic, cosmetic and reconstructive surgery. In Spain, by law, if a doctor qualified before 1995 they can perform any

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"Malaga has excellent professionals and major clinics with international recognition"

"Since prehistory, human beings have always wanted to improve the way they look"

medical procedure, including surgery. If they qualified after that date, they can't. Having said that, nobody in Spain can say they are a specialist in cosmetic surgery if they have not qualified in plastic surgery.

-What qualifications do you need to be a aesthetic doctor?

-You have to have a B.Sc or medical degree, a two-year university master's degree in aesthetic medicine, continual training, professional experience and a diploma from the Colleges of Medicine, which regulate this sector. We want the Ministry of Health to regulate it, and to create a diploma of training in aesthetic medicine.

-Does aesthetic medicine have a preventive component?

-The qualification we have proposed to the Ministry of Health is in aesthetic medicine and wellbeing, because it is a type of medicine which seeks to generate wellbeing. We are

increasingly collaborating more with specialities such as neurology and oncology on treatments for neurodegenerative patients or those with cancer. For example, it helps a patient with cancer a great deal if they look in a mirror and think they look good.

-Why is the aesthetic medicine of Malaga among the most important?

-Because of the relationship with the Costa del Sol and its fame abroad, plus the fact that there are some leading clinics here. Malaga has some excellent professionals and major clinics which have achieved international recognition. Aesthetic medicine in Spain is as good as cardiology or ophthalmology, for example.

-If these types of treatment increase wellbeing, I suppose that means that people feel better in themselves psychologically.

-When someone has a complex about their appearance, it makes them feel bad. It reduces their self-esteem, causes insecurity and can result in depression. Overcoming that with treatments which are not very aggressive boosts their self-esteem and confidence. Aesthetic medicine is all about making people happier not just about making them more beautiful.

-Is it mainly women who want to improve their appearance?

-Yes, but there has also been an eight per cent increase in male clients compared with 2012. At present 42.9 per cent of women and 18.4 per cent of men use the services of aesthetic medicine in Spain. Men and women, they are all seeking wellbeing and happiness.

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Going beyond salads and dried varieties (below) and increasing the popularity of seaweed is the priority of these researchers. :: FOTOLIA

New products made with seaweed aim to improve nutrition

Cadiz university is making cherry tomatoes with a dressing of sherry vinegar and seaweed, mousse with three different types of seaweed, gnocchi with seaweed pesto and mini soya burgers with seaweed as a contribution towards a healthier diet

:: SUR

Researchers at the University of Cadiz (UCA), in collaboration with the Technological Aquaculture Centre (CTAQUA), recently brought together in El Puerto de Santa María more than 75 experts in research, production and gastronomy using seaweed.

The EALGA project, which aims to optimise the harvesting and cultivation of seaweed in the Bay of Cadiz, is based on studying the fundamental properties which determine the quality of the seaweed for use in industrial food production.

Seaweed is a little-known natural marine resource and it is barely

used at all at present, especially for human nutrition. Only a small section of the Spanish population uses this product – fresh, dried or tinned – for culinary purposes. “Because it has important nutritional value, seaweed contributes to a healthy diet and that is why it would be very interesting for it to become some-

thing people eat every day,” says Víctor Palacios, a researcher in the Food Technology department at Cadiz university.

The healthy properties of the seaweed and the potential of the Bay of Cadiz as a source, led to the EALGA project being set up in this area. “We want to encourage



the use of seaweed not only for consumption but also as a way of boosting the economy of the area,” says Victor.

As part of the project, the researchers have developed products which are made with the different types of seaweed collected from the marshes in the Bay of Cadiz.

To make the products attractive to consumers and easily affordable, they have added the seaweed as a main ingredient, and those attending the recent conference in El Puerto were given the chance to sample cherry tomatoes dressed with sherry vinegar and seaweed, mousse made with three different types of seaweed, gnocchi with seaweed pesto and mini soya burgers with seaweed.

The products were chosen after considering the nutritional and technological characteristics of the seaweed, but their sensory potential has also been taken into account so fresh seaweed has been used as well as dried and powdered versions. “As the tasting session showed, seaweed can be a main ingredient in dressings and condiments, liquid, semi-liquid emulsions and pastas, or in meat dishes. Some seaweed which grow on the marshes are high in proteins, such as the one known as ‘sea lettuce’, says Victor Palacios.

All these products have been patented or are in the process of being so and one of them, the seaweed mousse, has already been a runner-up at the CEI.MAR’s A t r É B T awards and came third in the ‘Eco-trophe-lia’ competition organised by the FIAB. According to the experts from the EALGA project, these products are totally viable and market surveys have shown that they are likely to be well received.

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