

Most Adults Who Are Open to Going to a Professional to Improve Their Appearance Say Looking Their Best is Important for Daily Activities

# Overall Looks, Body Image, and Being on Trend with Fashion and Beauty Are Seen to Contribute to Success and Confidence

Washington, DC, February, 2018 — According to a recent online survey conducted by Ipsos on behalf of Allergan, which interviewed adults who are open to going to a professional to improve their appearance, 92% say that looking their best is important for daily activities (e.g career, school, volunteering, errands) and most further believe that the way they look (84%) and the way their body looks (81%) contribute to how successful they can be in all aspects of their lives. Nearly nine in ten also say that looking fit and healthy, and being on trend with fashion and beauty contributes to their confidence (86%).

- Younger adults (ages 21-35) are particularly likely to agree that looking their best is important for daily activities (93% vs. 89% of those age 56-65), that the way they look (90% vs. 78%)/the way their body looks (88% vs. 72%) contributes to their personal success in life, and that looking fit and healthy, and being on trend with fashion and beauty contributes to their confidence (89% vs. 82%).
- Men are also much more likely to believe that the way their body looks contributes to how successful they are in all aspects of their lives compared to women (88% vs. 78%, respectively).

Despite the importance placed on how they look, eight in ten admit that they are self-conscious about their body (79%) and 82% say they are self-conscious about a specific body feature – with younger adults (ages 21-35) more likely to report feeling self-conscious compared to older respondents. Thinking about the future, three quarters also agree that they are worried about wrinkles and sagging skin on their body (76%). For another 78%, it is important that others find their body attractive – though this jumps to 84% among men (vs. 76% of women) and 86% among those age 21-35 (vs. 70% of those age 56+).

Nine in ten believe that there are solutions that exist to solve the problems they have with their body (89%) – and 81% say that they won't give up trying to achieve the vision they have for their body. Adults under the age of 35 are particularly determined, with 85% saying they won't give up trying to achieve their perfect body compared to 78% of those age 56+ who feel the same way. However, nearly six in ten (58%) feel as though no matter what they do, it's impossible for them to get the body shape they would like to have with their given resources.

- Two thirds don't consider themselves overweight but think they could look better if some more stubborn fat was gone (65%). This is especially true for men (70% vs. 62% of women) and young adults (71% vs. 60% of those age 56-65).
- Similar proportions say that although they are vigilant about diet and exercise, there are stubborn areas of fat they can't get rid of which really impacts their confidence (63%), with men (70% vs. 60%) and young adults (70% vs. 56% of those age 56+) once again more likely to agree.

Six in ten believe that their body type fits society's standards of attractiveness (61%) and nearly as many are currently satisfied with their body shape (55%). However, most feel as though they have excess fat on parts of their face/body (82%) and two thirds say that

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they are interested in losing weight/fat using methods other than diet and exercise (68%). Another seven in ten (69%) believe it is worthwhile to spend money to remove areas of unwanted fat from their body.

• Men (74% vs. 66% of women) and both young (72% of those age 21-35) and middle-aged adults (74% of those age 36-55 vs. 59% of those age 56+) are particularly likely to consider it worthwhile to spend money to remove areas of unwanted fat from their body.

Nearly all 'aesthetic conscious' adults surveyed strongly agree/agree/slightly agree that they care about the way their face looks (99%) and want their face to look good at any age (98%). Just over eight in ten (83%) also say it is important to them that others find their face attractive, with men (86% vs. 82%) and young adults (89% of those age 21-35 vs. 75% of those age 56+) particularly likely to emphasize the importance of others finding their face attractive.

Thinking about face perceptions, seven in ten say that they are satisfied with their facial appearance (71%) and feel as though their face matches the way the feel inside (70%). Nevertheless, two thirds (65%) report being self-conscious about a specific facial feature and most also agree that they are interested in what options exist to address their facial concerns (79%). Nine in ten (89%) believe it is worthwhile to spend money to improve the way their face looks and another 59% say that they would consider surgical or nonsurgical intervention to alter/change their face's appearance.

- While men and younger adults are more likely to be satisfied with their facial appearance and feel as though their face reflects what they feel on the inside, they are also more likely to report being self-conscious about a specific facial feature.
- Women, on the other hand, stand out as being more likely to express interest in what options exist to address their facial concerns (81% vs. 76% of men), along with younger adults. Women (90% vs. 86% of men) and both young (90% of those age 21-35) and middle-aged adults (91% of those age 36-55 vs. 85% of those age 56+) are also particularly likely to consider it worthwhile to spend money to improve the way their face looks.

Body aging does not bother nearly two in five (39%), particularly men (55% vs. 33% of women) and younger adults (46% of those age 21-35 vs. 37% of those age 56+). However, when it comes to aging, 85% would consider non-surgical intervention to prevent/reverse the signs of aging and another three quarters (75%) would consider lasers or light devices to prevent/reverse signs of aging. Fewer would consider injectable intervention (56%) and/or surgical intervention (55%), though more than half would be open to these options if it meant they could to prevent/reverse signs of aging. Despite willingness to try different treatments aimed at reducing the signs of aging, most do admit that they are concerned about unnatural results from surgical or non-surgical enhancements/ treatments/procedures (80%).

• Women are more likely to be willing to consider non-surgical intervention (87% vs. 80% of men) and lasers/light devices (76% vs. 73%), while men are more likely to opt for surgical intervention (58% vs. 53% of women) to prevent/reverse the signs of aging.

Respondents in the U.S. are more likely to say that they modify or avoid social interactions specifically due to the appearance of their body (40%), than they are to do this due to the appearance of their face (32%). Three in ten report that they always use apps to modify or erase something on their body (28%) or face (28%) before posting a photo on social media.

When it comes to defining attractiveness, respondents are most likely to base their ideal definition of attractive on sources such as their friends (48%), family (43%), and TV/movie stars (42%). Three in ten define attractiveness by looking at models (31%), athletes (31%), magazines (31%), and ancestry/culture (30%), while fewer base their definition of aesthetic appeal on social media

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personalities/influencers (22%), musicians (14%) or other public figures (8%). Athletes is the top mention among men (53% vs. 22% of women who say the same thing) and friends is number one ranked among women (52% vs. 39% of men who say the same thing).

- This study also involved interviewing roughly 75 physicians (dermatologists, plastic surgeons, and non-care physicians) who see aesthetic patients in a private setting in order to understand their perceptions/experiences around aesthetics.
- Among these physicians, good looking (41%), handsome (36%) and pretty (32%) are the top three words they most associate with beauty/attractiveness.
- Physicians are most likely to think that females base their ideal definitions of attractiveness from TV/Movie stars (82%), models (66%), and social media personalities/influencers (66%). When it comes to men, physicians are most likely to think that the ideal definition of attractiveness comes from athletes (78%), with TV/movies stars (49%) and a patient's ancestry/culture (34%) rounding out the top three.

#### **Beauty Routines/Aesthetic Goals**

Thinking about ultimate goals regarding beauty/grooming and health/wellness, nearly all respondents surveyed strongly agree/agree/slightly agree that they want to look good at any age (99%), maintain a healthy lifestyle (99%), and improve their long-term health (98%). More than nine in ten also say that they want to improve the look of their facial skin (94%), be attractive to others (94%), feel more confident about their looks (93%), and achieve their ideal body (93%). Nearly as many say that an ultimate goal for them regarding beauty/grooming and health/wellness is looking younger than their age (87%), while eight in ten say the same thing of wanting to lose weight (82%) and wanting to be noticed/admired for their looks (80%). Only a third, in comparison, say that one of their ultimate healthy/beauty goals is to look like someone else/a celebrity (34%).

• Compared to men, a greater proportion of women say that improving their long-term health, maintaining a healthy lifestyle, looking good at any age, improving the look of their facial skin, and losing weight are part of their ultimate health/wellness goals. Men, on the other hand, are particularly likely to want to look younger than their age, be noticed or admired for their looks, and look like someone else.

When it comes to their regular facial care routine, more than half of those surveyed include a facial cleanser (66%), daytime moisturizer (57%), and sunscreen (51%) as part of their routine, while another 45% regularly use nighttime moisturizer. Anti-aging creams (38%), exfoliators (37%), under-eye creams (34%), and face masks (33%) are used by at least a third, while more than one in five use toners (26%), serums (25%), teeth whitening strips/trays (24%), and retinol-based products (19%). Fewer report using lip serums (11%) and skin lightening products (10%), while 7% say that they do not include any of these as part of their regular facial care routine. Looking at men specifically, 44% use after shave lotion and 21% use beard balm/oil.

Most also say that they are happy (75%) with their current *beauty/grooming* practices – though an even greater proportion do feel there is more they should incorporate in their current routine (80% vs. 33% who feel that there is too much involved in their current routine). Another six in ten admit that they do not know if their current routine is enough or appropriate for them (63%).

There is consensus when it comes to money spent on *beauty/grooming* routines, with nine in ten wishing it was more affordable (90%). When it comes to investing their time, nearly half say that they do not have enough time to maintain the routine that they would like (46%).

Looking at health/wellness routines, respondents are most likely to say that they regularly incorporate vitamins/supplements (68%) and at-home exercises (51%) as part of their overall routine, though at least three in ten also say that outdoor activities (45%), over-

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the-counter skincare treatments (39%), and gym memberships (30%) are part of their overall wellness habits. Roughly one in five turn to at-home devices (25%), yoga (21%), massages/spa treatments/facials (21%), fitness classes (19%), and meditation (18%) to stay healthy and fit, and about one in ten opt to stay fit using weight loss/meal programs (12%), team sports (11%), and chiropractic care (10%). Other mentions fall below this threshold while only 5% say that they do not include any of these as part of their health/wellness routines.

Most say that they are happy (65%) and satisfied (71%) with their current *health-wellness* practices – though 86% feel there is more they should incorporate in their current routine (vs. 33% who feel that there is too much involved in their current routine). Another six in ten admit that they do not know if their current routine is enough or appropriate for them (63%).

As was the case with beauty/grooming routines, an overwhelming majority wish their *health-wellness* routines were more affordable (86%). When it comes to investing their time, more than half say that they do not have enough time to maintain the routine that they would like (52%).

Adults ages 35 and under are much more likely to feel uncertain about both their beauty/grooming and health/wellness
routines, and say that they wish these were more affordable and that they had more time to maintain such habits.

#### **Aesthetic Concerns, Treatment Awareness, Experience and Future Considerations**

The top ten face/body aspects that are most concerning to respondents are stubborn fat in abdomen (68%), love handles/fat (61%), under-eye bags or dark circles (53%), facial lines or wrinkles around eyes (51%), yellowing teeth or crooked teeth (50%), stubborn fat in inner thighs (50%), cellulite (48%), stubborn fat in outer thighs (46%), facial lines or wrinkles on the forehead (46%), and unwanted hair on body or face (46%).

- Looking at the face/body aspects physicians say their patients have discussed with them in the past 12 months, facial lines or wrinkles around lower face (63%), facial lines or wrinkles on the forehead (62%), lines or wrinkles between the eyebrows (62%), under eye bags or dark circles (62%), facial lines or wrinkles around eyes (61%), lips fillers (58%), sagging skin on face or neck (57%), fat/fullness under chin (51%), facial skin issues such as texture or uneven skin tone (51%), and stretch marks (50%) are the top ten most common.
- Physicians report that other items on the top ten list of concerns for consumers are mentioned by fewer, including 38% who say their patients have mentioned stubborn fat in abdomen, 41% who have mentioned love handles/fat, 11% who have mentioned yellowing teeth or crooked teeth, 34% who brought up stubborn fat in inner thighs, 42% that brought up cellulite, 34% who mentioned stubborn fat in outer thighs, and 47% of physicians who say their patients have discussed unwanted hair on body or face with them.

Other issues such as texture or uneven skin tone (45%), sagging skin on face or neck (44%), fat/fullness under chin (44%), facial lines or wrinkles around lower face (44%), lines or wrinkles between the eyebrows (42%), bra fat (42%), excess skin on parts of body (41%), facial skin issues such as acne or redness (40%), and eyelid folds/creases (40%) follow closely behind, with at least two in five saying that they are extremely/very/somewhat concerned with these aspects of their face/body. Other concerns such as stretch marks (39%), breast size and/or shape (39%), stubborn fat in double chin (39%), visible veins (38%), receding hairline/thinning hair/pattern baldness (38%), crepey (fragile/thin) skin on the body (37%)/neck (37%)/face (31%), thin or thinning eyelashes (35%), fat in lower part of cheeks (30%), and loss or lack of volume in cheeks (30%) are mentioned by at least three in ten, while other mentions fall below this threshold.

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Most adults have heard of procedures/treatments available for altering/improving appearance (92% vs. 8% of those who are not aware of any) – especially women (94% vs. 87% of men) and adults over the age of 56 (95% vs. 90% of those age 21-55). When it comes to awareness of different professional treatments/procedures, a majority of those surveyed have heard of facials (72%), tummy tucks (70%), laser hair removal (69%), breast reduction (69%), nose jobs (68%), tattoo removal (68%), facial cosmetic surgery (65%), professional in-office teeth whitening (64%), surgical fat reduction of the body (60%), hair replacement/transplants (59%), buttock implants (54%), breast enlargement with implants (53%), wrinkle relaxing injections (52%), surgical fat reduction of the face/neck (52%), and microdermabrasion (51%).

Not quite half are aware of dermal filler injection (48%), non-surgical body contouring/fat reduction treatment (48%), physician-strength chemical peels (46%), breast lift with implants (46%), and eyelid lifts (44%), while about two in five have heard of laser skin resurfacing (41%), microblading or microfeathering (39%), chin implants (38%), and professional-grade topical skincare products (36%). One in three are familiar with fat grafting (34%), eyelash growth treatments (33%), and breast lift without implants (32%), while roughly one in four have heard of treatments for excessive sweating (28%), surgical vaginal rejuvenation (26%), in-office microneedling treatment (25%), dermaplane (24%), photorejuvenation (24%), double eyelid surgery (24%), non-surgical fat reduction under the chin (23%), lymphatic drainage/massage (22%), non-surgical skin tightening (22%), and other cosmetic implants (22%). Fewer have heard of non-topical cellulite reduction treatment (20%), other surgical cosmetic procedures (14%), non-surgical vaginal rejuvenation (13%), penile enlargement (10%).

Adults are not only most likely to be aware of facials, but these are also the most common treatments that 'aesthetic conscious' adults have tried in the past (55%), while more than a third say that they have tried professional-grade topical skincare products (37%) and lymphatic drainage/massage (36%) before. One in five have experienced professional in-office teeth whitening (21%), microdermabrasion (20%) and eyelash growth treatments (18%), and at least one in ten have experienced dermaplane (15%), photorejuvenation (14%), laser hair removal (14%), physician-strength chemical peels (11%), and wrinkle relaxing injections (11%). Respondents are least likely to have undergone more invasive treatments/procedures, including very few who have had hair replacement/transplants (2%), buttock implant (2%), breast lift with implants (2%), breast lift without implants (2%), surgical vaginal rejuvenation (1%), and other cosmetic implants (1%, i.e., pecs, cheek, bicep).

- Among the physicians surveyed, lines or wrinkles between the eyebrows is the treatment/procedure most frequently addressed in their practice, with 18% ranking this the #1 concern treatment among their patients in the past 12 months. Roughly one in ten say that breast size and/or shape (9%), facial lines or wrinkles around lower face (8%), facial lines or wrinkles on the forehead (8%), and under eye bags or dark circles (7%) are the number one most frequently addressed concerns in their practice.
- Of all the concerns listed, lines or wrinkles between the eyebrows (21%), facial lines or wrinkles on the forehead (13%), and facial lines or wrinkles around eyes (13%) are also top ranked as being the concerns new patients most frequently request treatment for. Not quite one in ten physicians also say that the desire to add extra fullness to lips for an augmented look (7%) and discuss breast size and/or shape (7%) are also top concerns brought up by new patients.

# Motivators, Barriers and Triggers to Seeking Information About Treatments to Enhance Attractiveness

Not looking as good as they could is the top motivating factor for undergoing specific treatments among those who have tried or are willing to try different treatments/procedures (42%). One in three say that they were motivated to get aesthetic treatments done because they saw a picture of themselves and it bothered them (33%) or because they are financially ready (33%). At least one in five have undergone a procedure (or are considering it) because they are curious and wanted to try it (23%), because they received a

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coupon/discount for the treatment (23%), received a fit card (22%), someone they know tried it (21%), or because they received it as a present (20%). More than one in ten mention wanting a change in clothing size (17%), because a doctor said it might be right for them (17%), finally having time to do it (16%), or wanting to prepare for a special occasion (16%) as reasons for considering/proceeding with particular treatments. Other reasons include someone making a comment or pointing out a feature on their face or body that made them self-conscious (14%), wanting to get ready for summer (12%), seeing something about it in a doctor's office or an advertisement for it (both 12%). Other motivating factors are mentioned by less than one in ten.

 Among those who have had treatments in the past, 85% were extremely/very/somewhat satisfied with the physician/ professional conducting their cosmetic/aesthetic treatments, and similar proportions were also satisfied with their cosmetic/aesthetic treatments (83%) and the outcome of their cosmetic/aesthetic treatments (82%).

Among those who are NOT willing to try treatments, nearly half say this is because they can't afford it (48%). A third are concerned about not having the money saved now (34%) and are unsure it's worth the cost (33%), while just over one in four feel guilty spending the money (28%), are concerned the results would not look natural (27%), or are concerned about long-term safety (26%). Being afraid of injecting a foreign substance into their body (24%), wanting to try diet and exercise first (22%), being concerned about it being painful (21%), not being bothered enough yet to get a treatment/procedure (21%), and being concerned about the immediate side effects (20%) are reasons mentioned by at least one in five, while not quite as many say that they are unwilling to try treatments because they cannot afford the 'downtime' (16%) it's not reversible or can't return it (15%). At least one in ten are not willing to get treatment because they are concerned about bruising and swelling (14%), are afraid they will look worse if they stop doing it (13%), fear needles (11%), or because they want to try other treatments first (10%). Other mentions fall below this threshold.

• Physicians are most likely to say that not being able to afford it is the top reason mentioned by their patients for declining treatment (28%, ranked #1). Another 15% say the patient not having money saved right now is another common reason, while not quite one in ten say patients are most likely to decline treatment because they are unsure it is worth the cost (8%), they feel guilty for spending the money (7%), or because the patient doesn't want to commit to treatments he/she can only get from a doctor.

#### **Aesthetic Purchasing Process**

Most 'aesthetic conscious' adults believe that the 30's and 40's are the most appropriate ages to start seeking out aesthetic/ cosmetic treatment from a physician/professional (60% - including 40% who say the 40's specifically), and another 27% believe that your 50's are an ideal time to start thinking about such treatments/procedures. Very few think the most appropriate age to start seeking out aesthetic/cosmetic treatment is your 20's (3%), while not quite one in ten (7%) feel this way about being 60 and over. Only 3% say that it is never a good time to start seeking out aesthetic cosmetic treatment from a physician/professional.

- Interestingly, half of physicians surveyed believe that for women, the most appropriate age to start seeking out aesthetic/cosmetic treatment from a physician/professional is 18 30 (50%). Another 29% believe the best age for a woman to consider aesthetic/cosmetic treatment is between 31-40, while fewer believe the most appropriate age is between 41-50 (12%) or age 51+ (5%).
- Physicians are also most likely to say that ages 18-30 are the most appropriate when it comes to men seeking out aesthetic/cosmetic treatment from a physician/professional (42%) and three in ten believe men should wait until they are between the ages of 31-40 (29%). One in five believe the most appropriate age for men to start seeking such treatment from a physician/professional falls between 41-50 years old, and 7% of physicians believe the best age for men to undergo treatments is 51 or over.

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Respondents are most likely to say that they would consider reaching out to a professional to address an aesthetic/cosmetic concern when the concern has affected their quality of life (45%). Three in ten would considering reaching out to a professional when the concern has become more persistent (30%), though 25% say that they would start to seek treatment from a physician/professional as soon as they notice a concern (immediately). Roughly one in five say instead that they would considering reaching out to a professional preventatively/before anything bothers them (21%) or when others start to notice (16%).

- Physicians, in their turn, are also most likely to recommend that consumers engage a professional to address an aesthetic/cosmetic concern when the problem begins to affect their quality of life (40%).
- More than a quarter recommend dealing with such concerns before anything bothers the patient (28%), and one in five recommend engaging a professional as soon as a patient notices a problem (21%). Fewer physicians would recommend waiting until others notice the problem (8%) or until the problem has become more persistent (4%).

When it comes to information sources about beauty/grooming treatments, roughly one in five 'aesthetic conscious' adults say that they turn to TV shows and magazine advertisement (19% both) to learn more – on par with those who say that they turn to TV advertisements (21%) and/their hair stylist, make-up artists or barber (16%). Respondents are more likely to seek out information about beauty/grooming treatments from the internet (38%), friends, family and co-workers (36%), magazine articles (27%), physician, nurses and aestheticians (24%), and social media (23%), while roughly one in ten turn to celebrities (12%) and blogs (11%) to learn more.

- While a higher proportion turn to their physician vs. celebrities to learn about beauty/grooming treatments, respondents who use social media are also more likely to trust a doctor's social media posts about cosmetic procedures (86%) over a celebrity's posts (65%).
- Roughly two thirds of all respondents say that they strongly trust/trust/slightly trust Google Reviews (68%) and Yelp (63%) as doctor rating sites, and 57% trust RateMD. Not quite as many say that they trust RealSelf reviews (46%).

One in four (26%) have consulted with a physician and/or professional to discuss beauty/grooming treatments – with dermatologists (31%), plastic/cosmetic surgeons (18%), and primary care physicians (13%) the most common first points of contact to discuss aesthetic/cosmetic treatments among those who have consulted a physician/professional before. Only one in ten who consulted with a physician/ professional say that they sought out a second opinion (14% vs. 87% who did not).

• Among physicians, 32% believe that the number of patients they consult regarding aesthetic treatments/procedures will remain the same over the next 12 months. On the other hand, 65% believe that their number of patients seeking such treatments/procedures will increase, versus only 2% who believe this will decline.

Among those who have consulted with a physician/professional to discuss beauty/grooming treatments in the past, the most common topics brought up regarding cosmetic/aesthetic treatments were costs (57%), effectiveness of the treatment (49%), risks, side effects and safety of products (43%), and recovery time/requirements (40%). Roughly a third also used the opportunity to meet with a physician/professional to talk about the types of procedures available to them (35%), treatment goals (34%), level of pain involved in procedure (33%), duration of actual treatment (32%), and preparation (31%), and similar proportions took advantage of their consultation to go over the timing to see results (30%) and natural outcome (30%). At least one in five discussed physician credentials, expertise and experience (24%), before and after picture of other people who received the treatment (23%), and ability to return to work (20%) with their physician/professional, while fewer covered topics such as emotional motivators to having a treatment (16%), non-invasive alternatives/over-the-counter products (15%), emotional barriers to having a treatment (12%), ability to travel/fly on a plane (9%), and keeping it secret (9%).

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- According to physicians, their patient's treatment goals are the most important items to discuss during the initial consultation (26%) and one in in five think it is particularly important to talk about the effectiveness of the treatment (20%).
- Not quite one in ten believe it is important to go over the natural outcome (9%), costs (8%), non-invasive alternatives/overthe-counter products (7%), and risks/side effects (7%) with patient during the initial consultation, while other mentions are brought up by fewer.

#### **About the Study**

These are the findings from an Ipsos poll conducted October 25 – November 5, 2018 on behalf of Allergan. For the survey, a sample of 3,008 adults ages 21 to 65 from the continental U.S., Alaska and Hawaii was interviewed online, in English. In order to qualify for the survey, respondents had to strongly agree/agree that looking good at any age is important to them, at least slightly agree that they are open to going to a professional to improve their appearance, and agree with at least one more statement about caring about overall appearance, willing to invest money in their appearance or prepared to invest money in their appearance. A separate survey among physicians was also conducted. In order to qualify for the survey, physicians had to have a primary medical specialty of plastic surgeon, dermatologist, or non-core physicians and see aesthetic patients in a private setting. The precision of Ipsos online polls is measured using a credibility interval. In this case, the poll has a credibility interval of ±2.0 percentage points for all respondents.

Statistical margins of error are not applicable to online nonprobability sampling polls. All sample surveys and polls may be subject to other sources of error, including, but not limited to coverage error and measurement error. Where figures do not sum to 100, this is due to the effects of rounding. Ipsos calculates a design effect (DEFF) for each study based on the variation of the weights, following the formula of Kish (1965). This study had a credibility interval adjusted for design effect of the following (n=3,008, DEFF=1.5, adjusted Confidence Interval=3.5).

For more information about conducting research intended for public release or Ipsos' online polling methodology, please visit our Public Opinion Polling and Communication page where you can download our brochure, see our public release protocol, or contact us.

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