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decided it was too much to live apart from the rest of society. Boyle wondered whether he would be able to meet someone new — where’s a man to find love in the middle of a field?

But he has since found romance, meeting his current girlfriend at a talk he delivered. They’ve been together for five months and, currently in the “early stages” of their relationship, they are finding common ground in the pleasures of the simple life. She has yet to move in with him and experience

the day-to-day distance from modernity; at present, she gets a taste fortnightly. It’s a transition, he admits, but he’s confident she’ll come around, given that she is a “low tech user”.

He jokes that he “probably wouldn’t do well” if he subjected himself to the superficiality of today’s online dating scene. “If she’d seen me on Tinder, she probably would have swiped... whichever way you swipe if you’re not interested.”

To ensure regular socialising, Boyle has

persuaded a friend to stick religiously to a weekly evening meeting at the pub. It can only be missed, he says, if something major gets in the way, “like if your mum dies or if your leg is broken”. Last-minute cancellations won’t do in Boyle’s tech-free lifestyle.

His parents live 200km away and he does occasionally feel cut off, he admits, though appreciates sending and receiving letters that are considered, rather than hastily dashed-off messages online. But “on my Mum’s birthday, my natural reaction was to ring — and I

# How ‘Brotox’ is changing the face of manhood

The normalisation of male cosmetic surgery continues apace, with celebrity endorsements and social media filters adding to the pressure to have that perfect Insta body, writes **Katie Byrne**

**I**t was around this time last year that Allergan, the makers of Botox, announced plans to target a previously untapped market. The pharmaceutical giant has already conquered the middle-aged mother demographic but this new marketing push wasn’t designed with women in mind. No, it was designed just for men.

The trickle-down effect of Allergan’s marketing campaign can already be seen across social media where ‘Brotox’ has become something of a buzzword.

More men are getting Botox than ever before, and the numbers of men undergoing procedures like hair transplant surgery, liposuction and dermal fillers have soared alongside it.

It’s a “paradigm shift” according to the team behind SISU Aesthetic Clinics, which has branches in Dublin, Cork and Killarney. In a recent patient audit, they discovered that 30pc of their patients for Botox and dermal fillers are men.

“Five years ago there were very few men getting injectable treatments,” explains co-founder Dr James Cotter. “It really would have been a talking point if you had a male patient over the course of a month.”

Dr Peter Prendergast, the medical director of Venus Medical in Dublin, has noticed a similar uptick. His female-to-male ratio has gone from 90/10 to 80/20 in the last 15 years.

The normalisation of cosmetic surgery among men is partly down to the celebrity effect. While former Westlife singer Brian McFadden swore off Botox after it made him look like a “melted candle”, others have waxed lyrical about the benefits of a nip and tuck.

Louis Walsh reckons he looks 10 years younger after having an operation to smooth out the bags under his eyes. Gordon Ramsay isn’t ashamed to admit that he had laser treatment to soften the furrows on his face.

And actor James Nesbitt has become the poster boy for hair transplants (he’s had six at last count) after opening up about

the procedure long before any other male celebrity was willing to tell the bald truth.

Social media has also played a part, says Pat Phelan, co-founder of SISU. “We’re in an Instagram and a *Love Island* generation,” he says. “Beauty is reflected back upon us with filtering and everyone looks perfect all the time.”

Pat has had Botox to soften two lines that were bothering him on his forehead and he thinks there will come a time when it’s just a normal part of the average male grooming routine.

Aesthetic nurse Kerry Hanaphy agrees: “Men nowadays are into looking after themselves,” she says. “The doctors who do the Botox in the clinic, they Botox each other and it’s the first thing they say to male patients.”

The only difference, she adds, is that men tend to need more of the product. Botox works by weakening and paralysing muscles, and because men have greater muscle mass, they need more units per treatment area.

Men will generally try Botox before they experiment with dermal fillers, says Dr Prendergast.

“We have a lot of men coming in looking for non-permanent fillers to project the chin more or create a stronger jawline. Some men have beards because they want to create the illusion of the stronger chin,” he says.

“There is an inherent preference biologically for women to be attracted to men with a stronger jaw line. It’s a sculpted, chiselled look — the male aesthetic ideal, I suppose.”

This partly explains why the treatment of gynecomastia, or “man boobs”, is a particularly popular procedure.

Gynecomastia is a common condition caused by hormonal fluctuations during puberty and, while medically harmless, it can lead to social anxiety and self-consciousness, explains Dr Prendergast, who treats it under local anaesthetic with VASER ultrasound-assisted liposuction.

“It’s a big concern for a lot of guys who are really embarrassed about the condition,” he says. “A man might be slouching over to hide



male breasts but once he’s had VASER he is more confident — he stands straighter.”

Others seek treatment through the medical card scheme. Figures provided by the HSE in response to a written Dáil question show that between 2014 and the end of August 2017, the HSE carried out 46 male breast reduction operations at an estimated cost of €207,000.

At the Avoca Clinic in Kilmacanogue, Co Wicklow, liposuction is as popular with male patients as it is with female patients — and the men come from every walk of life.

“We’ve treated men involved in politics, members of the travelling community, a fireman, a guard... men that you wouldn’t necessarily associate with plastic surgery,” says co-owner Niamh Murdock.

“Typically it’s guys who aren’t massively overweight but they’re carrying extra weight that they can’t get rid of in spite of watching their diet and going to the gym.”

*‘What we’re seeing is men are coming under more pressure around issues that might have been traditionally seen as female issues — body image, weight, shape...’*

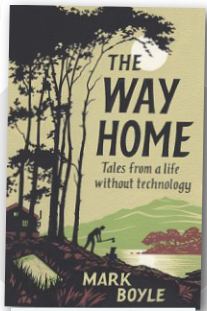
Doctors at the Avoca Clinic can also enhance the muscular look of a man’s arms with a targeted liposuction technique. Meanwhile, those in pursuit of the elusive six-pack can go to Venus Medical, where Dr Prendergast can create the appearance of a muscular torso “by very carefully removing fat from around the abdominal muscles”.

Procedures like this one might suggest that men are as cosmetically demanding as women, but in Dr Cotter’s experience, they tend to be “more linear” in their requests. “They’ll say, ‘I have these lines, they’re making me look tired and I want to look less tired,’” he explains.

Still, while men might be less finicky about the results that they want to achieve, they aren’t immune to body dysmorphic disorder (BDD), and the distress that it causes.

People with BDD fixate on their perceived flaws and often seek help from cosmetic surgeons who, in turn, look out for tell-tale signs of the disorder before they treat a patient.

“Men with body dysmorphic disorder present in the same way as women in that they point out flaws or features that they are not happy with when there is not really much of a flaw to see objectively,” says Dr Prendergast.



Mark Boyle's new book, 'The Way Home'

couldn't do that," he says. "I sent her a letter, but you have to remember in advance... and hope it's not at the weekend."

His existence is not for everyone — Boyle knows that the measures he has taken are "extreme" — though that does not mean he plans to bend.

"If anything," he says wistfully, "I want to get even more minimal." What that looks like, he is as yet unsure. But his steely resolve and appetite for abstinence mean, surely, that he will succeed in whatever he excises next.

Line of duty:

Drag queen Paul Ryder with his dog Millie.

PHOTO: TONY GAVIN

## 'We're on the way to this becoming a part of the average regime'

Paul Ryder, 31, dance teacher and drag queen from Dublin

"I was 30 years of age when I first had Botox. I had just come out of a two-year relationship. I had put on a lot of weight, I wasn't happy with my career — I wasn't happy with a lot of aspects of my life.

When I became single I thought, 'You need to do things to change this', and a lot of those changes had to do with my body and how I looked.

I'm a drag queen by trade and in my forehead there was a little line that just wouldn't disappear. Whenever I put my makeup on, it would just sink into that one line.

At first I was terrified because you hear the horror stories and you expect big needles. I said, 'Just don't do too much', and the doctor did what's called 'Baby Botox' which is a small little bit just to see how you feel. Then I met Kerry [Hanaphy, the owner of the clinic] for a consultation as regards to what I should be using on my skin.

Seven days later the line was gone and my skin looked fresher than it ever had. That was the start for me. I started looking after my skin, drinking more water and eating more vegetables.

And then of course you think, 'Will I get something else done?' So I asked Kerry what she would recommend and she said, 'Well, you've no top lip'. As a drag queen, I drew my lip on for the last 15 years, so I didn't really notice.

So I said, 'Let's go from the bottom and try it out'. I went for half a ml at the start and I really liked what I saw. Nobody knew that I had had it done — it was really subtle and just a really nice addition to my face.

I think more and more people are coming out and saying, 'I've had a slight bit of work done and it makes me feel good'. We're on the way to this becoming a part of the average regime.

My mother is a little bit anti the whole process. She would have her reservations but I think she's of an older generation so she doesn't really get it. And of course, she's a mother — and mothers worry.

A lot of people ask about the treatments that I've had and some of them look like they have everything sorted: it just goes to show that everybody has insecurities; everyone has their own little battles that they are fighting when it comes to how they look and feel."

"Those people I won't treat because they won't be happy no matter what I perform."

Body dysmorphic disorder is commonly associated with women but it's on the rise among men. And while there is no clear evidence linking it to the rise in male cosmetic surgery procedures, it's a hypothesis that many experts have explored.

"What we're seeing is that men are coming under more pressure around issues that might have been traditionally seen as female issues — body image, weight, shape and not feeling good enough in themselves," says Harriet Parsons, Training & Development Manager at Bodywhys: The Eating Disorders Association of Ireland.

"We've been looking at our stats for 2018 and there have been men at every face-to-face support group that we had during the year. One of those groups was all men — nine in total — which was kind of incredible. It's certainly the first year where we've had men at every single group."

Harriet says social media, diet and fitness culture have contributed to men's growing dissatisfaction with the way they look. "And when you think about it in terms of cosmetic clinics," she adds, "it's kind of a symptom of 'I'm not okay the way I am.'"



## Mid Life Bill Linnane

The next generation seem better equipped to understand the agony of ecstasy

Do you know where your kids are? On a related note, do you know how much they are paying for ecstasy? I do, primarily thanks to the gardai who gave a drugs awareness talk in my daughter's school. Apparently, kids in our town are paying €2 a pill. It seemed an odd angle to take, informing a room full of teens that two yokes cost less than a pint, but they offered a memorable counterpoint, telling the class of a young lad they found one night who had taken two ecstasy tablets and was trying to chew his way through the back wall of the local GAA pavilion. Strange stories like this rarely work as a deterrent — while they may be true, they are outliers, and it is in the grim mundanity of drug abuse that the real horror lies.

I came of age in the immediate aftermath of the summer of love, at the point where the seasons changed and it became the winter of bottlings, £30 ecstasy tablets and rampant scabies.

Around that time I shared a house with a guy who was enthusiastically taking and selling drugs. He was nice enough, would always offer to make you a cuppa, and liked to play

chess. Obviously, as a drug dealer, it wasn't all cups of tea and knight-takes-pawn. The house phone was outside my room, I would often hear him threatening people over debts owed to him, sometimes it would be a fiver, sometimes a couple of hundred. He was under pressure, to feed his own habit and to manage his debts. On top of this there was the constant cat and mouse with the drug squad. He had a sizeable record for burglaries and theft, and was facing into serious jail time if he was caught again.

But he had an ingenious way of avoiding getting busted: He would ingest whatever drugs he had on his person when the DS would pull him aside for searching. When they didn't find anything, and let him go, he would vomit it back up, clean it off, and sell it on. If I have one anecdote that captures the grotty horrors of drug abuse, it's the thought of consuming a tablet, cooked up with who knows what in a dirty lab, which has also been inside someone's stomach and possibly has traces of sick on it. You didn't see that on *Ibiza Uncovered*.

My daughter was horrified by my story, which is good, because drugs are bad. Aside from the risks of organ failure, brain damage, addiction and ultimate annihilation, I just wanted her to understand that it isn't just the unknown chemicals you are consuming with drugs like ecstasy, but the circles you end up moving in — damaged, desperate people who can self destruct in the

*If I have one anecdote that captures the grotty horrors of drug abuse, it's the thought of consuming a tablet which has been inside someone's stomach and may have traces of sick on it*

blink of an eye and take you down with them. I was only a tourist in their world, but even for those brief few years in the mid-Nineties I could see that some of them were never going to escape, never going to find peace.

One night my former housemate was arrested on suspicion of drink driving. He did his usual trick of swallowing what he had on him, but this time the plastic wrapping ripped, and he died of a massive drug overdose, aged 19. It prompted newspaper articles asking how could this happen here, and decades on, it would appear that we are asking the same questions, only with more urgency, as drugs are becoming more and more nasty.

The gardai even told the assembly about ketamine, a drug which, whilst not widely available, nor as terrifying as crystal meth, is not the sort of thing you would want your kids ingesting, mainly because its primary use is as a horse tranquilliser.

It's hard to hear about these things and not feel like the world is becoming more dangerous, that drugs themselves are becoming more dangerous. But my daughter's generation are different — they are encouraged to talk about mental health, about happiness and the pursuit thereof, about relationships and self-esteem. They also understand that, contrary to what the gardai told them, the ultimate gateway drug isn't cannabis, it's alcohol.



Keeping tabs: it is in the grim mundanity of drug abuse that the real horror lies