The human mind has adapted to distinguish specific physical traits that contribute to our species’ survival as attractive, incorporating the genetic code for these characteristics into our collective language of beauty and perceived in the complex tones of attractiveness. While the relationship between auspicious genes and fecundity is commonly associated with female beauty, a male’s genetic survival is more closely contingent on his projected ability to provide resources for his mate and future progeny. A male who is skilled at this task would likely possess physical adaptations that would allow him to maximize his efficiency, constituting a greater chance of genetic permanence. The physical manifestation of these adaptations is male attractiveness, a subliminal message to a female that this man is likely to be a healthy and competent provider. Understanding how the natural selective pressures of the past 250,000 years influence attractiveness and impact society is essential to comprehending the motivating factors behind our male patients.

AN EVOLUTIONARY ROADMAP

There exists a misconception that the individual has complete control of not only one’s actions, but also the underlying thoughts behind these decisions. However, this tenuous notion of complete free will is undermined by a collective subconscious developed and honed within the uncompromising environment of prehistory. Throughout 99 percent of our evolutionary existence, a successful male was predicated by his ability to provide resources (Darwin). He would have been aerobically fit to better hunt his prey, possess a sharp intellect to be able to track animals, and be strong enough to fend off attacks from beasts or jealous contemporaries. Men who were better adapted for this task would have been able to garner more resources, which, from an evolutionary perspective, is imperative to man’s goal of ensuring genetic survival. Moreover, while physical prowess was instrumental to hunting and defending against predation, males with dominant facial features such as a strong chin, brow, and nose would be at an advantage as these bony faceguards protected the mouth and eyes from injury during battle. Unlike the female face, which benefits from a small chin, large eyes, petite nose, and homogenous skin, an attractive male incorporates dark skin, a chiseled chin, a well-defined jawline, and a framing brow.

What was once imperative to survival in the Pleistocene has become a viable predictor of our modern concepts of male sexual attraction, financial success, trustworthiness, and friendliness. Males that develop and take on roles of leadership and physical prowess often possess these corporal clues because evolution has imprinted our subconscious with the prominent correlation of dominant facial features, resourceful-

BOTTOM LINE

Although males are statistically the minority of patients in cosmetic practices, it is imperative for clinicians to recognize that their motivations and desired results differ from the female patient population. The aesthetic improvements that men seek stem from evolutionary selective pressures of what is considered attractive. For males, these tend to be based upon the ability to display their resourcefulness. Furthermore, possessing attractive features has been demonstrated to be an indicator of romantic and financial success, trustworthiness, and friendliness.
“As what makes a male resourceful evolves, so does what females find attractive. Resourcefulness has shifted to include traits that are indicative of long-term familial success with modern females placing increased importance on other factors such as social status when selecting a longer-term mate.”

THE TESTOSTERONE PARADOX

However, males wanting to appear resourceful must keep in mind that if they overdo their showmanship, it will have the opposite effect and turn females away. The portrayal of resourcefulness requires delicate balance, and wearing gaudy fake jewelry or overtly flaunting finances may alert females that one is not authentically resourceful. Just as men are able to go overboard with their material manifestations of financial resources, the same is true physically. Moreover, while testosterone helps to develop male dimorphic characteristics, too much testosterone can have a negative effect.

Subsequently, the challenge for men remains that, although there are surgical and non-surgical options to enhance their physical features, they must be mindful that extremes in sexually dimorphic traits will often scare females away. Excessive dominance in facial features is perceived negatively and as a threat. An excessively broad chin, heavy brow or darkened eyes signal a man who is aggressive, dominant, unfriendly, threatening, volatile, controlling, manipulative, coercive, and selfish. The dismissive attitude to males with disproportionate facial dominant traits is likely due to the high testosterone levels in utero. Higher levels of testosterone are linked with dominance and competition and possibly violence. Thus, it has become evolutionary adaptive to fear those with such physical traits.

In a Canadian study, subjects looking at neutral photos of college and professional hockey players correlated dominant facial appearance to aggressive behaviors. Males with wider faces were more aggressive and had more penalty minutes than narrower faces. It appears that we have the ability to detect within one’s facial appearance predilection for aggressiveness. As females rely on stable relationships for their offspring to survive, male aggression may turn against them, and over millions of years of evolution, females have learned to fear these individuals. For men with excessive male defining characteristics, overly aggressive facial features can severely detract from their success in business or mating.

AGE BEFORE BEAUTY: Males prefer mates 5.97 years younger than themselves and females prefer males who are 6.72 years older than themselves.
A DARWINIST APPROACH TO MALE PLASTIC SURGERY

We are no longer captives to our prehistoric aesthetic predispositions; rather, we are able to alter our appearance as we see fit. In fact, men throughout history have attempted to recreate facial features to create an image of strength and power. It is rumored that when George Washington stood for his portraits, he placed cotton in his mouth to expand his chin and jawline, recognizing that a strong, broad chin represented leadership qualities. While this may work for portraits, obviously this solution is impractical in our current society that emphasizes television and internet.

However, with the advent of modern plastic surgery techniques and materials, men without natural dominant faces have a variety of options at their disposal to recreate these features. Understanding the motivating factors behind a male’s request for plastic surgery and the evolutionary pressures that have shaped these desires allows us to maximize the results of our male patients. Each of the motivations behind a male’s desire for cosmetic enhancements is predicated on his ability to demonstrate his resourcefulness, albeit, in different ways. In my practice, males typically present as one of three types: the allurers, the aggressors, or the ladder climbers.

The first male type, the allurers, are men who feel a more dominant, masculine appearance would help them to gain access to more mates. These men are a dyadic group composed of younger males between 20 and 30 and newly divorced males in their 40s and 50s. Both types of men are typically seeking out facial features that highlight the secondary sexual characteristics that make men more attractive to women. I find most male patients within this cohort are seeking an immediate solution with minimal morbidity and at a limited expense. Accordingly, a non-surgical option with fillers and neurotoxins is often chosen. Often these men are treated with calcium hydroxylapatite (CaHA) to create a more defined jawline and a stronger chin. CaHA offers the most robust G’ of the popular temporary fillers and is best suited to project forward the thicker facial tissue of a male. This consequentially allows for the creation of the bony prominences that are characteristic of vitality.

The second category of males, the aggressors, frequently report their hyper-masculine features are portraying an omnipresent appearance of anger that is detrimental to their livelihood. Morphological manifestations of these males include a heavy brow with deep glabellar furrows, small eyes, and skin eruptions. These patients respond very well to minimally invasive in-office treatments, such as neurotoxins, to both raise the brow and reduce furrowing. Additionally, neurotoxins give the impression that the eyes are spaced wider apart and that the aperture is more open, thereby reducing the predatory appearance characteristic to animals with narrow, beady eyes. Neurotoxins also improve the first impression one projects and quality of life, both of which result in a friendlier image. The scientific evidence that expression and mood are codependent is clear, and the greatest benefit of the neurotoxin may reside in its still yet to be defined properties. The inability to contract corrugators and frown along with turning up the corner of the mouth to promote a smile may set off a cascade of neurochemical events, resulting in mood elevation. In addition, filler is integral to abating an aggressive male face. Filling in facial hollows, masking harsh skeletal protrusions, and reorienting a depressed corner of the mouth all aid in softening the appearance. Such treatments allow the patient to appear less aggressive.

In the wake of the recent economic crisis, many of our patients are seeking new or improved employment options and being more attractive has been associated with a greater likelihood of being hired for a job. Common to this third patient population, the ladder climbers, are those in sales who feel they are competing against an ever-increasing market of younger individuals. Moreover, while salt-and-pepper
hair and a hint of crow’s feet indicate resourcefulness, too many etched-in wrinkles and folds may be more indicative of impending retirement. Most commonly, these males want a “one and done” surgical option. They seem less interested in global facial treatments and are often particularly opposed to a facelift. Instead, they are specific and targeted in their wants. Surgical treatments, along with their requisite post-operative recovery time, are necessary to offer persistent and accurate improvements in the sagging neck or aged eyes. However, multi-step, non-surgical treatments that include chemical fat adipolysis to eliminate submental fat followed by the use of ultrasound or radio frequency treatments to reliably target and tighten the platysmal muscle are rapidly becoming a routine part of the cosmetic physician’s armamentarium.

CONCLUSION

Intra-female mate competition is heavily predicated on appearance; however, men compete just as vigorously to appear resourceful. Yet, males face a greater challenge of breaking though the feminized stereotype of facial enhancement. While the actual number of men opting for plastic surgery is steadily increasing, males still remain a constant 10 percent of the total number of patients.17 So, rather than a burgeoning male population, increases in male patient population are likely attributable to society’s greater acceptance of plastic surgery.

Despite evidence pointing to intellectual features like creativity, humor, and artistic talent gaining more importance in the perception of attractiveness, evolutionary adaptations occur over eons, not decades. It is essential that the cosmetic physician is able to recognize and achieve what dictates the idealized dominant male face without over-treating to an aggressive hypermasculine or a weakening feminizing appearance. Using an evolutionary lens while evaluating and treating our patients provides an increasingly clear direction to maximizing patient satisfaction.