This response was submitted to the call for evidence issued by the Nuffield Council on Bioethics' Working Party on Cosmetic procedures. Responses were gathered from 11 January to 18 March 2017. The views expressed are solely those of the respondent(s) and not those of the Council.

University of Edinburgh, class of 'Contemporary issues in medical jurisprudence (Honours)'

(1) What information should be made available to those considering a procedure?

The amount of information should be given accordingly to how much harm could be done.

To what extent should parents be allowed to make decisions about cosmetic procedures for their children?

Everything! The justification for not in normal medical procedures is not to stop them going ahead with something they really NEED. But cosmetic surgery is not a need, so they should be fully informed.

- (2) Are there (a) any groups of people who should not have access to cosmetic procedures or (b) any circumstances in which procedures should not be offered?
- (a) People under 16 and incapacitated
- (b) Too risk, consent hasn't been given
- (3) Should there be any guidelines on who can provide non-surgical cosmetic procedures?

Yes! To provide means of redress; to ensure competence of the practitioners; for the sake of those choosing a provider/practitioner of a certain intervention.

- (4) What are the responsibilities of those who develop, market or supply cosmetic procedures?
 - Traceability
 - > Reasonable standard of care in sale
 - > Reasonable standard of safety in procedure
 - > Transparency
- (5) Do you think that people seeking cosmetic procedures are patients or consumers or neither or both? Do you believe that current regulatory measures for cosmetic procedures are appropriate, too lax or too restrictive?

Both – will be a patient for medical intervention. They deserve the protection that comes as a consumer due to commercial nature of market. Hard to distinguish between both.