

# *all made up*

HOW WHITE COATS AND WHITE LIES CHANGED  
THE DISCOURSE OF BEAUTY



**W**hen I lived in England, I was surprised to find that the only place in town to buy high-end cosmetics—from Chanel to Clarins to Clinique—was at Boots, the local chain pharmacy where I picked up my prescriptions. “Of course it makes sense to buy your makeup from a pharmacy!” a Boots customer assistant told me the first time I walked in, searching for a violet lipstick. “Your well-being is your beauty.”

by Noël Duan



This wasn't the first time I'd heard beauty equated to wellness and self-care. More and more brands are using clinical language to stand out in the market. Luxury-skincare brand Perricone MD calls itself the "global leader in the world of prestige skincare led by innovation, research, and science," with products ranging from antiaging eye creams to vitamin supplements. Drugstore brand Physicians Formula, which sells itself as "Rx for Glamour," was created by a Hollywood allergist, Frank Crandall. And RéVive Skincare, which sells creams and serums that cost anywhere from \$60 to \$1,950 at Neiman Marcus, markets itself as different from other luxury brands because of its Nobel Prize-winning biotechnology. Of course, RéVive didn't win a Nobel Prize—but it claims to use technology developed from biochemists Stanley Cohen and Rita Levi-Montalcini, winners of 1986 Nobel Prize in Physiology or Medicine. These trusted brands are part of a larger industry that uses medicalized beauty jargon to make claims about their clinically proven, dermatologist-recommended, biotech-developed products in order to sell beauty self-care as a medical necessity.

And it's working—the cosmetics industry in the United States alone is expected to exceed \$62 billion in revenue in 2016. Natasha Singer dubbed this practice "skinflation" in the *New York Times*: "the spiraling increase in beauty marketing that employs science buzzwords whose meaning may be lost on consumers." A lotion can no longer be just moisturizer, it must be a "hydrating formula made with a bio-peptide and B3 complex," as advertised by Olay for a moisturizer called Regenerist Instant Fix Wrinkle Revolution Complex.

"Buzzwords add legitimacy when you're trying to sell something really expensive," says Geoffrey Jones, author of *Beauty Imagined: A History of the Global Beauty Industry* (2010) and a professor at Harvard Business School. "What used to sell was pure glamour. Now they want science."

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The medicalization of the cosmetics industry isn't a recent trend. Twentieth-century beauty entrepreneur Helena Rubinstein—one of the richest women of her day—was famous for her motto, "There are no ugly women, only lazy ones." In 1902 the mogul, whose only scientific training consisted of a two-month tour of European labs, began to craft the image of herself as a "beauty scientist." Advertisements featured her carefully handling beakers and test tubes in a white lab coat, and her products were originally sold only to pharmacies in Australia (where she emigrated from Poland) since they were the only outlets for cosmetics at the time. While her award-winning moisturizer, Modjeska, was indeed conceived by a chemist (the bark of the Carpathian fir tree was the secret ingredient), her greatest legacy in the beauty industry has been the appropriation of medical and scientific jargon in the marketing of cosmetics. Modjeska (named after Polish actress Helena Modjeska) shifted the discourse of makeup and changed the way we

consume beauty products, convincing women that beauty self-care is a medical and moral responsibility. Rubinstein, a self-made multimillionaire and daughter of immigrants, said anyone can be "made" beautiful. She created the idea of the beauty nerd, the glamorous pseudoscientist who studies the proper techniques, routines, and products.

Other beauticians took note of Rubinstein's success. In 1968, Evelyn Lauder—daughter-in-law of cosmetics mogul and entrepreneur Estée Lauder—helped establish New York-based Clinique and also donned a white lab coat at training sessions with her salespeople. To this day, Clinique sales associates, known as "consultants," wear the same clinical costume at department-store counters.

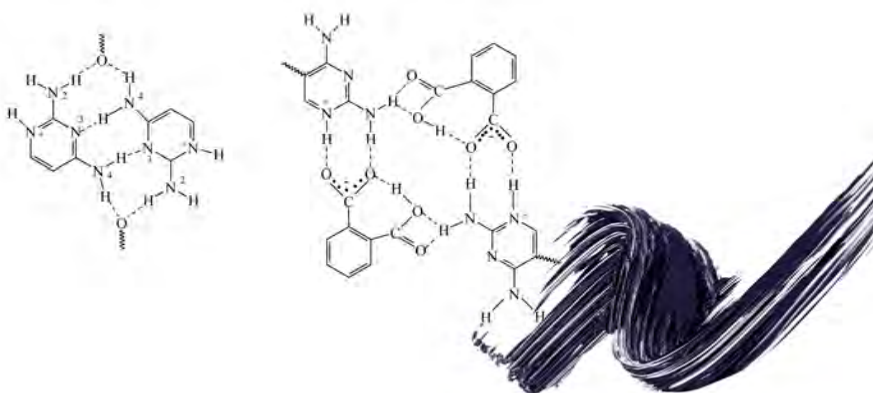
Max Factor, a Hollywood makeup artist and wig designer, is credited with developing the modern color-cosmetic industry and was the first recorded person to use "makeup" as a verb in the 1920s. In marketing materials for his brand, he was depicted as a chemist wearing a lab coat; his image suggested that he was a confidante and makeup artist who nevertheless maintained a clinical distance as a scientific expert.

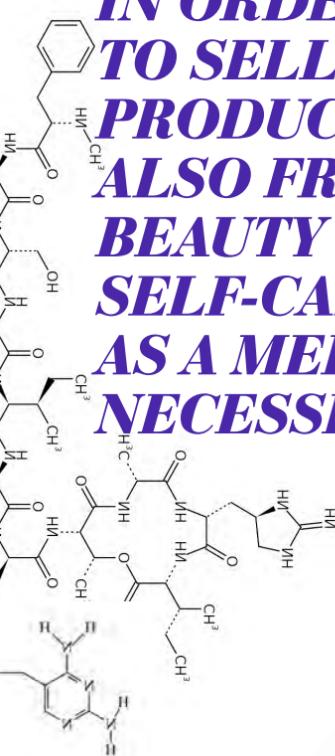
In the 1960s and '70s, scandals about hair-dye risks began to emerge in both American and British media: There was substantial evidence that some formulas contained carcinogenic ingredients. While entrepreneurs like Rubinstein, Lauder, and Factor marketed a scientific approach and image, the outbreak of hair-dye dangers prompted consumers to want actual licensed doctors and scientists to endorse, recommend, and develop products.

Cosmetic companies have always focused on the aesthetics and glamour of their products, selling an imagined world of luxury, exclusivity, and celebrity to the public. And while these continue to play a big role in beauty marketing, demand for clinical research—or at least the presence of some scientific buzzwords—has become just as important.

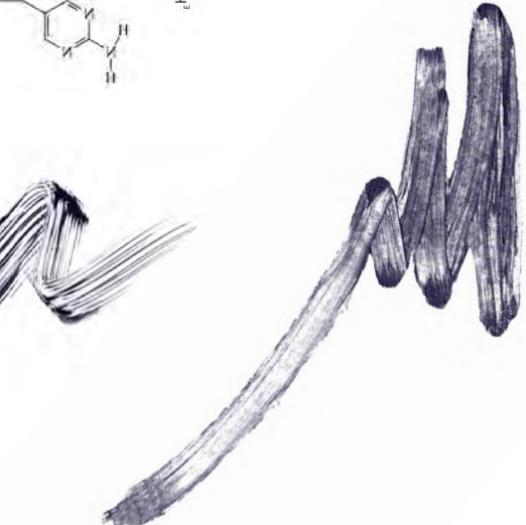
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Today, shoppers continue to ask for similar assurances that their products are backed by all of the right buzzwords. Since beauty jargon can be difficult to decipher,





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shoppers are now turning to products that carry the imprimatur of an actual expert, rather than just a lab coat. In a 2010 survey by the consumer-research firm Benchmarking Company, 35 percent of women said they've purchased a skincare product based on "dermatologist recommended" branding. *GCI*, a trade magazine geared toward cosmetics manufacturers, noted that "nothing resonates more with consumers and sets a brand apart from the competition than some form of dermatologist endorsement." Plastic surgeons and dermatologists don't have to fake it by posing in laboratories; they're supported with medical degrees and loyal followings for their own beauty lines: Dr. Rudolf Hauschka, Dr. Dennis Gross, and the late Dr. Fredric Brandt, for example.

When a product is labeled as "dermatologist recommended," it offers a false assurance of meeting a medical need. The recent phenomenon of BB, or "beauty balm," creams—an all-in-one facial cream/tinted moisturizer that claims to reduce wrinkles and brighten your skin—shows as much. Dermatologist SungJae Jung, chief advisor at Seoul-based Dr. Jart+, is said to have brought BB cream, a beauty staple in South Korea, to prominence in the United States in 2011. The cream was originally developed in the 1960s by German dermatologist Christine Schrammek to protect her patients' skin after chemical peels and cosmetic surgeries—an anecdote often used in the marketing of the do-it-all BB creams. A product touted to be as medicinal as it is aesthetic, BB cream became so trendy in Asia that major American brands began producing their own, eventually spawning "CC" (color-correcting) and "DD" (dermatologists dream) creams that claim similar benefits. And though products marketed as BB creams may contain antiaging peptides and mica for luminous finishes, they are not regulated by the Food and Drug Administration (FDA) and are not the same formulations used by Schrammek in the '60s.

Dermatologist Sejal Shah compares the efficacy of products against their claims, searching scientific databases for the hard data on active ingredients, often finding little to no research that backs up those claims. "Many times these buzzy ingredients are last on the list, which makes them negligible," says Shah. This is because while science has furthered beauty innovation—and marketing—the industry remains largely unregulated by the FDA, an American government organization responsible for everything from regulating food safety to testing efficacy of medications. Yet there is no real oversight from the FDA that requires beauty products to meet their claims based on clinical terminology. (See sidebar, page 51).

There are purported industry watchdogs, like Paula Begoun, who built her reputation as beauty critic of even the most celebrated and bestselling brands and in 1995 launched her own cosmetics line, Paula's Choice. (Like Rubinstein, Begoun has no medical training and began her career as a makeup artist.) A self-proclaimed "Cosmetics Cop," she created Beautypedia, a website that claims to use evidence-based research to evaluate beauty products, in 2008. On Beautypedia, as well as in her book *Don't Go to the Cosmetics Counter Without Me*, now in its ninth edition, reviews of beauty products are largely based on the ingredients list, and she calls out brands that capitalize on clinical language. As a brand, Paula's Choice relies heavily on Begoun's reputation (since her products are very similar to any major brand), and the trust that she's done her homework and is using the most beneficial ingredients. While she has marketed herself as an advocate for consumers and is highly critical of brands for employing clinical jargon to sell products, it's difficult to ignore that Beautypedia gives stellar ratings to her own line.

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Medicalized jargon in the cosmetics industry does more than make unsubstantiated claims in order to sell product; it also frames beauty self-care as a medical necessity. Imagine if public-health campaigns urged regular exercise and eating well-balanced meals alongside a beauty regimen of layering antiaging serums. Outside of skin conditions like cystic acne—which can be physically painful, lead to infections, and require treatment with prescription medication—the medical needs of skincare are vague. But we keep buying because beauty culture can be intoxicating, packaged as a way to improve your life from the outside in, even if it is based on pseudoscience. It becomes a ritualized affair, wherein we memorize

tips from magazines and blogs, obsess over YouTube tutorials, and comb through forums and review sites like MakeupAlley for beauty tips or in search of a “holy grail” product.

Philosopher Sandra Lee Bartky has noted that “skincare preparations are never just sloshed onto the skin, but applied according to precise rules.” By extending cosmetics consumption into the realm of self-care or wellness, the way we present ourselves and the way we are perceived by others becomes an individual lifestyle choice. The way you look on the outside, consequently, reflects who you are on the inside—even though for many individuals, beauty is a work of physical and emotional labor that does not necessarily reflect a means to self-care.

While in college, my own dermatologist convinced me that I had a condition that needed treatment. “You have inadequate lashes,” she said. “You need help that mascara won’t give you.” I was prescribed a topical solution to treat hypotrichosis, a condition that is described as abnormal hair growth—in my case, on my eyelids. A year’s worth of Latisse, a prescription drug endorsed by Claire Danes and Brooke Shields, cost almost \$1,500. Latisse promises “longer, fuller, darker” eyelashes and is one of the few beauty products that is FDA-regulated because it treats a medical condition. I diligently used Latisse for an entire year and saw minimal results; their science and research did nothing for my eyelashes.

Beauty brands don’t simply want to sell us cosmetics when they use advertisements packed with science buzzwords, they want to sell us a treatment for our own perceived ailments—as if cheeks without rouge are a clinical symptom and aging is a disease. Cosmetics have long been used as a way to explore self-expression or as a site of personal pleasure. But if the industry had its way, we would diagnose ourselves with too many fine lines or uneven skin tone and head to a department store cosmetics counter, where someone in a white lab coat can “prescribe” us just the right product to cure it all. **b**

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## TIME FOR A MAKEOVER: REGULATING THE BEAUTY BUSINESS

It’s been three-quarters of a century since the Food, Drug, and Cosmetic Act of 1938 passed, which gave authority to the Food and Drug Administration (FDA) to oversee food, drugs, and cosmetics safety. But since its origin, the FDA has enacted no new legislation requiring oversight of cosmetics companies—an industry that brings in more than \$60 billion annually. Wipe the mascara out of your eyes to read that again: The FDA has not passed any new laws requiring review, testing, or recalls of cosmetic products in more than 75 years.

In a recent audit by the Campaign for Safe Cosmetics, known carcinogens like formaldehyde, lead, parabens, and mercury were found in shampoo, lip products, deodorant, and skin creams that are still on the market today—which should shake your makeup addiction at its very...foundation. An industry that processes more than 12,500 chemical ingredients remains practically untouched by regulation.

To put this in perspective, since this audit, the European Union has banned 1,200 cosmetic chemicals, while the United States has banned only 10. Without a technical definition of “cosmetics” or a recall system in place, justifying a chemical ban is far more difficult in the States. With no legal precedent, altering a cosmetic line’s ingredients and subsequent products has been sacrificed for the sake of brand consistency and consumer expectations. Across the globe, countries like Australia, Japan, and Brazil have enacted legislation requiring rigid definition, classification, requirements, and labeling standards for cosmetics. Laws like Australia’s Industrial Chemicals Act and Brazil’s ANVISA-issued resolution are examples of progressive cosmetics legislation that not only rigidly define cosmetics but regulate their production, labeling, and recall processes. With the average American using a dozen cosmetics products each day, why are U.S. regulations as outdated as frosted eyeshadow?

In April 2015, a bipartisan bill was introduced by Senators Dianne Feinstein (D-Calif.) and Susan Collins (R-Maine) to increase FDA oversight. The proposed bill, the Personal Care Products Safety Act, would finally require cosmetics companies to register their ingredients, products, and manufacturing facilities, and would finally allow for product recalls, among other increased standards.

While the bill isn’t without its flaws (the organizations charged with reviewing ingredients are funded by the industry itself), it’s a first step toward increased safety for cosmetics users. Yet there’s no set date in sight for the vote. Give this bill momentum: Contact your representatives in Congress. Get under *their* skin and tell them to vote in favor of the Personal Care Products Safety Act. —REBECCA STEVENS