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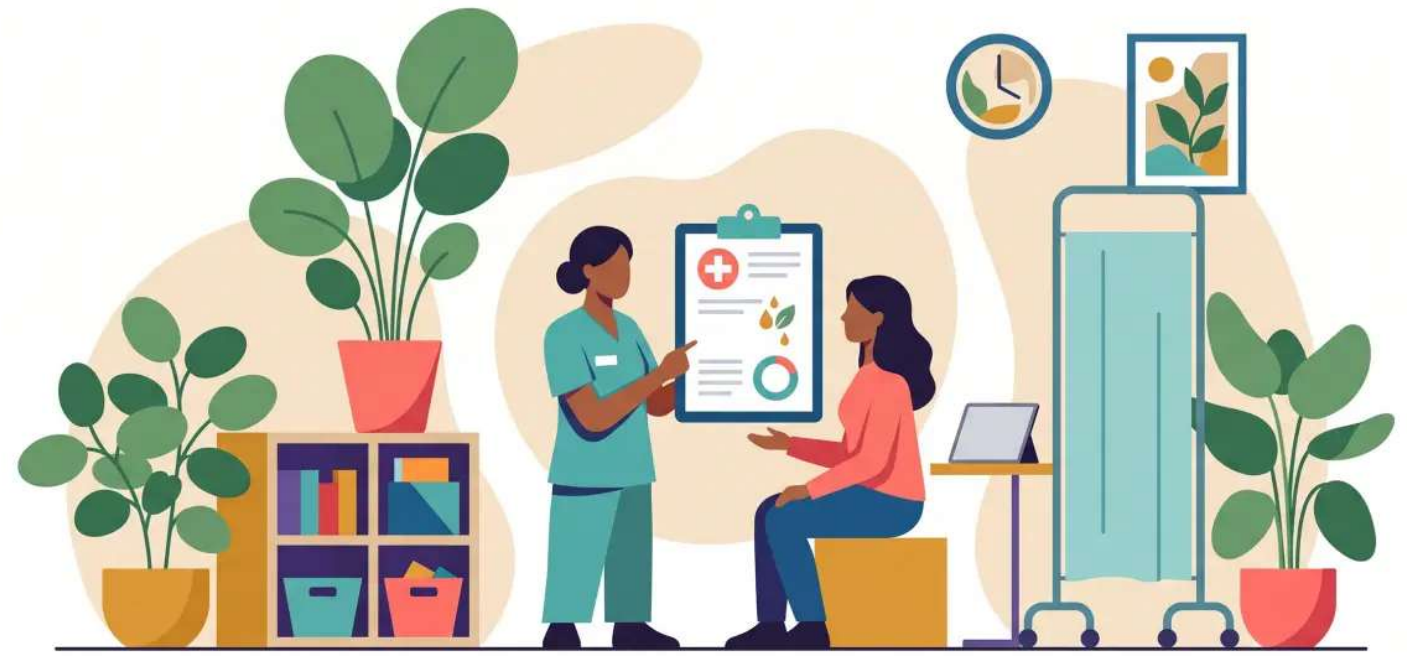
Cosmetic Surgery Grew 7% in 2025, Led by Lifts and Older Patients



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- The American Society of Plastic Surgeons (ASPS) reported 1,523,330 cosmetic surgical procedures in 2025, up 7% from 2024.

- Adults 66 and older had the largest increase of any age group, 24%, ASPS reported, while procedures among ages 18 to 25 fell 9%.
- ASPS reported that 82% of its member surgeons received consultation requests related to GLP-1 medications, and ASPS states that its statistics do not establish a causal link to procedure growth.
- ASPS reported that facial fat grafting rose 39% to 34,117 procedures, the largest percentage gain of any cosmetic surgical procedure.
- By LA Times Studios' calculation from ASPS's regional tables, ASPS's South Atlantic region and its Southeast and Texas region together accounted for 58% of the national increase.

Table of Contents

- Lifts Posted Broad Gains in the 2025 Plastic Surgery Statistics
- Older Adults Grew While Younger Patients Pulled Back
- Breast Surgery Grew as Surgeons Reported Smaller Implants
- What Patients Should Tell and Ask Their Surgeon
- Research Gap
- Closing Thoughts

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The American Society of Plastic Surgeons (ASPS) counted 1,523,330 cosmetic surgical procedures in the United States in 2025, up 7% from 1,425,390 in 2024, in its 2025 plastic surgery statistics report [1]. Reconstructive procedures, counted separately, rose 6% to 1,282,735 [1]. ASPS released the report on Sept. 1.

Lift procedures rose 4% to 29% depending on type, and procedures among adults 66 and older rose 24%. By an LA Times Studios calculation from ASPS's tables, two southern regions accounted for 58% of the national increase.

C. Bob Basu, MD, MBA, MPH, FACS, a Houston plastic surgeon and president of ASPS, told LA Times Studios in October that GLP-1 weight-loss medications have changed what happens in his consultation room. ASPS says its statistics do not establish that GLP-1 medications caused growth in any specific procedure category [2].

Lifts Posted Broad Gains in the 2025 Plastic Surgery Statistics

Lift procedures posted the broadest gains. Forehead and brow lifts rose 29%, upper body lifts 22%, arm lifts 21%, neck lifts 21%, thigh lifts 20%, facelifts 13%, breast lifts 8% and lower body lifts 4% [1]. By an LA Times Studios calculation from ASPS's procedure table, the eight lift categories together added about 37,200 procedures, more than the 30,932 added by breast augmentation, the largest single gain in the table [1].

Liposuction stayed the most common cosmetic surgery at 317,196 procedures, a 1% decline that ASPS classed as statistically flat [1]. The rest of the top five were breast augmentation at 304,234, tummy tucks at 173,251, breast lifts at 156,131 and eyelid surgery, which rose 19% to 118,978 [1].

Basu said major weight loss shows up in his own practice. "I am now seeing patients every week who have lost 50, 75 or even more than 100 pounds," he told LA Times Studios.

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He said consultations now often cover “the face, breasts, and body together” in a staged plan, and that thinner, less elastic skin after major weight loss shapes which procedures he recommends.

What the GLP-1 Data Show and Where They Stop

GLP-1 medications are a drug class that includes Ozempic and Wegovy and works by slowing stomach emptying and reducing appetite [1]. ASPS points to them as one factor that may help explain the lift gains.

In a companion survey, 82% of ASPS member surgeons reported consultation requests related to the drugs. Among body procedures, surgeons most often tied them to tummy tucks (88%), breast surgery (87%), arm lifts (84%) and thigh lifts (80%). Among facial procedures, facelifts (71%) and neck lifts (64%) led the list [1].

The procedure counts do not follow that order. Tummy tucks grew 2% to 173,251. ASPS wrote that consultations and completed surgeries are not synonymous, and that the consultation data may reflect patients still evaluating the timing, recovery or financial commitment of surgery [1].

Forehead and brow lifts ran the other way: only 19% of surgeons tied them to GLP-1 consultations, and they grew 29% [1].

That caution extends to the face. A review first published online in October 2026 in the Turkish Journal of Surgery reached a similar conclusion [4]. Its authors, from the plastic surgery department at Yeditepe University Hospital in Istanbul, concluded that the hollowing and skin laxity called "Ozempic face" more plausibly reflects rapid or substantial weight loss than a proven drug-specific effect.

The same narrative review found outcomes after body contouring, surgery to remove loose skin and reshape the body after weight loss, in GLP-1 users mixed, with some studies reporting comparable complication rates and others reporting delayed wound healing [4].

Surgeons Report Restoration as the Main Motive

ASPS asked surgeons to name the top reasons patients sought surgery in 2025. Restoration after pregnancy, aging or weight loss ranked first at 75%, followed by aesthetic enhancement at 67% and confidence and self-esteem at 53% [1].

Basu said the goal in his consultations is to "restore anatomy, proportion and balance in a way that still looks authentic." After a lift, he said, the response he values most from patients is "I look like myself again."

Older Adults Grew While Younger Patients Pulled Back

Cosmetic surgical procedures among adults 66 and older rose 24% to 203,105, the largest increase of any age group [1]. Volume rose 15% among ages 56 to 65 and 8% among ages 46 to 55 [1].

Among ages 18 to 25, procedures fell 9% to 62,670, and among ages 26 to 35 they fell 5%. ASPS reported that adults 36 to 55 still accounted for 49% of cosmetic surgical procedures, about 738,000 of 1.5 million [1].

In the 66-and-older group, eyelid surgery was the highest-volume procedure at 37,862, and facelifts rose 17% to 33,004 [1]. ASPS offered two possible explanations for the age pattern: economic stability among older generations and a more minimalist, skincare-first approach among younger ones [1].

Basu said patients in their late 60s and 70s often tell him, “I feel much younger than I look.” He said age alone does not decide candidacy, and that he weighs “overall health, medical conditions, medications, functional status and surgical risk.”

On the drop among young adults, Basu said, “I would be cautious about drawing too broad a conclusion from a single year of data.”

Fat Grafting Posted the Largest Gain

Facial fat grafting, a procedure that moves a patient’s own fat into the face to restore volume, rose 39% to 34,117 procedures, the largest percentage increase of any cosmetic surgical procedure [1].

When ASPS asked surgeons which facial rejuvenation techniques they use most, 69% named hyaluronic acid fillers, injectable gels that add volume, and 49% named fat grafting from the patient’s own body [1]. ASPS said the pattern suggests fat grafting was gaining ground before the recent surge in GLP-1 consultations.

Basu said fat grafting “allows us to use a patient’s own tissue to restore volume strategically, particularly when we are already performing facial surgery.” He said hyaluronic acid fillers “remain extremely useful because they are precise, minimally invasive and reversible,” and that the two “are not necessarily competing treatments.”

Breast Surgery Grew as Surgeons Reported Smaller Implants

Breast augmentation and implant revision procedures rose 11% to 304,234 [1]. Breast lifts rose 8% to 156,131 and breast reductions rose 7% to 76,040 [1].

In ASPS's survey, 36% of surgeons said patients trended toward smaller implants than in prior years, 12% said larger and 52% reported no change [1]. The 300-to-400 cubic centimeter range was the one 89% of surgeons reported using, ahead of 200 to 300 cc at 80% [1].

Breast implant removals held steady at 45,773, and ASPS reads that as a sign the move toward moderate implant sizes reflects patients entering consultations now, not existing patients reversing earlier decisions [1].

Basu said he does not start with a volume. "A 350 cc implant can look completely different on two different patients," he told LA Times Studios, and he begins with "the patient's anatomy."

The South Accounted for Most of the Growth

ASPS divides the country into five regions. Its South Atlantic region, which includes Florida, rose 8% to 548,025 cosmetic surgical procedures, and its Southeast and Texas region rose 7% to 231,383 [1].

By an LA Times Studios calculation from ASPS's regional tables, those two regions added 56,811 of the national increase of 97,940 procedures, or 58%. They held about 51% of 2024 volume, so their share of growth ran about 7 percentage points above their share of the base. The Western region added 33,649 procedures and the Midwest added 8,223. The Northeast fell 1% to 84,124 [1].

What Patients Should Tell and Ask Their Surgeon

Basu told LA Times Studios that patients should tell their surgeon which GLP-1 medication they take, the dose, how often and for how long, and whether the dose recently changed. He said “GLP-1 medications can affect gastric emptying and therefore perioperative planning and anesthesia.”

Joint guidance from gastroenterology, bariatric surgery, endoscopic surgery and perioperative care societies, first published online in October 2024, says the decision should be shared among the patient and the procedural, anesthesia and prescribing teams. Its authors name higher-risk patients as those in the dose-escalation phase, on higher doses, on weekly formulations or with stomach symptoms such as nausea and vomiting. The authors describe the document as guidance and not an evidence-based guideline [3].

Basu also said that before major body contouring, surgeons want to confirm adequate nutrition and protein status to support wound healing. On choosing a surgeon, he said patients should confirm certification by the American Board of Plastic Surgery and ask how often the surgeon performs the procedure, where it will take place, who will give the anesthesia and what postoperative care is in place.

Social media, he said, “should never substitute for checking credentials, experience and safety standards.” These points do not replace the advice of a patient’s own surgeon and prescribing clinician.

Research Gap

The report’s GLP-1 and motivation findings come from a survey of surgeons. ASPS wrote that the survey asked member surgeons to name, from their consultation experience, the top reasons patients sought surgery, and called the results a snapshot of conversations across practices [1].

The counts also leave out minimally invasive treatments such as Botox and fillers. ASPS did not estimate procedure counts for them this year and ranked them by share of volume instead, reporting that neuromodulator injections made up roughly half and hyaluronic acid fillers another 30% [1].

The 82% figure counts surgeons who received consultation requests, and the procedure counts cover all patients, so the two measure different things [1]. ASPS says its estimates combine three sources: member surgeon data, a national claims-based dataset, and data from CosmetAssure, a complications insurer for board-certified plastic surgeons.

Together they represent more than 3,000 board-certified plastic surgeons, and ASPS extrapolated the data to national and regional totals [1].

The review in the Turkish Journal of Surgery calls the evidence on outcomes in GLP-1 users promising but inconsistent across studies and says prospective studies are needed [4].

Closing Thoughts

ASPS's counts show where growth landed in 2025: lifts, patients over 66 and the two southern regions. Whether GLP-1 medications explain it is an open question that a survey of surgeons cannot settle.

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