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How to know you have a too-far face (Ruby Wax, take note)

If your friends won't tell you when your tweakments look unnatural, the country's top cosmetic doctors will

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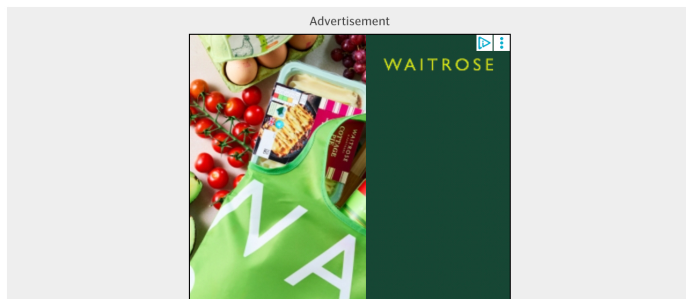
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Ruby Wax has admitted that friend Jennifer Saunders told her that her tweakments were noticeable Credit: James Gourley/ITV/Shutterstock and Rebecca Naden, PA News

Jennifer Saunders is one woman who knows the value of raw honesty when it comes to your [close friends](#). On this series of *I'm A Celebrity*, the comedian's long-time friend Ruby Wax, 72, shared some of the work she's had done on her face, including [Botox](#) and fillers – and said that when she told Saunders her “tweakments” were great because you couldn't notice them, she replied “Are you kidding? Of course you can!”

For which Saunders should get a pat on the back. Because as non-surgical treatments get increasingly normalised and taken up at ever-younger ages, we risk losing sight of what's normal or even attractive, as evidenced by the many mirror-shiny foreheads, disproportionate lips and [masculine jawlines](#) on display not only on our screens but also on the local high street.



Wax herself has had some of her work dissolved, involving a process of injecting an enzyme to break down filler, making her look better than before. If that was due to her friend's refusal to tell little white lies, it should remind us that those closest to us are the true touchstone when it comes to the question of whether any “work” looks natural or not. If they can see it, everyone can – and you should probably take a step back.




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Because not everyone may have a friend as forthright as Jennifer Saunders (although you could always ask your mum...), we asked some of the nation's top "tweakers" how you would know when you've gone too far. Here's what you need to know about the tell-tale signs, what some doctors get wrong, and how to fix things if the worst case scenario happens.

Ariana Grande

Kris Jenner

Kylie Jenner

Courtney Cox

Vogue Willian




AFP/Angela Weiss

Musician and Wicked star Ariana Grande revealed she stopped having Botox and fillers in 2018 as she had been using it as 'something to hide behind'

Lilo lips

Getting [natural-looking lip filler](#) is an art and a science, which may explain why it goes wrong so often. "When treating lips with filler, a good doctor will painstakingly adhere to fundamental ratios and measurements that make for a natural-looking lip," says cosmetic physician Dr Catharine Denning from Marylebone Skin.

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They will, she adds, consider these from all angles (including profile and oblique angles), while also taking into account ethnic variations. “When lips look out of proportion, the work was likely performed by someone who doesn’t have a deep understanding of anatomy or worse, knows but still ignores the right parameters in order to follow a trend.”

Examples of things having gone too far are overinflated lips (which may have long-term consequences as it can irreparably stretch the tissues), or a “pearly” ridge along the lip edge (or vermillion border). “This would never exist in a real lip. Nor does volume at the side portion of the lip,” says Dr Denning. “Injecting there gives rise to that unattractive “duck lip” aesthetic, which is rarely seen in natural lip anatomy.”

How to fix it

Injections with hyaluronidase enzyme can, often over the course of a few sessions, get rid of unsatisfactory filler results, but if (in extreme cases) the lip envelope has been stretched to the point of becoming baggy, keeping the area plumped may be the only option.

Chipmunk cheeks

We all hanker after our [collagen](#)-plumped cheeks of yore, but some hanker more than others. “Things go awry when a patient gets (or wants) a level of cheek volume they never had in the first place,” says cosmetic physician Dr Wassim Taktouk from the Taktouk Clinic. It means going outside their natural aesthetic and that, he says, is soon perceived by the onlooker as “off” (it’s why Dr Taktouk asks new filler patients to bring photos of them throughout their life).

Another mistake is not treating the temples with filler in step with the cheeks: “Proportionally, the cheeks can end up looking too wide when contrasted with sunken temples.” In some cases, he says, doctors will then over-fill the temples to balance things out, but this can result in an unintended roundness to the face.



Ruby Wax appearing on this year's I'm a Celebrity Credit: ITV/Shutterstock/Shutterstock Editorial

Yet another issue is patients or injectors fixating on nasolabial folds (nose-to-mouth lines), thinking filler in the cheeks can “lift” these, says Dr Taktouk – but all you get is chipmunk cheeks. Eyes that suddenly look teeny when a person smiles because the cheeks are pushing up against them are also a dead “overfill” giveaway, Dr Taktouk adds.

Apart from a terrible eye for proportion, the incorrect choice of filler and the wrong depth of injection are the main reasons for bad cheek work. “If you inject above the face muscles with filler that is too rigid, you have a problem: it will move upwards when you smile.”

For the right patient, in the right hands, cheek filler remains an excellent rejuvenating option, Dr Taktouk assures. “You prevent issues by treating your patient over multiple sessions using very small amounts of filler, but

also by recognising when someone doesn't need it. Although I may sometimes have to concede that patients, including celebrities, simply have a different chosen aesthetic." For the rest of us, you want a doctor who's not only highly experienced, but has no qualms about telling you "no."

How to fix it

Again injections with hyaluronidase enzyme can, often over the course of a few sessions, get rid of unsatisfactory filler results.

Bowling-ball brow

Featureless, shiny, large-looking foreheads are almost commonplace these days – but that does not make them look natural. "The most common reason for an overdone forehead is too high a dose of a wrinkle-relaxing neuromodulator [Botox is the most famous of these toxins]," says Dr Denning. There is one single thin muscle that lifts the frontalis or brow muscle, she explains.

Injecting it with a big wallop of toxin is what usually results in that totally un-moveable forehead that shines like a beacon. "One of the nice side effects of toxin is that it helps tighten pores, but done in excess it results in robotically smooth, reflective skin – not desirable in my view," say Dr Denning.

For a natural result, she says dosing should allow for the frontalis muscle to move at least incrementally. This way, the brows can move upwards and create some natural texture to the skin – no real face is entirely crease-free. If eyebrow movement is knocked out, "it can cause a flattened, heavy brow and in some cases, a hooding of the upper eyelid, making the patient look heavy and tired." Not what most of us would be going for.

How to fix it

Taken aback by your Botox? The solution is patience – it will stop working after about three months.

Not-right eyes

Both toxin and fillers are used around the eyes to make them look more youthful, but in an area this delicate, it's easy to go wrong, says oculoplastic surgeon and cosmetic physician Prof Jonathan Roos from FaceRestoration.

Aside from injecting the forehead muscle to lift the brow (as we've seen, in some cases it can have the opposite effect), another trick to lift and open the eyes is to inject the "orbicularis muscles, which encircle the eyes, so that the outer corners of the eyebrows shoot up in what is sometimes called a "Mephisto" look," says Prof Roos. "But peaked brows like this can look overdone and uncanny."

As for fillers, these have long been injected in the tear troughs just under the eyes to minimise dark circles and hollowness. But the practice is going out of style because of the drawbacks and complications, says Prof Roos.

The hyaluronic acid-based padding just under the skin can "take on a blueish tinge, it can migrate, and it can compromise lymphatic drainage in the area, leading to swollen "cushions" appearing intermittently." Tear-trough fillers make faces look heavier and bigger, says Prof Roos: "it's a too-far look that is not aesthetic."

How to fix it

They can be dissolved successfully with hyaluronidase, although you want to rely on an experienced eye specialist because "the breakdown products of filler can block lymphatics or attract water, making puffiness worse," says Prof Roos.

Lantern jaw

If someone's jaw appears increasingly more "[manly](#)", as has been the case with some mid-life celebrities recently, it's usually due to attempts to disguise jowling, says Dr Taktouk. "Filler is often used in place of more suitable treatments in this area to try and tighten and straighten the jawline," he says. Also, he adds, many women are keen on a "snatched" jowling when photomarked from the side.

jawline when photographed from the side.

The problem, he points out, is that generously filling the jaw can widen the face. “It can lead to the “[masculinisation](#)” of the jaw, where the lower third of the face ends up wider than the middle third” as opposed to the heart shape women usually most desire.

Correction can work on a case-by-case basis, Dr Taktouk says, as it’s important to know what exactly a patient has had done (often, he says, patients don’t know).

How to fix it

It usually involves dissolving the filler with hyaluronidase enzymes, but Prof Roos cautions that patients have to keep in mind that this treatment can affect their natural hyaluronic acid stores as well. Potentially, skin can be left crepey and need laser to tighten it back up.

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