



## The impact of aging on the profile of women from 60 years and older

DOI: 10.56238/isevjhv1n4-003

Receipt of originals: 10/25/2022

Acceptance for publication: 11/25/2022

**Maressa Afonso Marques**

<https://lattes.cnpq.br/7668847488156884>

Biomedical Degree in Aesthetics and Clinical Analysis

**Maria José Leonardi**

<https://orcid.org/0000-0001-5881-9930>

Medical doctor in Oncology Biomedical

**Simone Manzolli**

<http://lattes.cnpq.br/6948142168080128>

Doctor in Pharmacology Graduation professor at UnifaccampBiomedical

### ABSTRACT

The present work had as its theme the impact of aging in women over 60 years old, under the gerontological sphere in which we find ourselves, in which the stereotype of beauty has been quite widespread, the elderly bring us a questioning of how their personal perception of aging is faced in current times. This paper aimed to address the issues pertinent to the aging process in women, where we are faced with a growing population of elderly people. The methodology applied was a quali-quantitative approach with women aged 60 years or more. We approached the perception of aging and concluded that most of them are satisfied with their self-image. Possibly, living with family members must be a factor that adds to their participation in the social bond and care with self-esteem.

**Keywords:** Elderly, Aging, Skin, Beauty.

### 1 INTRODUCTION

This study was developed from the interest in issues pertinent to female beauty, seeking to analyze the impact of aging from the perspective of elderly women.

The phenomenon of aging is something natural, but it has been a concern in the Western environment in which we live.

According to data from the Brazilian Institute of Geography and Statistics (IBGE, 2021), the Brazilian life expectancy, which was 55.8 in 1960, rose to 73.1 years in 2019 for men, and 80.1 years for women.

By 2019, the number of people aged 60 and over will be 1 billion. This increase is occurring at a rapid pace and will continue to increase in the coming decades, especially in developing countries (WHO, 2005).

By 2050, the world population aged 60 and over is expected to reach 2 billion, as opposed



to 900 million in 2015. Currently, 125 million people are 80 and older. This increase in life expectancy creates opportunities for achievements such as studying, having more time with the family, and starting dormant projects. However, this possibility of living requires an extremely important factor: health. (PAHO, 2018)

According to Schneider and Irigaray, (2008) as of the second half of the 19th century, old age started to be treated as a phase of life in which there is physical decay and no social roles.

People are taking time to get older, and the aspects that have been discussed a lot these days are related to beauty, health, and quality of life.

Felix (2009), emphasizes that in this 21st century people will reach older ages.

The concern with rejuvenation has existed since ancient times, but today with the advance of medicine and the exponential growth of the cosmetic industry, concomitantly with the number of elderly people, this factor has become evident, causing a concern in contemporary civilization. Knowing optimistic aspects about aging and old age in the conception of the elderly is important for the elucidation of what corresponds to the positivity of this phase of life, taking into account that many surveys show the difficulty of the elderly to fit into this profile imposed by society.

Between the peculiar characteristics and that of the environment, in a human development process under a multidisciplinary and transdisciplinary perspective, the human being should start preparing as early as possible for the aging process (SOUZA; MIRANDA, 2015).

The unprecedented increase in life expectancy has reconsidered aspects regarding beauty, facing our reality of a senile society, in which the elderly crave for personal appreciation and dignity. Aesthetics promotes well-being, beauty, and quality of life, because in the aging phase, a decline in self-esteem may occur due to several dermatological and aesthetic alterations. Amidst a multitude of aesthetic treatments, it is possible to bring the elderly a more holistic vision of health care, beauty, and aesthetics.

The aging process and its perspectives are absolutely distinct among individuals, being characterized by their life experiences (LIMA, 2010).

The biomedical professional encompasses a multidisciplinary approach that can encompass both health and aesthetics. In view of this reality, this research is of an academic nature, addressing current issues to deepen studies correlated to longevity, self-care, and health of the elderly, aiming at knowledge for health and aesthetic professionals.



## 2 OBJECTIVE

The objective of this research was to analyze, through a questionnaire, the perception of the impact of aging on women over 60, evaluating aspects of beauty, health, and well-being of the participants.

## 3 METHODOLOGICAL PROCEDURES

As for the form of approach, this study was characterized as a qualitative-quantitative field research. The main factor that led to the research theme was the fact that I work in the field of Aesthetics and am in direct contact with this theme.

Within a diverse population of women, only those who fit the research requirements were selected.

Data collection was carried out by sending questionnaires to the participants' e-mail or WhatsApp, and this method of data collection can be classified according to Mattar (2008) as a self-completed questionnaire, in which the respondent reads the instrument and answers directly without the intervention of the interviewer. Questions were also used to know the profile of the respondents such as age, education, number of children, among others.

The total number of questions for the theme evaluation were (13) thirteen, based on the nominal scale, which is categorized according to Mattar (2008) as a scale in which the data serves only to identify or categorize data about people, objects, or facts.

A period of fifteen days was stipulated for receiving the responses and the data was used for analysis.

The inclusion criteria were: female, living in the city of Campo Limpo Paulista - SP, age 60 years or older.

The research project was submitted to the Research Ethics Committee of the Unifaccamp University of Campo Limpo Paulista for evaluation and appreciation, according to Resolution no. 466/2012 of the National Health Council, and was approved with CAAE no. 39371220.0.0000.5397 under opinion no. 4,372,526.

The results were presented as percentages and the correlation data analysis test was applied.

## 4 RESULTS

The research was carried out through a questionnaire with objective and descriptive questions. Fifteen women participated, with ages ranging from 60 to 80 years old, with a mean age of  $66.2 \pm 1.4$  p.e. Regarding the number of children, the mean number of children was  $2.6 \pm$

0.29 p.e. As for schooling, the predominance was complete elementary school 66.7% and in marital status the predominance was married 66.7%, as shown in Table 1.

Table 1: Sociodemographic characteristics of the Research Participants. Campo Limpo Paulista-SP, 2021

|                           | <b>Variables</b>      | <b>N</b> | <b>%</b> |
|---------------------------|-----------------------|----------|----------|
| <b>Age</b>                |                       |          |          |
| 60  -<br>65               |                       | 8        | 53,3     |
| 65  -<br>70               |                       | 3        | 20       |
| 70  -<br>75               |                       | 3        | 20       |
| 75  -<br>80               |                       | 1        | 6,7      |
| <b>Number of children</b> |                       |          |          |
|                           | Four or more children | 4        | 26,7     |
|                           | Three children        | 4        | 26,7     |
|                           | Two sons              | 4        | 26,7     |
|                           | One child             | 3        | 20       |
| <b>Marital Status</b>     |                       |          |          |
|                           | Married               | 10       | 66,7     |
|                           | Widow                 | 3        | 20       |
|                           | Divorced              | 2        | 13,3     |
| <b>Education</b>          |                       |          |          |
|                           | Elementary School     | 10       | 66,7     |
|                           | Higher Education      | 3        | 20       |
|                           | High School           | 2        | 13,3     |

The results represent the ages, number of children, marital status and education of the research participants. N=15, 95% confidence level.

According to lifestyle habits (Table 2), the great majority (80%) had some hobby, described as: reading (33.3%), sports (25%), crafts (16.7%), gardening (16.7%), and decorating (8.3%).

Table 2: Lifestyle habits.

|  | <b>Yes%</b> | <b>No %</b> |
|--|-------------|-------------|
| Do you have any hobby/activity?              | 80          | 20          |
| Are you taking any medication?               | 73,3        | 26,7        |
| Do you have periodic exams?                  | 73,3        | 26,7        |
| Do you practice physical activity?           | 40          | 60          |
| Do you participate in senior citizen groups? | 13,3        | 86,7        |
| Do you use legal or illegal drugs?           | 6,7         | 93,3        |

N=15, confidence level 95%. Campo Limpo Paulista-SP, 2021.

It was also possible to observe in Table 2 that 73.3% took some medication and performed periodic exams. Of the participants, 60% did not have the habit of practicing physical activity. As

for the participation in senior groups, 86.7% did not have this habit and 13.3% attended these groups.

When asked whether they used licit or illicit drugs, 6.7% of the participants reported using cigarettes and alcoholic beverages.

Table 3: Home Living.

|   | %    |
|---|------|
| Spouse  | 60   |
| Spouse, children, grandchildren and sons-in-law | 26,7 |
| Alone   | 13,3 |
| Total   | 100  |

Confidence level 95%. Campo Limpo Paulista-SP, 2021.

Regarding the people with whom they lived (Table 3), 60% reported living only with their spouse, 26.7% lived with more family members (spouse, children, grandchildren, and son-in-law), and 13.3% lived alone.

Table 4: Occupations.

|                   | N  | %    |
|-------------------|----|------|
| From Home         | 6  | 40   |
| Retired           | 5  | 33,3 |
| Other occupations | 4  | 26,8 |
| Total             | 15 | 100  |

Confidence level 95%. Campo Limpo Paulista-SP, 2021.

As for occupations (Table 4), 40% were housewives, 33.3% were retired, and 26.8% had other occupations, such as teacher, merchant, caregiver, and housekeeper, equally distributed.

Table 5: Diseases.

|              | N | %    |
|--------------|---|------|
| Hypertension | 4 | 57,1 |
| Diabetes     | 2 | 28,6 |
| Gastritis    | 1 | 14,3 |
| Total        | 7 | 100  |

When approached about diseases (Table 5), of the 15 participants, 33.3% reported having one or more diseases. According to the predominance of reported diseases, taking into account that some participants had more than one disease, hypertension was predominant with 57.1%, diabetes with 28.6%, and gastritis with 14.3%.

Table 6: Self-perception of aging.

|   | Yes % | No % |
|---|-------|------|
| When you look in the mirror do you like what you see?                       | 80    | 20   |
| Dealing with technological trends, is it a problem?                         | 60    | 40   |
| Do you use any cosmetics on your face or body to prevent aging(anti-aging)? | 60    | 40   |
| Would you do any non-invasive aesthetic procedure?                          | 46,7  | 53,3 |
| Do you feel old?  | 33,3  | 66,7 |
| Would it change anything about you?   | 33,3  | 66,7 |
| Did age stop you from doing something?                                      | 20    | 80   |
| Would you do any invasive aesthetic procedure, surgery?                     | 6,7   | 93,3 |
| N=15, confidence level 95%. Campo Limpo Paulista-SP, 2021                   |       |      |

N=15, confidence level 95%. Campo Limpo Paulista-SP, 2021

In Table 6, when self-perception regarding aging was analyzed, it was shown that 80% of the participants were happy with their image. As for technology, 60% reported having difficulty with technological trends.

60% of the participants were concerned with the aging effect and used facial and body cosmetics to prevent the action of time (anti-aging). Regarding the performance of aesthetic procedures, 46.7% would perform non-invasive aesthetic procedures, and 6.7% would perform some invasive (surgical) aesthetic procedure.

Still regarding the self-perception of aging, 33.3% said they felt old, 66.7% disagreed. Of the participants, 20% reported that age prevented them from doing something.

By looking at Table 7, 53.3% of the participants began to experience aging at age 60 or older, followed by 46.7% who began to perceive aging at age 50.

Among the aforementioned regions, 53.3% perceived greater aging in the face region, 26.7% in the hand region, 13.3% in the neck region, and 6.7% in the body.

## 5 DISCUSSION

Lima (2010) states that the aging process occurs day after day, from the moment we are born and refers to a biological process called senescence, which certainly cannot be avoided. However, the way we age can be determined by several factors, under an inter-individual heterogeneity in a biopsychosocial context, following the definition of "old" by different interpretations.

In a review on skin aging, Ruivo (2014) describes that it can be intrinsic or extrinsic. Intrinsic aging is characterized by the natural wear and tear of our cells over the years, under the influence of genetic and hormonal changes, and extrinsic aging is related to lifestyle habits and external factors such as solar radiation, smoking, and pollution, which affect each individual uniquely.



As for intrinsic aging, we saw that with regard to diseases, 33.3% of the participants had some pathology, showing the early importance of health care. The intrinsic manifestations can also be observed in the skin, through some aspects of elasticity, thickness and tone, and, in view of the above, 53.3% of the participants felt the aging in the face region.

Regarding the extrinsic and lifestyle habits, all participants in this research live outside large urban centers, staying away from pollution and smoking since 93% of them do not use drugs, which corroborates with a later aging and the perception of not feeling old.

According to Agostini et al. (2013) in a primitive culture, among the people who do not belong to the standard of beauty are people with diseases, elderly and albinos. Today's women are called by old stereotypes, in which characteristics such as seduction and the gift of marriage and motherhood are pointed out. Seen from a feminist point of view, it puts into question the acceptance of the differences of how they are presented in today's society (LACERDA; LORIANI; FILHA, 2014).

In the survey it was observed that 100% of the participants had children and have already gone through marriage, fulfilling one of the social stages.

In antiquity, during the Hellenistic period, to be older was to be considered the owner of wisdom, gifted with great experience and it was his responsibility to pass it on to future generations. The bond that united old age and wisdom seems to be totally broken in current times. (PAULA, 2016)

In Classical Greece where beauty and youth were paramount, elders were left aside (LIMA, 2010).

The stereotype that age is a burden significantly affects people's lives, distancing them from social life and causing extreme suffering, which can even lead to depression. The act of aging is a privilege that, when neglected, is a denial of existence itself, for we will all go through the same path. (SBGG, 2021)

According to self-perception of aging, we observed that age may have been a causal factor preventing 20% of the participants from accomplishing something in life. Dealing with technological trends is a difficulty for 60% of them. It is noted that 80% live with family members who can help with technological advances, and only 20% have a college degree.

According to Minayo and Coimbra Jr. (2011), the estimated life span of human beings is currently 90 to 95 years, but in the coming decades it is possible that it will increase to 120 to 130 years, challenging genetics and biotechnology to allow reaching this age independently and in good health. Aging has been an issue in the economic sector because of the high costs of social



security, health promotion, and care for the elderly. This increase in life span historically throughout the world brings with it a number of diseases, such as cardiovascular and joint diseases, diabetes mellitus, hypertension, Alzheimer's, Parkinson's, as well as depression, anxiety, and cognitive decline.

In view of the research, 60% of the participants are sedentary, highlighting the pre-existing pathologies of hypertension and diabetes, described by them. Decompensated hypertensive and diabetic patients generate determining factors for the Biomedical Aesthetician to investigate more deeply and to carry out any aesthetic procedure. To preserve the health of the patient, it is necessary to evaluate the situation, and many times the aesthetic act should not be performed.

To emphasize the stages of the life cycle Peter Laslett (1989) redefined them as childhood being the first age, adulthood in second age, the new period phase to follow in third age and old age would be the fourth age, being the later phase. In this way, third age would be personal satisfaction. The fourth age would be the dependence and proximity to the closing of the life cycle. (LASLETT, 1989, p. 213 apud SILVA, 2008 p. 803)

Dezidério and Machado (2019) point out that even in the face of the inevitable change of aging, many cannot cope with this phase that requires personal and social adjustment, generating concern about maintaining their independence and a quality life.

In this contemporary scenario where the new and the beautiful are always in evidence, representing the old as something outdated and out of fashion, gerontophobia is usually noticed mainly when one yearns to fulfill all areas of life which have their personal importance throughout their life course. Generalized Anxiety Disorder (GAD) is the most common type to affect older people, being characterized by excessive worry, and may present muscle tension or fatigue, irritability or difficulty concentrating (SEDS, 2020).

Etharism is still witnessed, generating a real negative emotional impact, and devaluing the elderly, who in turn continue to seek their place in this society, so as not to become a problem.

According to Epel and Blackburn (2018), aging is a dynamic process that can be accelerated or slowed down, and in some respects even reversed. Although we have two people with the same chronological age, both can undergo the aging processes differently.

According to the survey, each participant, within their individuality, felt aging in a different way, 53.3% perceived aging only after 60 years old, while 46.7% perceived it after 50 years old.

The beauty that a woman sees in old age is linked to how she interprets this whole process that is occurring in her body and in this phase of her life (FIN; PORTELLA; SCORTEGAGNA, 2017).



We also observed a satisfaction of the participants with their self-image, where 80% of them feel good about themselves in the mirror.

According to Forbes (2020) Brazil is the 4th largest beauty and personal care market in the world, behind the United States, China, and Japan.

It was from the 60's, where women who did not have access to cosmetics for beautification were seen by societies as careless and sloppy. However, women who took care of themselves conveyed an image of being happy and successful. (AGOSTINI et al., 2013)

As seen in the results of this study, 60% of the participants are concerned with their aesthetics and use cosmetics on their face or body in order to prevent the signs of aging and generally feel good about themselves.

When it comes to seeking rejuvenation in the first instance through non-invasive methods, is to adopt the practice of dyeing the hair white and going for walks in order to lose weight. A healthy lifestyle is a considerable factor in favoring rejuvenation. Assuming that a woman seeks rejuvenating treatments to fit the social charges, the woman is the one who notices and charges another woman for rejuvenation.(CASTRO et al., 2016)

This feeling of belonging in this age of consumerism often consists of the incessant search for beauty standards. Surgical aesthetic procedures are performed in order to "brake" aging so that its age is not explicit.(PAIXÃO; LOPES, 2014)

Non-invasive methods are also very sought after and among the most requested are botulinum toxin and hyaluronic acid filling. (SBCP, 2017)

In the research, it was possible to observe that the adherence of the participants to non-invasive aesthetic treatments was represented through 46.7%, higher when compared to the adherence to invasive aesthetic procedures (6.7%). Still emphasizing the concern with image, it was observed that 33.3% are not happy with their image and would change something about themselves.

Minayo and Coimbra Jr. (2011) state this group highlighted as "senior citizens" as a potential group for consumer goods, culture, leisure, beauty, health and aesthetics determining this economic market as a very promising one.

According to Goldenberg (2018) everything starts to get better after the age of 50 when the happiness curve starts to rise. From this age on, women start to feel much freer and happier. The author cites the term "existential cleaning" as being one of the preponderant reasons, because at this maturity of life they are able to better define their priorities. And it is then at the age of 60 that they feel the fullness of freedom. According to our results, 40% are housewives, 33.3% are retired,



and 26.8% of the participants are active in the labor market.

We observed in the results, that 80% of the participants do something they like according to their hobbies, and there is quality time for themselves.

One should consider the environment in which one lives, the social aging that is related to how society deals with the elderly, the expectations and roles assigned to them, in a psychosocial context when some of their cognitive and physical functions no longer respond as before (SCHNEIDER; IRIGARAY, 2008).

According to the field research conducted by Glidden et al. (2019) in which the insertion of the elderly in senior groups has a significant role in health and quality of life, greatly influencing the social context. Being the current challenge to maintain active life and with quality, even despite the losses characteristic of aging.

It was possible to notice that a small portion of the participants (13.3%) attend senior citizen groups, attributing the importance of health promotions and attention focused on the elderly in this municipality.

According to Fernandes and Garcia (2010), the elderly characterize old age as something really bad, fear of dependency, fear for the prejudice.

The sociodemographic characteristic covered predominantly the age group 60 to 65 years old, married, and with more than one child.

Regarding lifestyle habits, most of them have some hobby, do not smoke, do not drink, and feel satisfied with their self-image.

It was possible to notice that the same amount of participants who reported using some medication are also the same ones who perform exams periodically. This clinical periodicity tends to be due to the need to use medications. On the issue of physical activity, the number that has this habit proved to be reduced, requiring an awareness, since less than half perform physical activity.

In the aesthetic bias, the perception of aging occurred mainly in the face, with a concern for beauty care. Reiterating that most make use of cosmetics for the prevention of aging.

When it comes to invasive and non-invasive aesthetic procedures, adherence was greater for the non-invasive ones, emphasizing that the non-surgical methods were the ones of greater choice by the participants.

With regard to the participation of elderly groups, it is noted that this class is still poorly attended, and that more preventive and health promotion measures are needed, which make the elderly population aware of the importance of personal care.

During this phase of life the family bond is very important, where family support is a great



ally to avoid prejudice, and disorders such as depression, anxiety, and panic syndrome.

Keeping the body moving, being a thinking head, the body acting, and the self-esteem high, in this way old age finds no place.

According to the age range and the number of participants, it was not possible to measure an expressive perception of aging.

## **6 CONCLUSION**

We conclude through this research that skin aging is a global phenomenon and that it will occur at some point in life, but the way we will age is tied to our behaviors and lifestyle habits.

In the perception of aging it is concluded that the great majority is satisfied with their self-image and that possibly living with family members is a factor that adds to their participation in the social bonding and care with self-esteem.



## REFERENCES

- Agostini, a. Et al. Resenha: beleza e plasticomania. Universidade do planalto catarinense. Santa catarina, 2013.
- Beleza, c. M. F.; soares. S. M. A concepção de envelhecimento com base na teoria de campo de kurt lewin e a dinâmica de grupos. Revista ciência & saúde coletiva, belo horizonte, p. 3141-3146. 2019.
- Castro, a. Et al. Representações sociais do envelhecimento e do rejuvenescimento para mulheres que adotam práticas de rejuvenescimento. Psico. Porto alegre, 47(4), 319-330. 2016.
- Dezidério, l. S. M.; machado, a. K. C. Vi congresso internacional de envelhecimento humano. Campina grande, editora realize, 2019.
- Epel, e.; blackburn, e. O segredo está nos telômeros: receita revolucionária para manter a juventude e viver mais e melhor, 2ª ed. São paulo, planeta, 2018.
- Felix, j. S. Economia da longevidade: uma revisão da bibliografia brasileira sobre o envelhecimento populacional. Puc. São paulo, 2009.
- Fernandes, m. D. G. M.; garcia, l. G. O sentido da velhice para homens e mulheres idosos. Saúde e sociedade, são paulo, 19(4), 771-783. 2010.
- Glidden, r. F. Et al. A participação de idosos em grupos de terceira idade e sua relação com satisfação com suporte social e otimismo. Boletim academia paulista de psicologia. São paulo, v.39, nº 97, p. 261-275. 2019.
- Goldenberg, m. A invenção de uma bela velhice: em busca de uma vida com mais liberdade e felicidade. Revista bras. Geriatr. Gerontol. Rio de janeiro, V.21 nº.5. Sept./oct. 2018.
- Lacerda, g.; loriany, s.; filha, e. A. O. A exposição e idealização da mulher em revistas segmentadas x feminismo. Revista dito efeito, curitiba, v, v.5, n. 6, jan.-jun. 2014.
- Lima, m. P. Envelhecimento(s): estado da arte. Imprensa da universidade de coimbra. Portugal, 2010.
- Mattar, f. N. Pesquisa de marketing: metodologia, planejamento. 6ª ed. São paulo, atlas, 2008.
- Minayo, m. C. S.; coimbra jr, c. E. A. Antropologia, saúde e envelhecimento. 2ª ed. Rio de janeiro, fiocruz, 2011.
- Paixão, j. A.; lopes, m.f. Alterações corporais como fenômeno estético e identitário entre universitárias. Revista saúde em debate, rio de janeiro, v. 38 (101), 267- 276. 2014.
- Paula, m. F., os idosos do nosso tempo e a impossibilidade da sabedoria no capitalismo atual. Revista serv. Soc. Soc., são paulo, n. 126, p. 262-280, maio/ ago. 2016.
- Ruivo, a. P. Envelhecimento cutâneo: fatores influentes, ingredientes ativos e estratégias de veiculação. Porto, 2014.



Schneider, r. H.; irigaray, t. Q. O envelhecimento na atualidade: aspectos cronológicos, biológicos, psicológicos e sociais. Campinas, 2008.

Silva, I. R. F. Terceira idade: nova identidade, reinvenção da velhice ou experiência geracional, rio de janeiro, v.18, n.4, pp.801-815. 2008.

Souza, c. S.; miranda, f. P. R. Envelhecimento e educação para resiliência no idoso. Educação & realidade, porto alegre, v. 40, n. 1, p. 33-51, jan./mar. 2015.

Estatísticas Sociais. IBGE, 2021. Expectativa de vida dos brasileiros aumenta 3 meses e chega a 76,6 anos em 2019. Disponível em: <https://agenciadenoticias.ibge.gov.br/agencia-noticias/2012-agencia-de-noticias/noticias/29505-expectativa-de-vida-dos-brasileiros-aumenta-3-meses-e-chega-a-76-6-anos-em-2019> (Acesso em: 22/03/2021)

Folha informativa. Organização Pan-Americana da Saúde (OPAS), 2018. Disponível em: [https://www.paho.org/bra/index.php?option=com\\_content&view=article&id=5661:folha-informativa-envelhecimento-e-saude&Itemid=820](https://www.paho.org/bra/index.php?option=com_content&view=article&id=5661:folha-informativa-envelhecimento-e-saude&Itemid=820) (Acesso em: 23/03/2021)

Secretaria de Estado de Desenvolvimento Social (SEDS), Governo do Estado de Goiás, 2020. Dicas para ajudar a pessoa idosa a vencer a ansiedade na quarentena. Disponível em: <https://www.social.go.gov.br/noticias/335-dicas-para-ajudar-a-pessoa-idosa-a-vencer-ansiedade-na-quarentena.html#:~:text=O%20Transtorno%20de%20Ansiedade%20Generalizada,irritabilidade%20ou%20dificuldade%20de%20concentra%C3%A7%C3%A3o.> (Acesso em: 22/03/2021)

Sociedade Brasileira de Cirurgia Plástica (SBCP), 2014. Disponível em: <http://www2.cirurgiaplastica.org.br/2014/07/29/de-acordo-com-a-isaps-brasil-lidera-ranking-de-cirurgias-plasticas-no-mundo/> (Acesso em: 27/03/2021)

Sociedade Brasileira de Cirurgia Plástica (SBCP), 2017. Disponível em: <http://www2.cirurgiaplastica.org.br/2017/07/03/idosos-nao-abrem-mao-da-vaquidade-e-lotam-consultorios-medicos/> (Acesso em: 27/03/2021)

Sociedade Brasileira de Geriatria e Gerontologia (SBGG), 2021. Disponível em: <http://www.sbgg-sp.com.br> (Acesso em: 27/03/2021)

WEBER, Mariana. Brasil é o quarto maior mercado de beleza e cuidados pessoais do mundo, Forbes, 04 de julho de 2020. Disponível em: <https://forbes.com.br/principal/2020/07/brasil-e-o-quarto-maior-mercado-de-beleza-e-cuidados-pessoais-do-mundo/> (Acesso em: 28/03/2021)



## ANNEX A - MODEL OF DIRECTED INTERVIEW IDENTIFICATION DATA

Name:

Age:

Education:

Marital Status:

If widowed, for how long?

Do you have children? How many? Occupation:

Who do you live with?

### ANAMNESIS

Are you taking any medication?

Do you use any legal or illegal drugs? Any illnesses?

What illnesses do you have?

Do you perform periodic exams (check-ups)? Do you practice physical activity?

1.

When you look in the mirror, do you like what you see?  Yes  No

2.

Would you change something about yourself?  Yes  No

3.

Would you perform any non-invasive aesthetic procedure?  Yes  No

4.

Would you do any invasive aesthetic procedure, surgery?  Yes  No

5.

Do you feel old?  Yes  No

6.

When did you realize that you were getting older?

before 40 years old

at 40 years old

at 50 years old

from 60 years old on

7.

In which region was aging noticeable?  Face  Body  Hands  Neck

8.

Has age kept you from doing something?  Yes  No

9.

Dealing with technological trends, is it a problem?  Yes  No

10.

Do you have any hobby/activity?  Yes  No



11.

If you have a Hobby / Activity, where does it fit in?

Sports  Handicrafts  Reading

Other:

12.

Do you use any cosmetics on your face or body with the Anti-Aging / Anti-Aging function?

Yes  No

13.

Do you participate in any third age group?

Yes  No