

The Subtle *Refresh*

Dr. Anthony Berlet on Modern Aesthetics, Balance, and Looking Like Yourself.

BY ERIKA KATZ



THE SUMMER BOOK

HAMPTONS SOCIAL: THE SUMMER BOOK JULY 2026

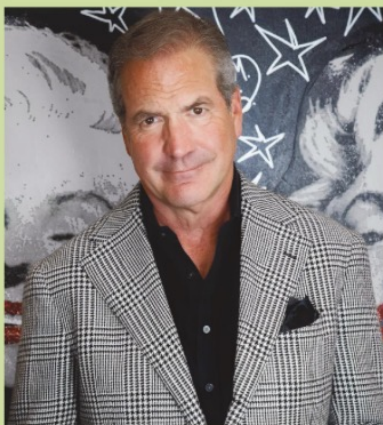


Hamptons Social: The Summer Book

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BEAUTY IS RARELY ABOUT DRAMATIC CHANGE. The best results are often the ones you cannot quite identify. Premier plastic surgeon Dr. Anthony Berlet approaches aesthetics with that mindset, focusing on small, precise adjustments that enhance rather than transform.

What creates that refreshed look people are looking for today?

DR. ANTHONY BERLET: The refreshed look comes from restoring structure, not changing identity. As the face ages, support gradually diminishes. Skin loosens, fat shifts downward, and volume is lost in key areas, creating a hollow or tired appearance. The jawline and neck line definition is well.

A natural result comes from lifting and repositioning the deeper layers of the face rather than simply tightening the skin. We pair that with volume restoration, often through fat grafting. When that balance is achieved, patients still look like themselves, just more rested, defined, and vibrant.

What subtle changes make the biggest difference?

AB: Often, it comes down to restoring contours that soften over time. A sharper jawline, a smoother transition between the cheek and lower eyelid, and a more defined neckline can elevate the entire face without drawing attention to a specific procedure.

Every patient requires a tailored approach. In some cases, neuromodulators or conservative fillers can make a meaningful difference. In others, procedures like liposuction of the neck or fat grafting around the eyes and temples help reestablish structure.

Aging is not just about sagging. It is also about volume loss. When structure, skin quality, and volume are balanced, the result looks natural and refreshed.

Do people who age well typically take a gradual approach or a more significant one all at once?

AB: Patients who age gracefully tend to take a long-term approach, starting with skincare and conservative treatments, before incorporating procedures that restore deeper structure over time.

A good example is my wife, Kerry. She was consistent with skincare early on. In her late 30s, she began neuromodulators and fillers. We eventually moved away from filler in favor of fat grafting, which provides a more natural, lasting form of volume restoration. In her mid-40s, she addressed texture and sun damage with skin resurfacing. She maintained her appearance with upper blepharoplasty, fat grafting, and subtle body contouring. Now, at 51, she recently underwent a facelift, brow lift, and lip lift. The result reflects years of thoughtful, staged care rather than a single dramatic change.

You describe facelift surgery in three categories. How do they differ?

AB: Maintenance facelifts are typically done in the mid-40s to early 50s, when a patient still looks good but wants to preserve their structure.



By the mid-50s to early 60s, the approach shifts to a rejuvenation facelift, addressing more visible aging and restoring how a patient looked 10 to 15 years earlier. From the mid-60s onward, a revision facelift focuses on refining prior surgery or addressing continued aging. In every case, the goal is the same: a natural re-fresh that aligns with the patient's stage of life.

How do you think about fillers versus fat grafting?

AB: Fillers have a role, but they're limited. Aging is structural, not just volume loss, so simply adding filler often falls short and, when overdone, can distort natural contours.

I completely avoid using filler in the under eye area. It's one of the most delicate regions of the face, and filler there too often leads to swelling, puffiness, and discoloration rather than a clean, refreshed look. Fat grafting uses the patient's own tissue. It integrates seamlessly, allows for precise contouring, and improves skin quality over time serving as a powerful delivery system for stem cells, making it both restorative and regenerative.

How do you think about aging over time, especially when balancing structure, skin, and delicate areas such as the neck and chest?

AB: As patients age, it becomes about addressing all layers of aging in a balanced way. There is no single

right age, but there is a strategic way to approach it. Some patients opt for maintenance, addressing changes early with smaller procedures, while others wait and pursue more comprehensive rejuvenation. In general, I advise not waiting until changes are extreme. A facelift resets the clock, but it does not stop aging, and it is easier to maintain or restore than to reverse later on.

The neck and décolleté are often overlooked, but they can reveal age quickly. Treatment typically involves a combination approach. Laser resurfacing and skin-stimulating treatments improve texture and pigmentation, while skincare and sun protection help maintain results. When there is significant laxity, a face and neck lift can restore definition.

Technique also plays a major role. Incisions are placed within the hairline and natural creases so they are not visible, and preserving the hairline is critical to keeping results looking natural.

When structure, skin quality, and volume are in harmony, the result is refreshed without looking operated on. Ultimately, the goal is not to erase age. It is to restore harmony between the face, neck, and chest so everything ages consistently.

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Photos courtesy of Dr. Anthony Berlet.

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