

Understanding cancer and the cancer patient can be very important for the esthetician.

Hundreds of thousands of people in this country will be diagnosed with some form of cancer this year. Studies indicate that as many as one third of all Americans will at some point in their lives develop cancer. The probability of developing cancer increases with age. Those in their 20s have less than half the chance of developing cancer as those in their 30s, while those in their 40s are twice as susceptible. This pattern continues with each passing decade, thereby doubling the risk. Because so many people will fall victim to this disease, understanding the special needs of the client coping with the side effects of cancer therapy is an important part of esthetics.

The facial client with cancer

Three to four months after being diagnosed with cancer, most patients are in the process of redefining their lives, striving to cope with the medical treatments they must endure and trying to manage a host of emotions that accompany a serious diagnosis. A client with cancer will probably not be prepared for any really drastic physical changes during this period and will not want unrealistic promises or cosmetic gimmicks from their beauty professional. What your client with cancer will need, however, is a few simple suggestions on how to combat the changes in their skin caused by the side effects of cancer therapy. Never do more than your client wants to do, or you

could sabotage an otherwise admirable effort which ultimately could result in your client feeling even more defeated about his or her situation than before the session started. The esthetic treatment should work for and not against the client. The information contained in this article will offer you some insight into what you can specifically do for your clients who are either about to undergo cancer therapy, in the process of being treated, or in the recovery stage.

Understanding cancer

Cancer is defined as a group of diseases which are due to the uncontrolled growth of cells in one or more of the body's organs or tissues. Cancer may affect any body tissue. The cell is the fundamental unit of the body. The human body is made up of cells organized into various organs or tissues, i.e., skin, muscle, bone, blood, glands, etc. These tissues are composed of special cells that conduct specific functions. Inside every cell is a nucleus that contains chromosomes. In the body, there are 22 sets of what is referred to as "regular chromosomes" and one set of "sex chromosomes." Each chromosome contains several thousand genes. The chromosomes and genes are comprised of DNA (deoxyribonucleic acid). It is the DNA that contains the information required for the cell to perform its function.

Cells reproduce by splitting in half to create two new cells. As this process occurs, the DNA makes a copy of itself to form a nucleus for each of the two cells. Healthy cells reproduce in an ordered way, and coordinated with the cells around them, perform their specialized tasks. Cancer cells function independently and so do not contribute to the function of the affected organ. They often reproduce at a faster rate than

by preventing the affected organ from functioning normally. Cancer cells may also spread from the original organ to other organs. This spread is called metastasis. These abnormal cells are referred to as malignant cells. The malignant cells are extremely harmful because they invade and injure vital organs.

The diagnosis of cancer

It is very important that cancer is diagnosed as soon as possible because early detection ensures a better chance of survival. If a cancer is suspected, tests are performed. Thrx may include: microscopic examination of tissues obtained via a biopsy, a cytology test (a microscopic examination of the cells obtained from superficial or internal Lesions like a pap smear), imaging techniques (X-rays). chemical testing (chemicals are used to reveal the presence of substances indicative of cancer, i.e., blood in feces, high levels of a certain enzyme in the blood). or directly looking in an organ (endoscopy in which a tube with a viewing lens is passed into the organ to examine it).

Therapy for cancer

Cancer therapy, at present, could mean surgery, chemotherapy, radiation therapy, or all three. While most estheticians are familiar with some of the effects of cancer treatment—hair loss, for example, many more may be less so with the effects of the other arms of therapy. For instance, cancer surgery, which includes many procedures, may alter body function and feeling. The major types of operations include: skin and muscle grafts, radical surgery and ostomies and venous access catheters.

Radiation therapy

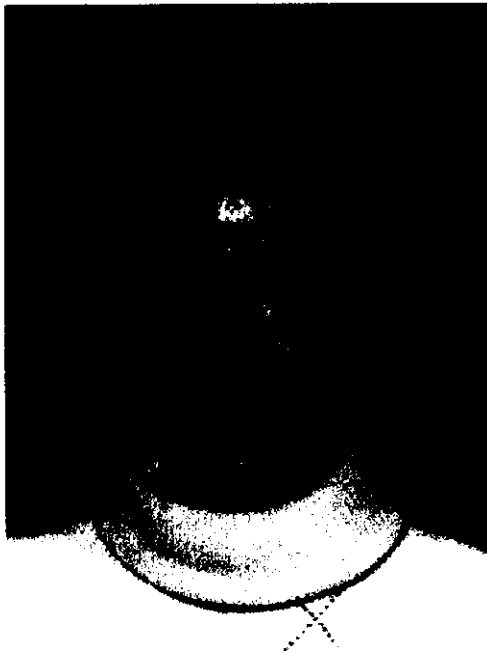
Radiation will cause some measure of local skin tanning and fibrosis or thickening. The local blood vessels—primarily the smaller ones—decrease in number and have difficulty repairing damage to their walls. This poor repair can lead to the formation of tiny collections of small vessels called telangiectasia that appear like little red stars on the skin. These are very fragile and likely to bleed with abrasion. This loss of adequate blood supply thins the skin and increases the likelihood of infection in the area because oxygen, nutrients, and the white blood cells are unable to reach the area. Over time, some rare patients may even develop skin ulcerations because of this effect.

Chemotherapy

Chemotherapy and immunotherapy refer to those drugs or immunologically active agents that are given to the patient to stop the growth of cancer cells. There are now a large number of such drugs available to the patient and each one has a different set of adverse side effects with implications for skin care. Chemotherapy, in general, does its work by preventing the growth of cancer cells because of damage done to the DNA or the metabolic factories of the cell. Normal cells with rapid growth are also affected by these agents, but are more able to overcome and repair the damage these drugs cause. Therefore, the damage done is greater to the cancer cells and the balance between the potential damage to the cancer cells versus the rate of repair of damage to normal cells is the basis for the doses of these drugs that are given to the cancer patient. Also, the particular side effects of the drugs on normal cells are matched so that in two or three drug treatments, the side effects of the drugs used will be heaviest in different areas. The normal body cells that are the most affected by chemotherapy are those whose rate of growth are the highest. Therefore, hair growth on the body, the lining of the gastrointestinal tract, the skin in general, and especially the cells of the bone marrow that make the red cells, white cells, and platelets are affected by chemotherapy.

The last effect on the bone marrow is exceptionally important as the risk for infection among patients with low white cell counts can be extremely high. It can be so high that toothbrushing or washing the skin with a rough cloth are temporarily forbidden. It is always important to know what a patient's counts are as white blood cell counts below 2000/mm³ or platelet counts below 50,000/mm³ can be associated with infection or bleeding from otherwise seemingly innocuous skin care. Estheticians should check with physicians for guidelines about the level of "counts" for which they should exercise caution. The need for good skin integrity with the low white counts is even more accentuated where cracking of the skin can lead to infection. It is quite possible with cracks in the skin and low white cell counts to introduce a serious infection not only into the skin but also into the bloodstream. For this reason, constant skin care to prevent dryness and special efforts to keep any product used in professional treatments free of contamination is extremely important.

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Cancer patient's face before esthetic treatments.



Cancer patient's face after esthetic treatments.

The effect of drug therapy on the skin

The particular effects of any one drug on any one patient can vary widely, but the side effects can be classed as follows:

- Acne-type rash and the development of thin skin and stretchmarks on the skin
- Skin darkening
- Skin scaling
- Photosensitivity (burning of the skin with exposure to the sun is more common simply because of thinning of the epidermis, but some drugs heighten the sensitivity to the sun even more, producing severe sunburns with limited exposure)
- Moisture loss and severe dryness of the skin
- Hypopigmentation (lack of pigment)
- Erythema (redness)
- Edema (swelling)

Note: Your client's reaction will vary depending on the types of medication and therapy he or she is being treated with. Most of these side effects will disappear within a four- to six-week period after his or her last cancer treatment.

Many patients undergoing radiation or chemotherapy treatments, regardless of their skin type, experience some level of surface skin dryness. Some patients even develop open sores. If your client experiences dryness that is this severe, recommend that he or she seek medical assistance right away because an open sore could easily become infected.

Skin care treatments and facial preparations

As long as the client's physician does not object, there is no reason why he or she cannot have a professional skin care treatment. A professional facial that includes a massage can help soothe surface dryness, improve circulation, and restore color tone to the client's complexion. Facials can also relax patients and help to relieve some of their stress. Appointments, regardless of the esthetic service that is to be performed, should not be scheduled for clients undergoing cancer therapy for a week to two weeks after their last chemotherapy treatment, and not until

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By Karen

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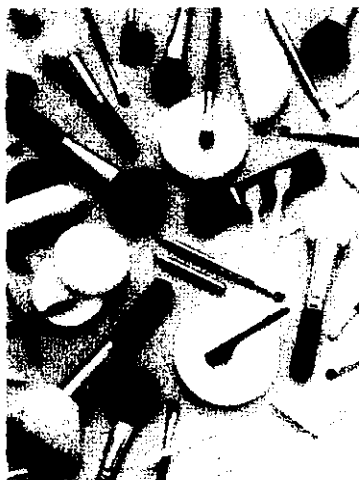
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his or her white blood cell count recovers. Because cancer patients are so susceptible to bacteria, all products used in skin care treatments must be as bacteria-free as possible. The best way to ensure that your client will not be at risk is to only use skin preparations that are packaged in tubes.

Recommending at-home skin care

The following recommendations may be made to your client for skin care on a daily basis. Suggest only mild, nongreasy, fragrance-free, sensitive skin care products. Advise your client not to redip into his or her cosmetic containers. To prevent cross-contamination, recommend that the client only use preparations that are packaged in tubes.

Keep your client's skin care regimen simple—the least amount of products he or she has to use, the less likely a negative skin response. There are a variety of effective products available, both cosmetic and dermatologic. A cleanser, a gentle toner, and a moisturizer, along with sunscreen or sunblock with an SPF of 15 or more is all your client really needs. Cleansing aids such as washcloths or complexion brushes are too rough and therefore, should not be used on sensitive skin because they will cause irritation.

To learn more about the esthetic treatments for cancer patients and about medical esthetics, you may order *Clinical Cosmetology: A Medical Approach to Esthetic Procedures* by Victoria Rayner. Call Milady Publishing at (800) 836-5239. ■



Victoria Rayner

Victoria L. Rayner, Dermatology Associate at the University of California Medical School, San Francisco, is the director of five camouflage therapy clinics, all of which are located in teaching hospitals. She is the owner of the

Advanced Skin Care Training Center which provides advanced clinical cosmetology programs for estheticians and nurses who wish to work in a medical setting.

Ms. Rayner has devoted the past four years to writing the first textbook on clinical cosmetology, entitled *Clinical Cosmetology, A Medical Approach to Esthetic Procedures*.