



SKIN CARE



PART

4

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20 SKIN DISEASES CHAPTER & DISORDERS

chapter outline

Aging of the Skin

Disorders of the Skin

Avoiding Skin Problems



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Learning Objectives

After completing this chapter, you will be able to:

- Describe the aging process and the factors that influence aging of the skin.
- Define important terms relating to skin disorders.
- Discuss which skin disorders may be handled in the salon, and which should be referred to a physician.

Key Terms

Page number indicates where in the chapter the term is used.

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<i>albinism</i> pg. 539	<i>excoriation</i> pg. 537	<i>milium</i> pg. 537	<i>squamous cell carcinoma</i> pg. 540
<i>anhidrosis</i> pg. 538	<i>fissure</i> pg. 537	<i>miliaria rubra</i> pg. 538	<i>stain</i> pg. 539
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o matter how advanced the latest skin-care technology may be, knowing how to care for someone's skin begins with understanding its underlying structure and basic needs. As a licensed service provider, you also must recognize adverse conditions, including inflamed skin conditions, diseases, and infectious skin disorders.

Having a good working knowledge of skin care is essential to passing your state board exams. It also may provide you with an exciting new career. Skin care specialists are in high demand in high-end salons and spas, and earn excellent salaries. Some find the work less arduous and physically demanding than doing hair and choose to balance their day by scheduling services in both areas.

AGING OF THE SKIN

Aging of the skin is a process that takes many years and can be influenced by various factors. One does not necessarily age as one's parents have.

Many outside factors like the sun, the environment, health habits, and general lifestyle greatly influence the signs of skin aging to such a great extent that it has been estimated that heredity may only be responsible for 15% of the factors that determine how skin ages.

THE SUN AND ITS EFFECTS

The sun and its ultraviolet (UV) rays have the greatest impact on how skin ages. Approximately 80 to 85 percent of aging is caused by the rays of the sun. As we age, the collagen and elastin fibers of the skin naturally weaken. This weakening happens at a much faster rate when the skin is frequently exposed to UV rays without proper protection. The UV rays of the sun reach the skin in two different forms, UVA and UVB. Each of these forms influences the skin at a different level.

UVA rays, also called the "aging rays," are deep-penetrating rays that can even go through a glass window. These rays weaken the collagen and elastin fibers, causing wrinkling and sagging of the tissues.

UVB rays, also referred to as the "burning rays," cause sunburns and tanning of the skin by affecting the melanocytes, the cells of the epidermis that are responsible for producing melanin, the skin pigment. Melanin is designed to help protect the skin from the sun's UV rays, but can be altered or destroyed when large, frequent doses of UV light are allowed to penetrate the skin. Although UVB penetration is not as deep as UVA, these rays are equally damaging to the skin and can damage the eyes as well. On

a positive note, UVB rays contribute to the body's synthesis of Vitamin D and other important minerals. However, the amount of sun exposure necessary for vitamin D synthesis is very minimal, not to mention the fact that you can get vitamin D from fortified milk or orange juice.

As a consultant to your clients, it is appropriate that you advise them about the necessary precautions to take when they are exposed to the sun. Consider offering the following recommendations:

- On a daily basis, wear a moisturizer or protective lotion with a sunscreen of at least SPF 15 on all areas of potential exposure.
- Avoid prolonged exposure to the sun during peak hours, when UV exposure is highest. This is usually between 10 AM and 3 PM.
- Sunscreen should be applied at least 30 minutes before sun exposure to allow time for absorption. Many people make the mistake of applying sunscreen after they have been exposed to the heat and sun's rays for 30 minutes or more. The already inflamed skin is more likely to react to the sunscreen chemicals when applied after sun exposure.
- Apply sunscreen liberally after swimming or any activities that result in heavy perspiration. If the skin is exposed to hours of sun, such as during a boat trip or day at the beach, sunscreen should be applied periodically throughout the day as a precaution.
- All sunscreen used for protection should be full or broad spectrum to filter out UVA and UVB rays of the sun. Check expiration dates printed on the bottle to make sure that the sunscreen has not expired.
- Avoid exposing children younger than 6 months of age to the sun.
- If prone to burning frequently and easily, wear a hat and protective clothing when participating in outdoor activities. Redheads and blue-eyed blonds are particularly susceptible to sun damage.

In addition to following the above precautions, clients should be advised to regularly see a physician specializing in dermatology for checkups of the skin, especially if any changes in coloration, size, or shape of a mole are detected, the skin bleeds unexpectedly, or a lesion or scrape does not heal quickly.

Home self-examinations can also be an effective way to check for signs of potential skin cancer between scheduled doctor visits. When performing a self-care exam, clients should be advised to check for any changes in existing moles and pay attention to any new visible growths on the skin.

SKIN AGING AND THE ENVIRONMENT

While the sun may play the major role in how the skin ages, changes in the environment also greatly influence this aging process. Pollutants in the air from factories, automobile exhaust, and even secondhand smoke can all influence the appearance and overall health of skin. While these pollutants affect the surface appearance of the skin, they can also change the health of the underlying cells and tissues, thereby speeding up the aging process.

The best defense against these pollutants is the simplest one: follow a good daily skin-care routine. Routine washing and exfoliating (removing dead surface skin cells) at night helps to remove the buildup of pollutants

F Y I

The American Cancer Society recommends using the ABCD Cancer Checklist to help make potential skin cancer easier to recognize. When checking existing moles, look for changes in any of the following: A, asymmetry; B, border; C, color; and D, diameter. Changes to any of these should be examined by a physician. For more information, contact the American Cancer Society at www.cancer.org or (800) ACS-2345.

that have settled on the skin's surface throughout the day. The application of daily moisturizers, protective lotions, and even foundation products all help to protect the skin from airborne pollutants.

AGING AND LIFESTYLE

Aging of the skin cannot be blamed entirely on the outside influences of the sun and other environmental factors. What we choose to put into our bodies also has a profound effect on the overall aging process. The impact of poor choices can be seen most visibly on the skin. Smoking, drinking, drug abuse, and poor dietary choices all greatly influence the aging process. It is the responsibility of the cosmetologist to be aware of how these habits affect the skin and to tactfully point out these effects to clients.

Smoking and tobacco use not only cause cancer, but have also been linked to premature aging and wrinkling of the skin. Nicotine in tobacco causes contraction and weakening of the blood vessels and small capillaries that supply blood to the tissues. In turn, this contraction and weakening cause decreased circulation to the tissues. Eventually, the tissues are deprived of essential oxygen, and the effect of this becomes evident on the skin's surface. The skin may appear yellowish or gray in color and can have a dull appearance.

The use of illegal drugs affects the skin as much as smoking does. Some drugs have been shown to interfere with the body's intake of oxygen, thus affecting healthy cell growth. Some drugs can even aggravate serious skin conditions, such as acne. Others can cause dryness and allergic reactions on the skin's surface.

The overuse of alcohol has an opposite, yet equally damaging effect on the skin. Heavy or excessive intake of alcohol overdilates the blood vessels and capillaries. Over time, this constant overdilation and weakening of the fragile capillary walls will cause them to become distended. These dilated capillaries, called **telangiectasias** (te-lanj-ec-tay-jas), may also be caused by tobacco use, sun exposure, or other environmental factors. Alcohol can also dehydrate the skin by drawing essential water out of the tissues, which causes the skin to appear dull and dry.

Both smoking and drinking contribute to the aging process on their own, but the combination of the two can be devastating to the tissues. The constant dilation and contraction that occur on the tiny capillaries and blood vessels, as well as the constant deprivation of oxygen and water to the tissues, quickly make the skin appear lifeless and dull. It is very difficult for the skin to adjust and repair itself. The damage done by these lifestyle habits is typically hard to reverse or diminish.

DISORDERS OF THE SKIN

Like any other organ of the body, the skin is susceptible to a variety of diseases, disorders, and ailments. In your work as a practitioner, you will often see skin and scalp disorders, so you must be prepared to recognize

certain common skin conditions and know what you can and cannot do with them. Some skin and scalp disorders can be treated in cooperation with, and under the supervision of, a physician. Medicinal preparations, available only by prescription, must be applied in accordance with a physician's directions. If a client has a skin condition that you do not recognize as a simple disorder, refer the client to a physician.

It is very important that a beauty salon does not serve a client who is suffering from an inflamed skin disorder, infectious or not. The cosmetologist should be able to recognize these conditions, and sensitively suggest that proper measures be taken to prevent more serious consequences.

Numerous important terms relating to skin, scalp, and hair disorders that you should be familiar with are described in subsequent sections.

LESIONS OF THE SKIN

A **lesion** (LEE-zhun) is a mark on the skin. Certain lesions could indicate an injury or damage that changes the structure of tissues or organs. There are three types of lesions: primary, secondary, and tertiary. The cosmetologist is concerned with primary and secondary lesions only. If you are familiar with the principal skin lesions, you will be able to distinguish between conditions that may and may not be treated in a beauty salon (Figure 20-1).

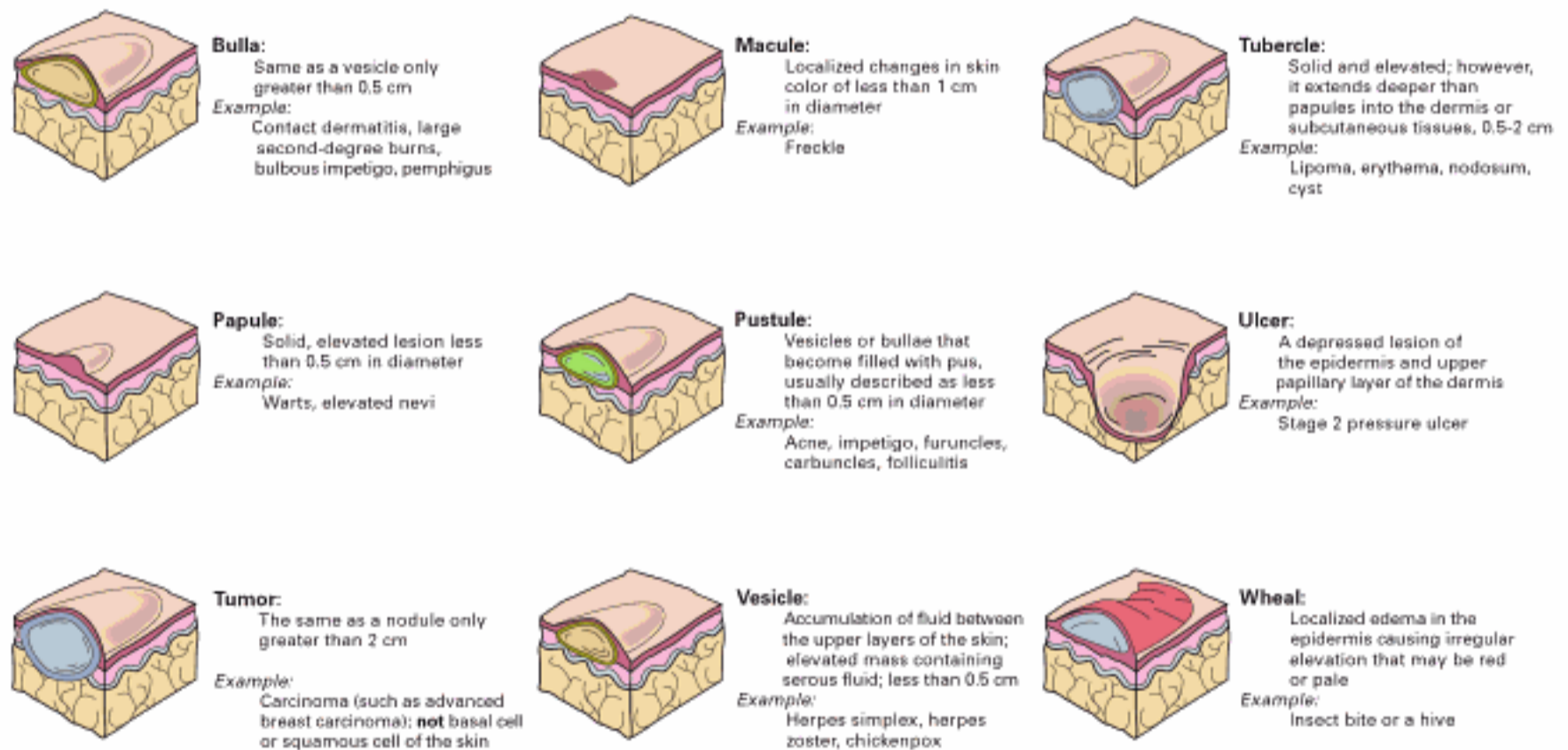


Figure 20-1 Primary skin lesions.



Figure 20-2 Bullae.



Figure 20-3 Papules and pustules.



Figure 20-4 Poison oak vesicles.

The terms for different lesions listed below often indicate differences in the area of the skin layers affected and the size of the lesion.

PRIMARY LESIONS

Bulla (BULL-uh) (**plural: bullae**)—A large blister containing a watery fluid; similar to a vesicle but larger (Figure 20-2).

Cyst (SIST)—A closed, abnormally developed sac that contains fluid, pus, semifluid, or morbid matter, above or below the skin.

Macule (MAK-yool) (**plural: maculae**) (MAK-yuh-ly)—A spot or discoloration on the skin, such as a freckle. Macules are neither raised nor sunken.

Papule (PAP-yool)—A pimple; small circumscribed elevation on the skin that contains no fluid but may develop pus.

Pustule (PUS-chool)—An inflamed pimple containing pus (Figure 20-3).

Tubercle (TOO-bur-kul)—An abnormal rounded, solid lump above, within, or under the skin; larger than a papule.

Tumor (TOO-mur)—A swelling; an abnormal cell mass resulting from excessive multiplication of cells, varying in size, shape, and color. Nodules are also referred to as tumors, but are smaller.

Vesicle (VES-ih-kel)—A small blister or sac containing clear fluid, lying within or just beneath the epidermis. Poison ivy and poison oak, for example, produce vesicles (Figure 20-4).

Wheal (WHEEL)—An itchy, swollen lesion that lasts only a few hours; caused by a blow, the bite of an insect, urticaria (skin allergy), or the sting of a nettle. Examples include hives and mosquito bites.

SECONDARY LESIONS

Secondary skin lesions develop in the later stages of disease (Figure 20-5).

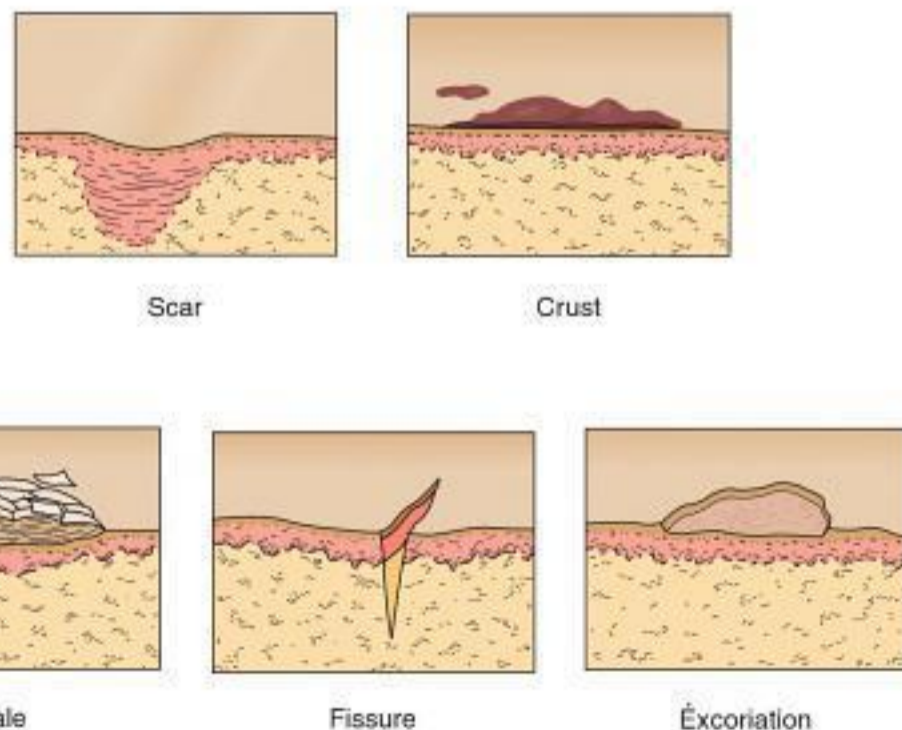


Figure 20-5 Secondary skin lesions.



Figure 20-10 Rosacea.



Figure 20-11 Eczema.



Figure 20-12 Herpes simplex.

characterized by inflammation, dry or oily scaling or crusting, and/or itchiness. The red, flaky skin often appears in the eyebrows, in the scalp and hairline, the middle of the forehead, and along the sides of the nose. This condition is sometimes treated with cortisone creams. Severe cases should be referred to the dermatologist.

Asteatosis (as-tee-ah-TOH-sis) is a condition of dry, scaly skin due to a deficiency or absence of sebum, caused by old age and exposure to cold.

Rosacea (roh-ZAY-shee-uh), formerly called acne rosacea, is a chronic condition appearing primarily on the cheeks and nose, characterized by flushing (redness), telangiectasia (dilation of the surface blood vessels), and the formation of papules (small, solid bumps) and pustules (raised lesions containing pus). The cause of rosacea is unknown, but certain factors are known to aggravate the condition in some individuals. These include spicy foods, caffeine, alcohol, exposure to extremes of heat and cold or sunlight, and stress (Figure 20-10).

A **steatoma** (stee-ah-TOH-muh) is a sebaceous cyst or fatty tumor. It is filled with sebum and ranges in size from a pea to an orange. It usually appears on the scalp, neck, and back. A steatoma is sometimes called a wen.

DISORDERS OF THE SUDORIFEROUS (SWEAT) GLANDS

Anhidrosis (an-hih-DROH-sis)—Deficiency in perspiration, often a result of fever or certain skin diseases. It requires medical treatment.

Bromhidrosis (broh-mih-DROH-sis)—Foul-smelling perspiration, usually noticeable in the armpits or on the feet.

Hyperhidrosis (hy-per-hy-DROH-sis)—Excessive sweating, caused by heat or general body weakness. Medical treatment is required.

Miliaria rubra (mil-ee-AIR-ee-ah ROOB-rah)—Prickly heat; acute inflammatory disorder of the sweat glands, characterized by the eruption of small red vesicles and accompanied by burning, itching skin. It is caused by exposure to excessive heat.

INFLAMMATIONS OF THE SKIN

Dermatitis (dur-muh-TY-tis)—Inflammatory condition of the skin. The lesions come in various forms, including vesicles or papules.

Eczema (EG-zuh-muh)—An inflammatory, painful itching disease of the skin, acute or chronic in nature, presenting many forms of dry or moist lesions. There are several different types of eczema. All cases of eczema should be referred to a physician for treatment. Eczema is not contagious (Figure 20-11).

Herpes simplex (HER-pee-z SIM-pleks)—Fever blister or cold sore; recurring viral infection. It is characterized by the eruption of a single vesicle or group of vesicles on a red swollen base. The blisters usually appear on the lips, nostrils, or other part of the face, and can last up to 3 weeks. Herpes simplex is contagious (Figure 20-12).

Psoriasis (suh-RY-uh-sis)—A skin disease characterized by red patches, covered with silver-white scales usually found on the scalp, elbows,

knees, chest, and lower back. Psoriasis is caused by the skin cells turning over faster than normal. It rarely occurs on the face. If irritated, bleeding points occur. Psoriasis is not contagious (Figure 20-13).

PIGMENTATIONS OF THE SKIN

Pigment can be affected by internal factors such as heredity or hormonal fluctuations, or by outside factors such as prolonged exposure to the sun. Abnormal coloration accompanies every skin disorder and many systemic disorders. A change in pigmentation can also be observed when certain drugs are being taken internally. The following terms relate to changes in the pigmentation of the skin.

Albinism (AL-bi-niz-em)—Congenital leukoderma, or absence of melanin pigment of the body, including the skin, hair, and eyes (Figure 20-14). Hair is silky white. The skin is pinkish white and will not tan. The eyes are pink, and the skin is sensitive to light and ages early.

Chloasma (kloh-AZ-mah)—Condition characterized by increased pigmentation on the skin in spots that are not elevated. Chloasma is also called liver spots, although they have nothing to do with the liver. They are generally caused by cumulative sun exposure.

Lentigines (len-TIJ-e-neeZ) (singular: lentigo) (len-TY-goh)—Technical term for freckles. Small yellow- to brown-colored spots on skin exposed to sunlight and air.

Leukoderma (loo-koh-DUR-muh)—Skin disorder characterized by light abnormal patches; caused by a burn or congenital disease that destroys the pigment-producing cells. It is classified as vitiligo and albinism.

Nevus (NEE-vus)—Small or large malformation of the skin due to abnormal pigmentation or dilated capillaries; commonly known as a birthmark.

Stain—Abnormal brown or wine-colored skin discoloration with a circular and irregular shape (Figure 20-15). Its permanent color is due to the presence of darker pigment. Stains occur during aging, after certain diseases, and after the disappearance of moles, freckles, and liver spots. The cause is unknown.

Tan—Change in pigmentation of skin caused by exposure to the sun or ultraviolet rays.

Vitiligo (vih-til-EYE-goh)—Milky-white spots (leukoderma) of the skin. Vitiligo is hereditary, and may be related to thyroid conditions (Figure 20-16). Skin with vitiligo must be protected from overexposure to the sun.



Figure 20-16 Vitiligo.



Figure 20-13 Psoriasis.

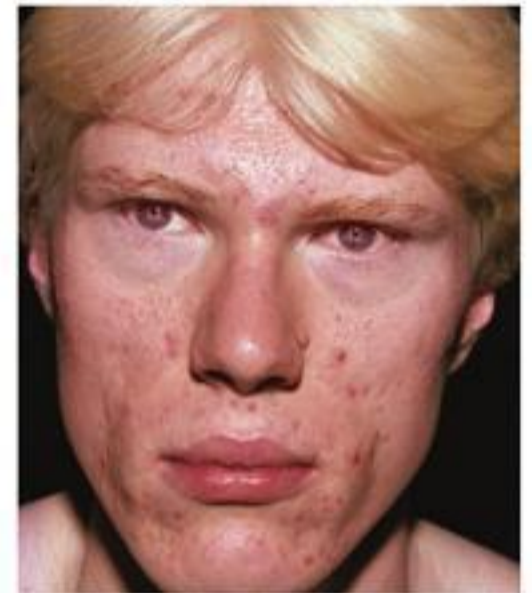


Figure 20-14 Albinism.



Figure 20-15 Port wine stain.



CAUTION

Do not treat or remove hair from moles.

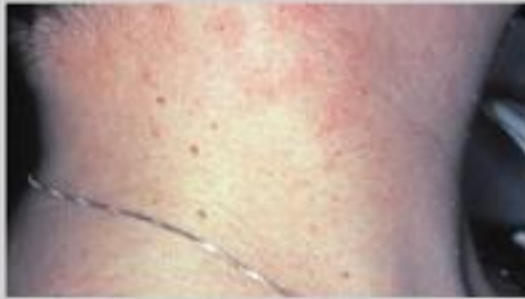


Figure 20-17 Skin tags.

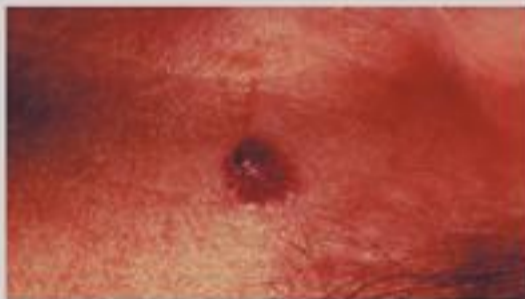


Figure 20-18 Basal cell carcinoma.



Figure 20-19 Squamous cell carcinoma.



Figure 20-20 Malignant melanoma.

HYPERTROPHIES OF THE SKIN

A **hypertrophy** (hy-PUR-truh-fee) of the skin is an abnormal growth of the skin. Many hypertrophies are benign, or harmless.

Keratoma (kair-uh-TOH-muh)—An acquired, superficial, thickened patch of epidermis commonly known as callus, caused by pressure or friction on the hands and feet. If the thickening grows inward, it is called a corn.

Mole—A small, brownish spot or blemish on the skin, ranging in color from pale tan to brown or bluish black. Some moles are small and flat, resembling freckles; others are raised and darker in color. Large, dark hairs often occur in moles. Any change in a mole requires medical attention.

Skin tag—Small brown or flesh-colored outgrowth of the skin (Figure 20-17). Skin tags occur most frequently on the neck of an older person. They can be easily removed by a dermatologist.

Verruca (vuh-ROO-kuh)—Technical term for wart; hypertrophy of the papillae and epidermis. It is caused by a virus and is infectious. Verruca can spread from one location to another, particularly along a scratch in the skin.

SKIN CANCER

Skin cancer—primarily caused from overexposure to the sun—comes in three distinct forms that vary in severity. Each is named for the type of cells that it affects.

Basal cell carcinoma (BAY-zul SEL kar-sin-OH-muh) is the most common type and the least severe. It is often characterized by light or pearly nodules (Figure 20-18). **Squamous** (SKWAY-mus) **cell carcinoma** is more serious than basal cell carcinoma, and often is characterized by scaly red papules or nodules (Figure 20-19). The third and most serious form of skin cancer is **malignant melanoma** (muh-LIG-nent mel-uh-NOH-muh), which is often characterized by black or dark brown patches on the skin that may appear uneven in texture, jagged, or raised (Figure 20-20).

Malignant melanomas often appear on individuals who do not receive regular sun exposure, and are most commonly located on areas of the body that are not regularly exposed. It is often nicknamed the “city person’s cancer.” Malignant melanoma is the least common, but also the most dangerous type of skin cancer.

If detected early, anyone with any of these three forms of skin cancer has a good chance for survival. It is important for a cosmetologist to be able to recognize the appearance of serious skin disorders in order to better serve clients. It also important to remember that a cosmetologist should not attempt to diagnose a skin disorder, but should sensitively suggest that the client seek the advice of a dermatologist.

AVOIDING SKIN PROBLEMS

Skin problems are common in every facet of the professional salon industry. Nail, skin, and hair services can cause problems for the sensitive client. Fortunately, the vast majority of skin-related problems can be easily avoided—if you understand how!

DERMATITIS

Dermatitis is a medical term for abnormal skin inflammation. There are many kinds of dermatitis, but only one is important in the salon. **Dermatitis venenata**, also known as contact dermatitis is the most common skin disease for nail practitioners. Contact dermatitis is caused by touching certain substances to the skin. This type of dermatitis can be short term or long term. Contact dermatitis can have several causes. The skin may be irritated by a substance, and is called irritant contact dermatitis. It is also possible to become allergic to an ingredient in a product. This is called allergic contact dermatitis.

PROLONGED OR REPEATED CONTACT

Allergic reactions are caused by prolonged or repeated direct skin contact. This type of skin problem does not occur overnight. Acrylic (methacrylate) liquids, haircolor, and chemical texture solutions are all capable of causing allergic reactions. In general, a reaction takes from 4 to 6 months. As a professional service provider, you may also be at risk. Prolonged, repeated, or long-term exposures can cause anyone to become sensitive. This is usually caused by overexposure. Simply touching products or solutions does not cause sensitivities. These typically require months of improper handling and overexposure. Some likely places for allergies to occur are listed below.

1. On practitioner's fingers, palms, or on the back of the hand
2. On practitioner's face, especially the cheeks
3. On client's scalp, hairline, forehead, or neckline

If you examine the area where the problem occurs, you can usually determine the cause. For example, haircolorists often strand test color with their bare fingers and hands. This is both prolonged and repeated contact!

Sensitization is a greatly increased or exaggerated sensitivity to products.

IRRITANT CONTACT DERMATITIS

Irritating substances will temporarily damage the epidermis. Corrosive substances are examples of irritants. When the skin is damaged by irritating substances, the immune system springs into action. It floods the tissue with water, trying to dilute the irritant. This is why swelling occurs.

The immune system also tells the blood to release histamines, which enlarge the vessels around the injury. Blood can then rush to the scene more quickly and help remove the irritating substance.

You can see and feel all the extra blood under the skin. The entire area becomes red, warm, and may throb. Histamines cause the itchy feeling that often accompanies contact dermatitis. After everything calms down, the swelling will go away. The surrounding skin is often left damaged, scaly, cracked, and dry. Fortunately, irritations are not permanent. If you avoid repeated and/or prolonged contact with the irritating substance, the skin will usually quickly repair itself. However, continued or repeated exposure may lead to permanent allergic reactions.

Surprisingly, tap water is a very common salon irritant. Hands that remain damp for long periods often become sore, cracked, and chapped. Avoiding the problem is simple. Always completely dry the hands. Regularly use moisturizing hand creams to compensate for loss of skin oils.

Frequent hand washing, especially in hard water, can further damage the skin. Do not wash your hands excessively. Washing your hands more than 10 or 15 times a day can cause them to become irritated and damaged. Cleansers and detergents worsen the problem. They increase damage by stripping away sebum and other natural skin chemicals that protect the skin. Prolonged or repeated contact with many solvents will strip away skin oils, leaving the skin dry or damaged. Sometimes it is difficult to determine the cause of the irritation. One way to identify the irritant is by observing the location of the reaction. Symptoms are always isolated to the contact area. The cause will be something that you are doing to this part of the skin.

Once a client becomes allergic, things will only get worse if you continue using the same products and techniques. It is best to discontinue use until you figure out what you are doing wrong. Otherwise, more clients will eventually be affected.

PROTECT YOURSELF

Take extreme care to keep brush handles, containers, and table tops clean and free from product, dusts, and residues. Repeatedly handling these items will cause overexposure if the items are not kept clean. If you avoid contact, neither you nor your client will ever develop an allergic reaction.

Many serious problems can be related to contact dermatitis. Do not fall into the trap of developing bad habits.

CHAPTER GLOSSARY

<i>psoriasis</i>	Skin disease characterized by red patches, covered with silver-white scales usually found on the scalp, elbows, knees, chest, and lower back, but rarely on the face.
<i>pustule</i>	Inflamed pimple containing pus.
<i>rosacea</i>	Chronic congestion appearing primarily on the cheeks and nose, characterized by redness, dilation of the blood vessels, and formation of papules and pustules.
<i>scale</i>	Any thin plate of epidermal flakes, dry or oily, such as abnormal or excessive dandruff.
<i>scar or cicatrix</i>	Light-colored, slightly raised mark on the skin formed after an injury or lesion of the skin has healed.
<i>seborrheic dermatitis</i>	Skin condition caused by an inflammation of the sebaceous glands. Often characterized by inflammation, dry or oily scaling, or crusting and/or itchiness.
<i>sensitization</i>	A greatly increased or exaggerated sensitivity to products.
<i>skin tag</i>	A small brown or flesh-colored outgrowth of the skin.
<i>squamous cell carcinoma</i>	Type of skin cancer more serious than basal cell carcinoma; often characterized by scaly red papules or nodules.
<i>stain</i>	Abnormal brown or wine-colored skin discoloration with a circular and irregular shape.
<i>steatoma</i>	Sebaceous cyst or fatty tumor.
<i>tan</i>	Change in pigmentation of skin caused by exposure to the sun or ultraviolet rays.
<i>telangiectasias</i>	Dilation of the surface blood vessels.
<i>tubercle</i>	Abnormal rounded, solid lump above, within, or under the skin; larger than a papule.
<i>tumor</i>	A swelling; an abnormal cell mass resulting from excessive multiplication of cells, varying in size, shape, and color.
<i>ulcer</i>	Open lesion on the skin or mucous membrane of the body, accompanied by pus and loss of skin depth.
<i>verruca</i>	Technical term for wart; hypertrophy of the papillae and epidermis.
<i>vesicle</i>	Small blister or sac containing clear fluid, lying within or just beneath the epidermis.
<i>vitiligo</i>	Milky-white spots (leukoderma) of the skin. Vitiligo is hereditary and may be related to thyroid conditions.
<i>wheel</i>	Itchy, swollen lesion that lasts only a few hours; caused by a blow, the bite of an insect, urticaria, or the sting of a nettle.

HAIR REMOVAL

CHAPTER 21

chapter outline

Client Consultation

Permanent Hair Removal

Methods of Temporary Hair
Removal



Material covered in this chapter

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Learning Objectives

After completing this chapter, you will be able to:

- Describe the elements of a client consultation for hair removal.
- Name the conditions that contraindicate hair removal in the salon.
- Identify and describe three methods of permanent hair removal.
- Demonstrate the techniques involved in temporary hair removal.

Key Terms

Page number indicates where in the chapter the term is used.

depilatory
pg. 552

electrolysis
pg. 551

epilator
pg. 555

*hirsuties or
hypertrichosis*
pg. 548

laser hair removal
pg. 551

photoepilation
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One of the fastest growing services in the salon and spa businesses is hair removal. Once restricted to an occasional lip or brow service, a growing number of clients want to have their entire face, arms, and legs bare of hair. Bikini hair removal has also evolved into its own art form, with different designs becoming sought-after services by many clients. Men are also jumping on the bandwagon, with the nape of the neck, chest, and back being frequent removal requests. The most common form of hair removal in salons and spas is waxing, although with the popularity of these services on the rise, many different methods are now coming into play.

Hirsuties (hur-SOO-shee-eez) or **hypertrichosis** (hy-pur-trih-KOH-sis) are terms that refer to the growth of an unusual amount of hair on parts of the body normally bearing only downy hair, such as the faces of women and the backs of men. Clients with an overabundance of hair are certainly the best candidates for hair removal, although many clients with even just a few unwanted hairs on their arms or legs are now requesting these services.

Unwanted hair has been treated throughout the ages by a variety of methods. Excavations of early Egyptian tombs indicate that abrasive materials, such as pumice stone, were used to rub away hair. Ancient Greek and Roman women were known to remove most of their body hair by similar methods. Native Americans used sharpened stones and seashells to rub off and pluck out hair.

History also records chemical means of removing excess hair. For example, the ancient Turks used *rusma*, a combination of yellow sulfide of arsenic, quicklime, and rose water, as a crude hair removal agent.

Facial and body hair removal has become increasingly popular as evolving technology makes it easier to perform with more effective results. All of the various approaches to hair removal, though, fall into two major categories: permanent and temporary. Salon techniques are generally limited to temporary methods.

CLIENT CONSULTATION

Before performing any hair removal service, a consultation is always necessary. Ask the client to complete a questionnaire that discloses all medications, both topical (applied to the skin) and oral (taken by mouth), along with any known skin disorders or allergies (Figure 21-1). Allergies or sensitivities must be noted and documented. Keep in mind that many changes can occur between client visits. Since the last time you saw them, clients may have been placed on medications such as antidepressants, hormones, cortisone, medicine for blood pressure or diabetes, or such topical prescriptions as Retin-A®, Renova®, and hydroquinone. A client taking any one of these prescriptions may not be a candidate for hair removal. See Figure 21-2 or a sample client assessment form.



Figure 21-1 Filling out a client questionnaire.

CLIENT ASSESSMENT FORM	
Date _____	
Name _____	Sex _____
Address _____	
City _____	State _____ Zip _____
1. Have you been seen by a dermatologist? Yes ___ No ___ If yes, for what reason? _____	
2. Please list all medications that you take regularly. Include hormones, vitamins, and the like. _____	
Have you ever used Accutane®? Yes ___ No ___ If yes, when did you stop taking Accutane®? _____	
Do you use or have you recently used Retin-A®, Renova®, Tazorac®, Differin®, Azelex®, or other medical peeling agent? Yes ___ No ___ If yes, for how long? _____	
3. Do you have any allergies? Are you allergic to any medications? Yes ___ No ___	
If yes, please list allergies: _____	
4. Are you pregnant or lactating? Yes ___ No ___	
5. Have you had any of the following procedures?	
Laser resurfacing Yes ___ Date _____ No ___	
Light chemical peel Yes ___ Date _____ No ___	
Medium/heavy chemical peel Yes ___ Date _____ No ___	
Have you had any microdermabrasion? Yes ___ Date _____ No ___	
6. Do you ever experience tightness or flaking of your skin? Yes ___ No ___	
7. Do you frequent tanning booths? Yes ___ No ___	
8. Do you have a history of fever blisters or cold sores? Yes ___ No ___	

Figure 21-2 Client assessment form.

- Use of any exfoliating topical medication including Retin-A®, Renova®, Tazorac®, Differin®, Azelex®, or other medical peeling agent
- Use of hydroquinone for skin lightening

PERMANENT HAIR REMOVAL

Although permanent hair removal services are not often offered in salons, it is useful to know the options that exist. Permanent hair removal methods include electrolysis, photoepilation (light-based hair removal), and laser hair removal.

ELECTROLYSIS

Electrolysis is the removal of hair by means of an electric current that destroys the growth cells of the hair. The current is applied with a very fine, needle-shaped electrode that is inserted into each hair follicle. This technique must only be performed by a licensed electrologist.

PHOTOEPIILATION

Photoepilation uses intense light to destroy the growth cells of the hair follicles. This treatment has minimal side effects, requires no needles, and thus minimizes the risk of infection. Clinical studies have shown that photoepilation can provide 50 to 60 percent clearance of hair in 12 weeks. This method can be administered in some salons by cosmetologists and estheticians, depending on state law. Manufacturers of photoepilation equipment generally provide the special training necessary for administering this procedure.

LASER HAIR REMOVAL

Lasers are another method for the rapid removal of unwanted hair. In **laser hair removal**, a laser beam is pulsed on the skin, impairing hair growth. It is most effective when used on follicles that are in the growth or anagen phase.

The laser method was discovered by chance when it was noted that birthmarks treated with certain types of lasers became permanently devoid of hair. Lasers are not for everyone; an absolute requirement is that one's hair must be darker than the surrounding skin. Coarse, dark hair responds best to laser treatment. For some clients, this method produces permanent hair removal. For other clients, laser hair removal treatments simply slow down regrowth.

In certain states and provinces, cosmetologists or estheticians are allowed to perform laser hair removal under a doctor's supervision. This method requires specialized training, most commonly offered by laser equipment manufacturers.

Laws regarding photoepilation and laser hair removal services vary by state and province. Be sure to check with your regulatory agency for guidelines.

PROCEDURE

21-3

BODY WAXING

EQUIPMENT, IMPLEMENTS, AND MATERIALS

Use the same equipment as for eyebrow waxing, with the addition of a metal or disposable wooden spatula. A metal spatula holds the heat longer, but it must not touch the client's skin as you apply the wax. You may find disposable spatulas more convenient.

PREPARATION

1. Melt the wax in the heater.
2. Complete your client consultation.
3. Drape the treatment bed with disposable paper or a bed sheet with paper over the top.
4. If bikini waxing, offer the client disposable panties or a small sanitized towel.
5. If waxing the underarms, have the client remove her bra and put on a terry wrap. Offer a terry wrap when waxing the legs as well.
6. Assist the client onto the treatment bed and drape with towels.
7. Wash your hands.

PROCEDURE

1. Thoroughly cleanse the area to be waxed with a mild astringent cleanser and dry.
2. Apply a light covering of powder (Figure 21-14).
3. Test the temperature and consistency of the heated wax by applying a small drop to your inner wrist.
4. **Spread wax.** Using a metal or disposable spatula, spread a thin coat of the warm wax evenly over the skin surface in the same direction as the hair growth (Figure 21-15). Be sure not to put the spatula in the wax more than once. If the wax strings and lands in an area you do not wish to treat, remove it with lotion designed to dissolve and remove wax.
5. **Apply fabric.** Apply a fabric strip in the same direction as the hair growth. Press gently, running your hand over the surface of the fabric three to five times (Figure 21-16).
6. **Apply pressure and remove fabric.** Gently apply pressure to hold the skin taut with one hand and quickly remove the adhering wax in the opposite direction of the hair growth (Figure 21-17).



CAUTION

Never leave the wax heater on overnight, as it is a fire hazard and can damage the wax.

CAUTION

When waxing sensitive areas such as underarms or bikini lines, be sure the wax is not too hot. Trim the hair with scissors if it is more than 1/2-inch (1.25 centimeters) long.



Figure 21-14 Apply a light coating of powder.



Figure 21-15 Spread warm wax over the top of the leg.



Figure 21-16 Press a fabric strip over the waxed area.



Figure 21-17 Pull off the fabric strip in the direction opposite hair growth.

REVIEW QUESTIONS

1. What information should be entered in the client record during the consultation?
2. What conditions, treatments, and medications contraindicate hair removal in the salon?
3. What are the two major types of hair removal? Give examples of each.
4. Define these methods of hair removal: electrolysis, photoepilation, and laser removal.
5. Which hair removal techniques should not be performed in the salon without special training?
6. What is the difference between a depilatory and an epilator?
7. Why must a patch test be given before waxing?
8. List safety precautions that must be followed for hot and cold waxing.
9. Define threading and sugaring.

CHAPTER GLOSSARY

<i>depilatory</i>	Substance, usually a caustic alkali preparation, used for the temporary removal of superfluous hair by dissolving it at the skin surface level.
<i>electrolysis</i>	Removal of hair by means of an electric current that destroys the root of the hair.
<i>epilator</i>	Substance used to remove hair by pulling it out of the follicle.
<i>hirsuties or hypertrichosis</i>	Growth of an unusual amount of hair on parts of the body normally bearing only downy hair, such as the faces of women or the backs of men.
<i>laser hair removal</i>	Permanent hair removal treatment in which a laser beam is pulsed on the skin, impairing the hair growth.
<i>photoepilation</i>	Permanent hair removal treatment that uses intense light to destroy the hair follicles.
<i>sugaring</i>	Temporary hair removal method that involves the use of a thick, sugar-based paste.
<i>threading</i>	Temporary hair removal method that involves twisting and rolling cotton thread along the surface of the skin, entwining the hair in the thread, and lifting it from the follicle.

FACIALS

CHAPTER 22

chapter outline

- Skin Analysis and Consultation
- Determining Skin Type
- Skin Care Products
- Client Consultation
- Facial Massage
- Electrotherapy and Light Therapy
- Facial Treatments
- Aromatherapy



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Learning Objectives

After completing this chapter, you will be able to:

- List and describe various skin types and conditions.
- Understand contraindications and the use of health screening forms to safely perform facial treatments.
- Identify the various types of massage movements and their physiological effects.
- Be able to describe different types of products used in facial treatments.
- Understand the basic types of electrical equipment used in facial treatments.
- Demonstrate the procedure for a basic facial.

Key Terms

Page number indicates where in the chapter the term is used.

<i>alipidic</i> pg. 567	<i>contraindication</i> pg. 563	<i>gommages</i> pg. 570	<i>open comedones</i> pg. 568
<i>alpha hydroxy acids</i> pg. 571	<i>couperose</i> pg. 569	<i>hacking</i> pg. 579	<i>ostium</i> pg. 568
<i>ampoules</i> pg. 573	<i>cream masks</i> pg. 573	<i>humectants</i> pg. 572	<i>paraffin wax masks</i> pg. 573
<i>anode</i> pg. 584	<i>effleurage</i> pg. 577	<i>keratolytic enzymes</i> pg. 571	<i>petrissage</i> pg. 578
<i>aromatherapy</i> pg. 599	<i>electrode</i> pg. 584	<i>light therapy</i> pg. 587	<i>rolling</i> pg. 578
<i>astringents</i> pg. 570	<i>electrotherapy</i> pg. 584	<i>masks</i> pg. 573	<i>steamer</i> pg. 583
<i>brushing machine</i> pg. 584	<i>emollients</i> pg. 572	<i>massage</i> pg. 577	<i>tapotement or percussion</i> pg. 578
<i>cathode</i> pg. 584	<i>enzyme peels</i> pg. 571	<i>massage creams</i> pg. 573	<i>telangiectasias</i> pg. 569
<i>chemical exfoliants</i> pg. 571	<i>exfoliants</i> pg. 570	<i>mechanical exfoliants</i> pg. 570	<i>toners</i> pg. 570
<i>chucking</i> pg. 578	<i>exfoliation</i> pg. 570	<i>microcurrent</i> pg. 586	<i>treatment cream</i> pg. 573
<i>clay-based masks</i> pg. 573	<i>foaming cleansers</i> pg. 570	<i>microdermabrasion</i> pg. 570	<i>vibration</i> pg. 579
<i>cleansing milks</i> pg. 570	<i>fresheners</i> pg. 570	<i>modelage masks</i> pg. 574	<i>wringing</i> pg. 578
<i>closed comedones</i> pg. 568	<i>friction</i> pg. 578	<i>moisturizers</i> pg. 572	
	<i>fulling</i> pg. 578	<i>motor point</i> pg. 579	

Good skin care can make a big difference in the way skin looks, and the way the client feels about his or her appearance.

Besides being very relaxing, facial treatments can offer many improvements to the appearance of the skin.

Proper skin care can make oily skin look cleaner and healthier, dry skin look and feel more moist and supple, and aging skin look smoother, firmer, and less wrinkled. A combination of good salon facial treatments and helping the client plan an effective home care program individualized for their skin will show visible results.

It is extremely rewarding to be able to help people relax, improve their appearance, and feel better about themselves (Figure 22-1).



Figure 22-1 A facial is a soothing, pleasurable experience for the client.

SKIN ANALYSIS AND CONSULTATION

Skin analysis is a very important part of the facial treatment because it determines what type of skin the client has, the condition of the skin, and what type of treatment the client's skin needs. *Consultation* allows you the opportunity to ask the client questions about his or her health, skin care history, and to advise the client about appropriate home care products and treatments.

HEALTH SCREENING

Before beginning the analysis, you must have the client fill out a health-screening questionnaire (Figure 22-2). Similar to the form used for waxing, the main purpose of the health-screening form is to determine any *contraindications* the client might have that might indicate avoiding certain types of treatment on that particular client's skin. A **contraindication** is a condition the client has, or a treatment the client is undergoing, that might cause a negative side effect during the facial treatment. For example, if the client is allergic to fragrance, using a fragranced product would be *contraindicated*. If a client is using a prescription drug, such as Retin-A® or Tazorac® (both topical drugs that cause skin exfoliation), using other exfoliants in the facial treatment is contraindicated. Accutane, an oral medication for cystic acne, causes thinning of the skin all over the body. Waxing, stimulating treatments, or exfoliation procedures should never be performed on the skin of someone using Accutane, or someone who has used the drug in the last 6 months. Because Accutane is an oral drug, it stays in the body for several months after the client stops using the drug.



CAUTION

As a cosmetology student, you should always receive hands-on training from your instructor before attempting any of the procedures discussed in this chapter.

S K I N	Signs of Skin Type	Conditions Associated with Skin Type
Oily	Obvious, large pores.	Open and closed comedones, clogged pores. Shiny, thick appearance. Yellowish color. Orange peel texture.
Dry	Pores very small or not visible.	Tight, poreless-looking skin. May be dehydrated with fine lines and wrinkles, dry and rough to the touch.
Normal	Even pore distribution throughout the skin. Very soft smooth surface. Lack of wrinkles.	Normal skin is actually very unusual. Most clients have combination skin.
Combination dry	Obvious pores down center of face. Pores not visible or becoming smaller toward the outer edges of the face.	May have clogged pores in the nose, chin, and center of the forehead. Dry, poreless toward outside edges of the face.
Combination oily	Wider distribution of obvious or large pores down the center of the face extending to the outer cheeks. Pores become smaller towards edges of the face.	Comedones, clogged pores, or obvious pores in the center of the face.
Acne	Very large pores in all areas. Acne is considered a skin type because it is hereditary.	Presence of numerous open and closed comedones, clogged pores, and red papules and pustules (pimples).

Table 22-1 Signs and Conditions Associated with Skin Types

on top of it. Dehydrated skin also may feel itchy or tight. Dehydration can occur on almost any skin type. The key to truly alipidic skin is the absence of visible pores.

Oily skin that produces too much sebum will have large pores, and the skin may appear shiny or greasy. Pores may be clogged from dead cells building up in the hair follicle, or there may be **open comedones** (blackheads) present. Open comedones are a mixture of solidified sebum and dead cell buildup stuck in the follicles. **Closed comedones** are small bumps just underneath the skin surface. The difference between closed and open comedones is the size of the follicle opening or **ostium**.

ACNE

The presence of pimples in oily areas indicates *acne*. Acne is considered a skin type because the tendency to develop acne is hereditary. Acne is a disorder in which the follicles become clogged, resulting in infection of the follicle with redness and inflammation. Acne bacteria are *anaerobic*, which means they cannot survive in the presence of oxygen. When follicles are blocked with solidified sebum and dead-cell buildup, oxygen cannot readily get to the bottom of the follicle where acne bacteria live.

Acne bacteria survive from breaking down sebum into fatty acids, which is their only food source. A blocked follicle is an ideal environment for acne bacteria. When acne bacteria flourish from the lack of oxygen and a food source like a blocked follicle, they multiply quickly, eventually causing a break in the follicle wall. This rupture allows blood to come into the follicle causing redness. *Acne papules* are red pimples that do not have a pus head. Pimples with a pus head are called *pustules*. *Pus* is a fluid inside a pustule, largely made up of dead white blood cells that tried to fight the infection (Table 22-1).

ANALYSIS OF SKIN CONDITIONS

Conditions of the skin are generally treatable. They are generally not hereditary, but may be associated with a particular skin type.

Dehydration is indicated by flaky areas or skin that wrinkles easily on the surface. Very gently pinching the skin surface will result in the formation of lines. This is an indication of dehydration. Dehydrated skin can be caused from lack of care, improper or overdrying skin care products, sun exposure, and other causes. Dehydrated skin is treated by using hydrators that help to bind water to the skin surface. These hydrating products should be chosen based on skin type. Hydrators for alipidic skin are generally heavier in texture. Hydrators for oilier skin are lighter weight. Proper hydration of the skin can result in smoother-looking and softer skin.

Most types of *hyperpigmentation*, or dark blotches of color, are caused by sun exposure or hormone imbalances. Clients who have spent a lot of time in the sun will often have hyperpigmentation. Hyperpigmentation is treated with mild exfoliation and home care products that discourage pigmentation. Daily use of sunscreen and avoidance of sun exposure are very important for this skin type.

Sensitive skin has a thin, red-pink look. Skin will turn red easily, and is easily inflamed by some skin care products. You should avoid strong products or cleansers, fragranced products, and strong exfoliants when treating sensitive skin. *Rosacea* is a chronic hereditary disorder that can be indicated by constant or frequent facial blushing. *Dilated capillaries* (ca-pill-larrys), also known as **telangiectasias** (te-lang-ec-tasias) or **couperose** (coo-per-ros) are often present. Rosacea is considered a medical disorder, and should be diagnosed by a dermatologist. You should treat a client who has rosacea with very gentle products and treatments, avoiding any treatment that releases heat or stimulates the skin.

Aging skin has loss of elasticity, and the skin tends to sag in areas around the eyes and jawline. Wrinkles may be apparent in areas of normal facial expression. Treatments that hydrate and exfoliate improve the appearance of this skin.

Sun-damaged skin is skin that has been chronically exposed to sun frequently over the client's lifetime. Sun-damaged skin will have many areas of hyperpigmentation, lots of wrinkled areas including areas not in the normal facial expression, and sagging skin from damage to the elastic fibers. The skin looks older than it should for the age of the client. It is often confused with aging skin.



CAUTION

Severe or unresponsive cases of acne should be referred to a dermatologist for treatment. If you are ever unsure about treating a client who has acne, always refer that client to a dermatologist!



Figure 22-4 Microdermabrasion.



Figure 22-5 Skin-brushing machine.



Figure 22-6 Using a skin-brushing machine on a client's face.

Chemical exfoliants contain chemicals that either loosen or dissolve dead cell buildup. They are either used for a short time, although some may be worn as a day or night treatment, or combined in a moisturizer. Popular exfoliating chemicals are **alpha hydroxy acids** or *beta hydroxy acids*. These gentle acids help dissolve the bonds and “intercellular cement” between cells. As dead cells are removed from the surface over time, wrinkles appear less deep, skin discolorations may fade, clogged pores are loosened and reduced, new clogged pores are prevented, and skin is smoother and more hydrated. These acids encourage cell renewal, resulting in firmer and healthier-looking skin.

Salon alpha hydroxy acid exfoliants, often referred to as *peels*, contain larger concentrations of alpha hydroxy acids, usually around 20 to 30 percent. They should never be used unless the client has been using 10-percent alpha hydroxy acid products at home for at least 2 weeks prior to the higher concentration salon treatment.

Enzyme peels are another type of chemical exfoliant. Enzyme peels work by dissolving keratin protein in the surface cells. They are known as **keratolytic** (kair-uh-tuh-LIT-ik) **enzymes** or protein-dissolving agents. Enzyme products are usually made from plant-extracted enzymes from papaya, *papain* (pa-PAIN) or pineapple, *bromelain* (bro-ma-LAIN), or *pancreatin* (pan-cree-at-tin), which is derived from beef by-products. Enzymes sometimes are blended into scrubs or wearable products, but they are most often designed for use in the salon.

There are two basic types of keratolytic enzyme peels. Cream-type enzyme peels usually contain papain. They are applied to the skin and allowed to dry for a few minutes. They form a crust, which is then “rolled” off the skin. This type of product rolled off the skin is known as a *gommage* (go-mahj) (Figure 22-7). The most



Figure 22-7 Rolling a gommage mask off the face.



CAUTION

Do not use brushing machines, scrubs, or any harsh mechanical peeling techniques on the following skin types and conditions:

- Skin with many visible capillaries
- Thin skin that reddens easily
- Older skin that is thin and bruises easily
- Skin being medically treated with tretinoin (retinoic acid or Retin-A), Accutane, azelaic acid, adapalene (Differin), alpha hydroxy acid (AHA), or salicylic acid (found in many common skin products)
- Acne-prone skin with inflamed papules and pustules



CAUTION

You should always receive hands-on training from your instructor before attempting chemical exfoliation treatments!



CAUTION

Overexfoliation of the skin can result in ultrasensitive and inflamed skin. Never use an exfoliant more often than recommended by the manufacturer. Combining more than one type of exfoliation may lead to irritation. Always carefully advise your client on the proper use of a home care exfoliant, including the need for the use of a daily sunscreen with an SPF of at least 15.

popular type of enzyme peel is likely a powder form that is mixed with water in the treatment room and applied to the face. This type of enzyme treatment does not dry, and can even be used during a steam treatment.

Proper exfoliation may improve the appearance of the skin in the following ways:

- Reduces clogged and oily skin
- Promotes skin smoothness
- Increases moisture content and hydration
- Reduces hyperpigmentation
- Decreases uneven skin color
- Eliminates or softens wrinkles and fine lines
- Increases elasticity

In addition, proper exfoliation speeds up cell turnover, and allows for better penetration of treatment creams and serums. Makeup applies more evenly on an exfoliated skin.

MOISTURIZERS

Moisturizers are products that help increase the moisture content of the skin surface. Moisturizers help the appearance of fine lines and wrinkles. They are basically mixtures of **humectants** (hew-mec-tunts) also known as *hydrators* or water-binding agents and **emollients**, which are oily or fatty ingredients that prevent moisture from leaving the skin.

Moisturizers for oily skin are most often in lotion form and generally contain smaller amounts of emollient. They are intended for oilier skin that does not need as much emollient since the skin produces more than adequate amounts of protective sebum.

Moisturizers for dry skin are often in the form of a heavier cream, and contain more emollients needed by alipidic skin.

All moisturizers may have other ingredients that will perform additional functions. These ingredients may include soothing agents for sensitive skin, alpha hydroxy acids or peptides for aging skin, or sunscreens.

SUNSCREENS AND DAY PROTECTION PRODUCTS

Shielding the skin from sun exposure is probably the most important habit to benefit the skin. Cumulative sun exposure causes the majority of skin cancers, and prematurely ages the skin.

Most sun exposure over a lifetime is from casual sun exposure. Therefore, every client should be instructed to use a daily sunscreen. Look for daily moisturizers that contain broad-spectrum sunscreens, which means that they protect against both UVA and UVB sunrays. An SPF-15 or higher is considered to be adequate strength.

Sunscreens are made in lotion, fluid, and cream forms, and are easily adaptable to combination, oilier, or dry skin types.

Night treatment products are usually more intensive products designed for use at night to treat specific skin problems. These products are generally

heavier than day-use products, and theoretically contain higher levels of conditioning ingredients.

Serums and **ampoules** (am-pyools) are concentrated products that generally contain higher amounts of ingredients that have an effect on skin appearance (Figure 22-8). They are typically used at home, and are applied under a moisturizer or sunscreen.

Massage creams are lubricants to make the skin slippery during massage. They often contain oils or petrolatum. If a massage cream is used during a facial treatment, it must be thoroughly removed before any other product can penetrate the skin.

There is a trend towards using treatment products that penetrate during massage. One of the biggest benefits of massage is that it increases absorption of the skin.

MASKS

Masks are products that are applied to the skin for a short time, but have more immediate effects. **Clay-based masks** are often used for oily and combination skin. They are generally oil-absorbing cleansing masks, and have an exfoliating effect and an astringent effect, making large pores temporarily appear smaller. They may have additional beneficial ingredients for soothing, or antibacterial ingredients like *sulfur*, which is helpful for acne-prone skin.

Cream masks do not dry on the skin like clay masks, and are often used for dry skin. They often contain oils and emollients as well as humectants, and have a strong moisturizing effect.

Gel masks can be used for sensitive or dehydrated skin, and do not dry hard. They often contain hydrators and soothing ingredients, and thus help plump surface cells with moisture, making the skin look more supple and more hydrated.

Alginate masks (al-gin-ate) are often seaweed based. They come in a powder form, and are mixed with water or sometimes serums. After mixing, they are quickly applied to the face, and dry to form a rubberized texture. A **treatment cream** or serum is generally applied under them. The alginate mask forms a seal that encourages the skin's absorption of the serum or treatment cream underneath. They are generally used only in the salon.

Paraffin wax masks are specially prepared facial masks containing paraffin and other beneficial ingredients. They are melted at a little more than body temperature before application. The paraffin quickly cools to a lukewarm temperature and hardens to a candle-like consistency. Paraffin masks are used with a treatment cream because the paraffin, which has no treatment properties of its own, allows for deeper penetration of the cream's ingredients into the surface layers of the skin. Eye pads and gauze are also used in a paraffin mask application, as facial hair could stick to the wax if not covered, making it difficult and painful to remove.

A valuable ingredient in moisturizers is sunscreen; its presence is particularly important in day creams. Not only does sunscreen guard against premature aging of the skin, but when used consistently, it is one of the best ways to help prevent skin cancer.



Figure 22-8 Skin treatment in an ampoule.



Figure 22-16 Petrissage.



Figure 22-17 Friction.



Figure 22-18 Tapotement.

smooth. Also, the free edges of your fingernails may scratch the client's skin.

PETRISSAGE

Petrissage (PEH-treh-sahzh) is a kneading movement performed by lifting, squeezing, and pressing the tissue with a light, firm pressure. Petrissage offers deeper stimulation to the muscles, nerves, and skin glands, and improves circulation. These kneading movements are usually limited to the back, shoulders, and arms.

Although typically used on larger surface areas such as the arms and shoulders, digital kneading can also be used on the cheeks with light pinching movements (Figure 22-16). The pressure should be light but firm. When grasping and releasing the fleshy parts, the movements must be rhythmic and never jerky.

Fulling is a form of petrissage in which the tissue is grasped, gently lifted, and spread out, used mainly for massaging the arms. With the fingers of both hands grasping the arm, apply a kneading movement across the flesh, with light pressure on the underside of the client's forearm and between the shoulder and elbow.

FRICITION

Friction (FRIK-shun) is a deep rubbing movement in which you apply pressure on the skin with your fingers or palm while moving it over an underlying structure. Friction has been known to have a significant benefit on the circulation and glandular activity of the skin. Circular friction movements are typically used on the scalp, arms, and hands. Light circular friction is used on the face and neck (Figure 22-17).

Chucking, rolling, and wringing are variations of friction, and are used mainly to massage the arms and legs, as follows:

- **Chucking.** Grasping the flesh firmly in one hand and moving the hand up and down along the bone while the other hand keeps the arm or leg in a steady position.
- **Rolling.** Pressing and twisting the tissues with a fast back-and-forth movement.
- **Wringing.** Vigorous movement in which the hands, placed a little distance apart on both sides of the client's arm or leg and working downward, apply a twisting motion against the bones in the opposite direction.

TAPOTEMENT

Tapotement (tah-POHT-mant) or **percussion** (per-KUSH-un) consists of short, quick tapping, slapping, and hacking movements. This form of massage is the most stimulating and should be applied with care and discretion. Tapotement movements tone the muscles and impart a healthy glow to the area being massaged.

In facial massage, use only light digital tapping. Bring the fingertips down against the skin in rapid succession. Your fingers must be flexible enough to create an even force over the area being massaged (Figure 22-18).

In slapping movements, keeping your wrists flexible allows your palms to come in contact with the skin in light, firm, and rapid slapping movements. One hand follows the other. With each slapping stroke, lift the flesh slightly.

Hacking is a chopping movement performed with the edges of the hands. Both the wrists and hands move alternately in fast, light, firm, and flexible motions against the skin. Hacking and slapping movements are used only to massage the back, shoulders, and arms.

VIBRATION

Vibration (vy-BRAY-shun) is a rapid shaking of the body part while the balls of the fingertips are pressed firmly on the point of application. The movement is accomplished by rapid muscular contractions in your arms. It is a highly relaxing movement, and should be applied at the end of the massage (Figure 22-19). Deep vibration in combination with other classical massage movements can also be produced by the use of a mechanical vibrator to stimulate blood circulation and increase muscle tone in muscles of the body.

PHYSIOLOGICAL EFFECTS OF MASSAGE

To obtain proper results from a scalp or facial massage, you must have a thorough knowledge of the structures involved, including muscles, nerves, connective tissues, and blood vessels. Every muscle has a **motor point**, which is a point on the skin over the muscle where pressure or stimulation will cause contraction of that muscle. Some examples are illustrated in Figures 22-20 and 22-21. In order to obtain the maximum benefits from a facial massage, you must consider the motor points that affect the underlying muscles of the face and neck. The location of motor points varies among individuals due to differences in body structure. However, a few manipulations on the proper motor points will relax the client early in the massage treatment.

Relaxation is achieved through light but firm, slow, rhythmic movements, or very slow, light hand vibrations over the motor points for a short time. Another technique is to pause briefly over the motor points, using light pressure.

Skillfully applied massage directly or indirectly influences the structures and functions of the body. The immediate effects of massage are first noticed on the skin. The area being massaged shows increased circulation, secretion, nutrition, and excretion. The following benefits may be obtained by proper facial and scalp massage:

- Skin and all structures are nourished
- Skin becomes softer and more pliable
- Circulation of blood is increased
- Activity of skin glands is stimulated
- Muscle fibers are stimulated and strengthened
- Nerves are soothed and rested
- Pain is sometimes relieved



Figure 22-19 Vibration on the shoulders.

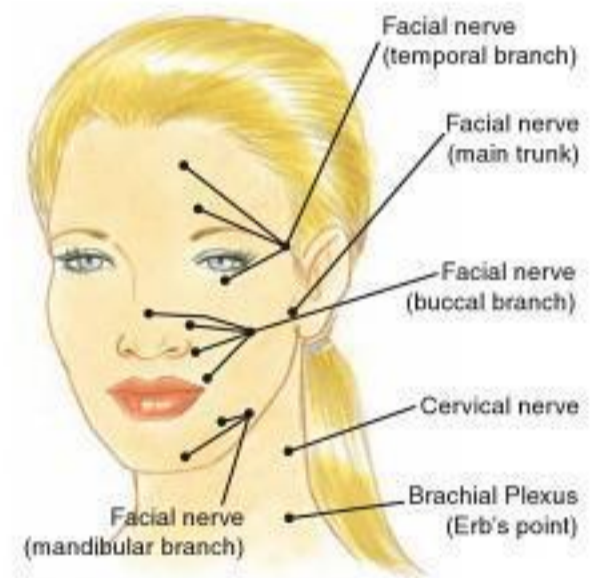


Figure 22-20 Motor nerve points of the face.

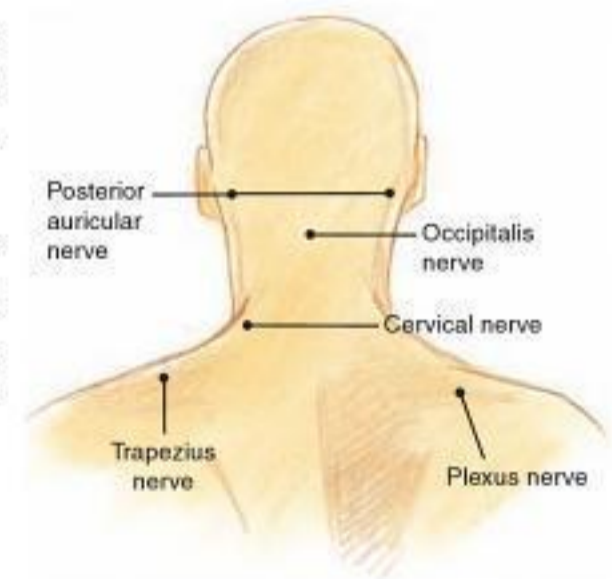


Figure 22-21 Motor nerve points of the neck.



Figure 22-22 Chin movement.



Figure 22-23 Circular movement of lower cheeks.



Figure 22-24 Mouth, nose, and cheek movements.

The frequency of facial or scalp massage depends on the condition of the skin or scalp, the age of the client, and the condition being treated. As a general rule, normal skin or scalp can be kept in excellent condition with the help of a weekly massage, accompanied by proper home care.

FACIAL MANIPULATIONS

Now that we have had an overview of basic massage/manipulation techniques and guidelines, the best manipulations to use on the face are discussed here. When performing facial manipulations, keep in mind that an even tempo, or rhythm, brings on relaxation. Do not remove your hands from the client's face once you have started the manipulations.

Should it become necessary to remove your hands, feather them off, then gently replace them with feather-like movements. Remember that massage movements are generally directed from the insertion toward the origin of a muscle, in order to avoid damage to muscle tissues.

The following illustrations show the different movements that may be used on the various parts of the face, chest, and back. Each instructor may have developed her own routine, however. For example, some instructors and practitioners prefer to start massage manipulations at the chin, while others prefer to start at the forehead. Both are correct. Be guided by your instructor.

- *Chin movement.* Lift the chin, using a slight pressure (Figure 22-22).
- *Lower cheeks.* Using a circular movement, rotate from chin to ears (Figure 22-23).
- *Mouth, nose, and cheek movements.* Follow the diagram (Figure 22-24).
- *Linear movement over the forehead.* Slide fingers to the temples and then stroke up to hairline, gradually moving your hands across the forehead to the right eyebrow (Figure 22-25).



Figure 22-25 Linear movement over forehead.



Figure 22-26 Circular movement over forehead.



CAUTION

Do not use the galvanic current on the following clients:

- With metal implants, a pacemaker, or any heart insufficiency
- With epilepsy
- Who are pregnant
- With high blood pressure, fever, or any infection
- With insufficient nerve sensibility
- With open or broken skin (wounds, new scars) or a pustular acne condition
- Who are afraid of electrical current

A **brushing machine** is a rotating electric appliance with interchangeable brushes that can be attached to the rotating head. Brushes of various sizes as well as textures are common. Larger and stiffer brushes are used for back treatment, and smaller and softer brushes are used for the face.

Brushing is a form of exfoliation, and is usually administered after or during steam. A fairly thick layer of cleanser or moisturizer should be applied to the face before using the brushing machine. This applied product provides a buffer for the brushes so that they do not scratch the face, as they might if the face was completely dry.

Brushing helps remove dead cells from the skin surface, making the skin look smoother and more even in coloration, and helps to stimulate blood circulation.

Brushing should never be used on clients using keratolytic drugs such as Retin-A®, Differin®, Tazorac®, or other drugs that thin or exfoliate the skin. Clients who have rosacea, sensitive skin, pustular acne, or other forms of skin inflammation or reddening should not have brushing administered. Never use a brushing machine at the same time as another exfoliation technique, such as an alpha hydroxy acid treatment or microdermabrasion.

Brushes must be thoroughly cleansed and disinfected between clients.

The skin suction and cold spray machine is used to increase circulation, and to jet-spray lotions and toners onto the skin. Skin suction should only be used on nonsensitive, and noninflamed skin.

Spray can be used on almost any skin type. Spray is often used to hydrate the skin and to help clean off mask treatments.

ELECTROTHERAPY AND LIGHT THERAPY

Galvanic and *high-frequency* treatment are types of **electrotherapy**, that is, the use of electrical currents to treat the skin.

There are several contraindications for electrotherapy. Electrotherapy should never be administered on heart patients, clients with pacemakers, metal implants, pregnant clients, clients with epilepsy or seizure disorders, clients who are afraid of electric current, or those with open or broken skin. Further, if you ever have any doubts if the client can have electrotherapy safely, request that the client get a note from her physician approving her for electrotherapy.

An **electrode** is an applicator for directing the electric current from the machine to the client's skin (Figure 22-40). High-frequency machines have only one electrode. Galvanic machines have two positive electrodes called an **anode**, which has a red plug and cord, and a negative electrode called a **cathode**, which has a black plug and cord (Figure 22-41).

Galvanic current accomplishes two basic tasks. *Desincrustation* is the process of softening and emulsifying hardened sebum stuck in the follicles. It is very helpful when treating oily areas with multiple comedones and most acne-prone skin. Desincrustation products are alkaline fluids or gels that act as solvents for the solidified sebum. This makes extraction of the impactions and comedones much easier. When the negative pole is applied to the face over a desincrustation product, the current forces the product deeper into the follicle. The current also produces a chemical reaction that helps to loosen the impacted sebum (Figure 22-42).

Both electrodes are wrapped in wet cotton. The *active electrode* is the electrode applied to the skin. The active electrode, in the case of desincrustation, the negative electrode, is applied to the oily areas of the face for 3 to 5 minutes. The positive electrode is held by the client in her right hand or attached to a pad that is placed in contact with the client's right shoulder (Figure 22-43). After the desincrustation process has taken place, sebum deposits can easily be extracted with gentle pressure.

Iontophoresis is the process of using galvanic current to penetrate water-soluble products that contain ions into the skin. Products suitable for iontophoresis will be labeled as such by manufacturers. When the negative current is applied to the face, products with negative ions are penetrated, and when the positive current is applied to the face, products with positive ions are penetrated. Many ampoules and serums are prepared for iontophoresis.



Figure 22-40 Various electrodes.

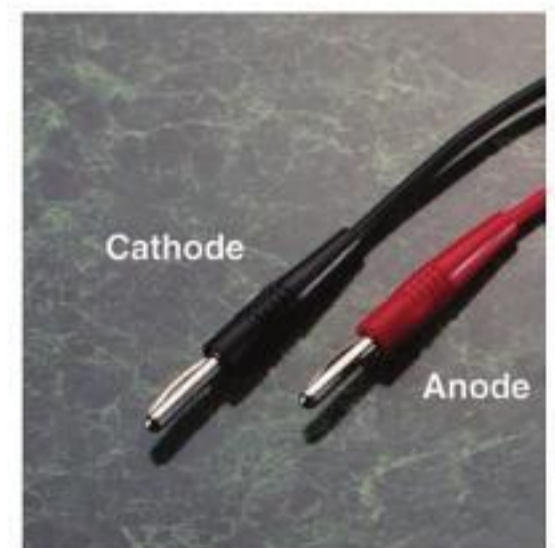


Figure 22-41 Cathodes.



Figure 22-42 "Five-in-one" machine, including galvanic electrodes.



Figure 22-43 Client holding passive electrode.



CAUTION

Place the passive electrode on the right side of the client's body only (never on the left side) to avoid current flow through the heart.



CAUTION

For sanitary reasons, never remove products from containers with your fingers. Always use a spatula.



Focus on . . . Sharpening Your Personal Skills

If a client seems dissatisfied with a facial treatment, check to see if you have been guilty of any of the following:

- Offensive breath or body odor
- Rough, cold hands or ragged nails that may have scratched the client's skin
- Allowing cream or other substances to get into the client's eyes, mouth, nostrils, or hairline
- Towels that were too hot or too cold
- Talking too much
- Manipulating the skin roughly or in the wrong direction
- Being disorganized and interrupting the facial to get supplies

GUIDELINES FOR FACIAL TREATMENTS

Your facial treatments are bound to be successful and to inspire return visits if you follow the simple guidelines summarized below.

- Help the client to relax by speaking in a quiet and professional manner.
- Explain the benefits of the products and service, and answer any questions the client may have.
- Provide a quiet atmosphere, and work quietly and efficiently.
- Maintain neat, clean, sanitary conditions in the facial work area with an orderly arrangement of supplies.
- Follow systematic procedures.
- If your hands are cold, warm them before touching the client's face.
- Keep your nails smooth and short to prevent scratching the client's skin.

Another guideline you must always be sure to follow is to perform an analysis of your client's skin. After the client is draped and seated on the facial table (also called bed), you should inspect the skin to determine the following:

- Is the skin dry, normal, or oily?
- Are there fine lines or creases?
- Are comedones or acne present?
- Are dilated capillaries visible?
- Is skin texture smooth or rough?
- Is skin color even?

The results of your analysis will determine the products to use for the massage, what areas of the face need special attention, how much pressure to use when massaging, and what equipment should be used.

BASIC FACIAL APPLICATION

The steps for performing a basic facial are listed in Procedure 22-1. Some procedures may vary, however, so be guided by your instructor.

A note on the implements and materials you will need; the list found on page 590 includes items for a basic facial. You can add other items if you wish. There are several types of head coverings on the market. Some are a turban design; others are designed with elastic, like a shower cap. They are generally made of either cloth or paper towels. For the paper towel procedure, be guided by your instructor.

SPECIAL PROBLEMS

There are a number of special problems that must be considered when you are performing a facial. These include dry skin, oily skin and blackheads, and acne.

Dry skin is caused by an insufficient flow of sebum (oil) from the sebaceous glands. The facial for dry skin helps correct this condition. Although it can be given with or without an electrical current, the use of electrical current provides better results.

Oily skin is often characterized by comedones, which are caused by hardened masses of sebum formed in the ducts of the sebaceous glands. Oily skin can benefit from the facial procedure described below.

Acne is a disorder of the sebaceous glands that requires thorough and sometimes ongoing medical attention. If the client is under medical care, the role of the cosmetologist is to work closely with the client's physician, following the physician's instructions for the kind and frequency of facial treatments. Generally, medical direction limits the cosmetologist to the following measures in the treatment of acne:

- Cleansing the skin
- Reducing the oiliness of the skin by local applications
- Removing comedones, using proper procedures
- Using special medicated preparations

Because acne skin contains infectious matter, you must wear protective gloves and use disposable materials such as cotton cleansing pads.

SPECIAL NOTES FOR ACNE-PRONE SKIN

Minor problem and oily skin should respond well to facial treatments as described above. Unresponsive or severe cases of acne need medical treatment, and should be referred to a dermatologist.

Cosmetologists can work with a dermatologist to help the client with extraction treatments, proper choices of home care products and makeup, and helping the client understand how to coordinate medications with her home skin care program.

There are numerous topical prescription medications that can make the skin more sensitive and more reactive to skin care products. Always check with the client's dermatologist if you are performing treatments to clients under dermatological care.

CONSULTATION AND HOME CARE

Home care is probably the most important factor in a successful skin care program. The key word here is "program." Clients' participation is essential to achieve results. A program consists of a long-range plan involving home care, salon treatments, and client education.

Every new client should be thoroughly consulted about home care for his or her skin conditions. After the first treatment, block out about 30 minutes to explain proper home care for the client.

After the treatment is finished, sit the client up in the facial chair, or invite her or him to move to a well-lighted consultation area. A mirror should be provided for the client, so that he or she can see conditions you will be discussing.

7. Drape client's head. Fasten a headband lined with tissue, a towel, or other head covering around the client's head to protect the hair. To drape the head with a towel, follow these steps:

- Fold the towel lengthwise from one of the top corners to the opposite lower corner, and place it over the headrest with the fold facing down. Place the towel on the headrest before the client enters the facial area.
 - When the client is in a reclined position, the back of the head should rest on the towel, so that the sides of the towel can be brought up to the center of the forehead to cover the hairline (Figures 22-49 and 22-50).
 - Use a headband with a Velcro closure or a pin to hold the towel in place (Figure 22-51). Make sure that all strands of hair are tucked under the towel, that the earlobes are not bent, and that the towel is not wrapped too tightly (Figure 22-52).
- 8.** Remove lingerie straps from a female client's shoulders. *Alternative method:* If client is given a strapless gown to wear, tuck the straps into the top of the gown.
- 9.** Wash your hands with soap and warm water.
- 10.** Perform a client consultation.

PROCEDURE

- If your client wears makeup, use the following steps to remove it. If your client has no makeup, skip this part and proceed to Step 2.
 - Apply a pea-sized amount of eye makeup remover to each of two damp cotton pads and place them on the client's closed eyes. Leave them in place for 1 minute (Figure 22-53).
 - Meanwhile, apply another pea-sized amount of eye makeup remover to a damp cotton pad and gently remove the client's lipstick with even strokes from the corners of the lips toward the center. Repeat the procedure until the lips are clean.
 - Now, remove the eye makeup in the same way, gently stroking down and outward with the cotton pad. Do one eye first, and then the other. Repeat the procedure until the eyelids and lashes are clean (Figure 22-54).



Figure 22-52 The client is prepared for the facial.



Figure 22-53 Leave cotton pads on the client's eyes.



Figure 22-54 Stroke down and outward with the pads.



Figure 22-49 Bring the sides of the towel around the client's head.



Figure 22-50 Bring one side of the towel over the other.



Figure 22-51 Secure the towel with a terrycloth headband.

PROCEDURE

22-2

FACIAL FOR DRY SKIN

EQUIPMENT, IMPLEMENTS, AND MATERIALS

This list is the same as for the basic facial, with the following additions:

- Galvanic or high-frequency machine, depending on treatment
- Specialized creams, serums, and toners for dry skin
- Eye cream

PREPARATION

Prepare the client in the same way as for the basic facial.

PROCEDURE

1. Apply cleanser, gently massage to apply, and then remove with damp cotton pads, soft sponges, or a warm moist soft towel.
2. Remove residue with toner on damp cotton pad or soft sponge.
3. Focus steam on the face and allow steaming for 5 minutes.
4. **Exfoliate.** During or after steaming, apply a mild granular exfoliating product designed for dry skin. Gently massage with light circular movements. Remove with damp cotton pads, soft sponges, or a warm moist soft towel.
5. Apply eye cream under the eyes.
6. Apply a moisturizing lotion, cream, or massage product designed for dry skin.
7. Massage the skin with manipulations.
8. If massage cream is used, remove with damp cotton pads, soft sponges, or a warm moist soft towel.
9. If you are not using electrotherapy, proceed to Step 12.



CAUTION

For dry skin, avoid using lotions that contain a high percentage of alcohol. Read the manufacturer's directions.

PROCEDURE

22-4

FACIAL FOR ACNE-PRONE AND PROBLEM SKIN

EQUIPMENT, IMPLEMENTS, AND MATERIALS

This list is the same as for the basic facial, with the following additions:

- Galvanic or high-frequency machine, depending on treatment
- Specialized fluids, serums, and toners for acne-prone skin
- Desincrustation gel or lotion
- Antibacterial clay or sulfur mask
- Gloves

PREPARATION

Prepare the client in the same way as for the basic facial.

PROCEDURE

1. Apply cleanser designed for oily/acne-prone skin, gently massage to apply, and then remove with damp cotton pads, soft sponges, or a warm, moist soft towel.
2. Remove residue with damp cotton pad or soft sponge. Do not tone at this time.
3. Focus steam on the face and allow steaming for 5 minutes.
4. **Apply a desincrustation lotion or gel to any area with pimples or clogged pores.** Negative galvanic current may be applied over this lotion, depending on the manufacturer's instructions. The lotion should generally remain on the skin for 5 to 8 minutes, again, depending on the manufacturer's instructions. Remove the preparation with damp cotton pads, soft sponges, or a warm, moist soft towel.
5. Extract comedones as in Procedure 22-3.
6. After extraction is complete, apply an astringent lotion, toner for oily skin, or specialized serum designed for after extraction. Allow to dry. Unfold gauze across the face and apply direct high-frequency using the mushroom-shaped electrode, according to machine manufacturer's and your instructor's directions (Figure 22-68).
7. If galvanic desincrustation was performed prior to extraction, apply *positive* galvanic current to the face after extractions are complete. This will help to re-establish the proper pH of the skin surface.
8. Acne-prone skin should *not* be massaged.
9. **Apply mask.** Using a mask brush, apply an antibacterial or sulfur-based mask to all oily and acne-prone areas. To dry skin, such as the eye and neck areas, you may choose to apply a gel mask for dehydrated skin. Allow the mask to process for about 10 minutes. Do not allow the mask to overdry so that it cracks (Figure 22-69).
10. Remove the mask with damp cotton pads, soft sponges, or a warm, moist soft towel.
11. Apply toner for oily skin with cotton pads.
12. Apply specialized lotion or sunscreen designed for oily or acne-prone skin.

CLEANUP AND SANITATION

Use the same techniques as listed for the basic facial. Make sure that all equipment is cleaned and sanitized as directed by manufacturer's instructions.



Figure 22-68 Apply high-frequency current with a facial electrode.



Figure 22-69 Apply a facial mask for acne skin.

Explain, in simple terms, the client's skin conditions, informing the client of how you propose to treat the conditions. Inform the client about how often treatments should be administered in the salon, and very specifically what he or she should be doing at home.

You should organize the products you want the client to purchase and use. Explain the use of each one at a time, in the order of use. Make sure to have written instructions for the client to take home.

It is very important to have products available for the client that you believe in and that produce results. Retailing products for clients to use at home is very important for success in treatment and in your business.

AROMATHERAPY

The therapeutic use of essential oils such as lemon verbena, rosemary, and rose has greatly improved the efficacy of many skin care preparations. Many essential oils are also used for their **aromatherapy** benefits to enhance a person's physical, emotional, mental, and spiritual well-being. Using various oils and oil blends for specific benefits is believed to create positive effects on the body, mind, and spirit (Figure 22-70).

Essential oils can be used in a variety of ways. Lighting a cinnamon candle in the winter can give the salon a cozy feeling, and cheer up both clients and service givers. You can use a spray bottle to diffuse well-diluted essential oils in the treatment room, or on the sheets. For a more balanced massage, you can create your own aromatherapy massage oil by adding a few drops of essential oil to a massage oil, cream, or lotion.

Always be careful to use essential oils lightly, however, as they sometimes have a tendency to be overpowering.



Figure 22-70 Some ingredients for aromatherapy.



CAUTION

Aromatherapy is sometimes used as a healing modality by natural healers who have received extensive training in the properties and uses of essential oils and their aromatherapy benefits. Cosmetologists should never attempt to perform healing treatments with aromatherapy.



Focus on . . . Sharpening Your Personal Skills

The importance of following proper hygiene and sanitation guidelines when giving facials cannot be overemphasized. As much as possible, perform your sanitation procedures in the presence of your clients. When they see you doing this, they will feel more confidence in you as a professional.

CHAPTER GLOSSARY

<i>cleansing milks</i>	Nonfoaming lotion cleansers for the face.
<i>closed comedones</i>	Clogged follicles just under the skin surface.
<i>contraindication</i>	Procedure or condition that requires avoiding certain treatment to prevent undesirable side effects.
<i>couperose</i>	European term describing areas of diffuse redness and dilated red capillaries.
<i>cream masks</i>	Mask treatments for dry skin that do not harden or dry on the face.
<i>effleurage</i>	Light, continuous stroking movement applied with the fingers (digital) or the palms (palmar) in a slow, rhythmic manner.
<i>electrode</i>	Applicator for directing the electric current from the machine to the client's skin.
<i>electrotherapy</i>	Electrical facial treatments.
<i>emollients</i>	Oil or fatty ingredients that prevent moisture from leaving the skin.
<i>enzyme peels</i>	Chemical exfoliants that involve the use of enzymes that help speed up the breakdown of keratin, the protein in skin.
<i>exfoliants</i>	Ingredient that assists in the process of exfoliation.
<i>exfoliation</i>	Removal of excess dead cells from the skin surface.
<i>foaming cleansers</i>	Wash-off product that contains a surfactant.
<i>fresheners</i>	Liquid that helps remove excess oil in the skin.
<i>friction</i>	Deep rubbing movement requiring pressure on the skin with the fingers or palm while moving them over an underlying structure.
<i>fulling</i>	Form of petrissage in which the tissue is grasped, gently lifted, and spread out; used mainly for massaging the arms.
<i>gommages</i>	Enzyme peels in which a cream is applied to the skin before steaming and forms a hardened crust that is then massaged or "rolled" off the skin.
<i>hacking</i>	Chopping movement performed with the edges of the hands in massage.
<i>humectants</i>	Substances that absorb moisture or promote the retention of moisture.
<i>keratolytic enzymes</i>	Substances that help speed up the breakdown of keratin, the protein in skin.
<i>light therapy</i>	Application of light rays to the skin for treating disorders.
<i>masks</i>	Special cosmetic preparations applied to the face to tighten, tone, hydrate, and nourish the skin.

CHAPTER GLOSSARY

<i>massage</i>	Manual or mechanical manipulation of the body by rubbing, pinching, kneading, tapping, and other movements to increase metabolism and circulation, promote absorption, and relieve pain.
<i>massage creams</i>	Lubricants designed to give the practitioner a good slip (slippery quality) during massage.
<i>mechanical exfoliants</i>	Methods of physical contact used to scrape or bump cells off the skin.
<i>microcurrent</i>	A galvanic treatment that is a computerized device with many skin care applications, namely, toning.
<i>microdermabrasion</i>	Mechanical exfoliation that involves "shooting" aluminum oxide or other crystals at the skin with a hand-held device that exfoliates dead cells.
<i>modelage masks</i>	Facial masks containing special crystals of gypsum, a plaster-like ingredient.
<i>moisturizers</i>	Products formulated to add moisture to the skin.
<i>motor point</i>	Point on the skin over the muscle where pressure or stimulation will cause contraction of that muscle.
<i>open comedones</i>	Also known as blackheads; follicles impacted with solidified sebum and dead cell buildup.
<i>ostium</i>	Follicle opening.
<i>paraffin wax masks</i>	Specially prepared facial masks containing paraffin and other beneficial ingredients; typically used with treatment cream.
<i>petrissage</i>	Kneading movement performed by lifting, squeezing, and pressing the tissue with a light, firm pressure.
<i>rolling</i>	Massage movement in which the tissues are pressed and twisted using a fast back-and-forth movement.
<i>steamer</i>	Heats and produces a stream of warm steam that can be focused on various areas of the skin.
<i>tapotement or percussion</i>	Most stimulating massage movement, consisting of short, quick tapping, slapping, and hacking movements.
<i>telangiectasias</i>	Dilated red capillaries.
<i>toners</i>	Liquid that helps remove excess oil in the skin.
<i>treatment cream</i>	Cream designed to hydrate and condition the skin during the night; heavier in consistency and texture than a moisturizer.
<i>vibration</i>	In massage, the rapid shaking of the body part while the balls of the fingertips are pressed firmly on the point of application.
<i>wringing</i>	Vigorous movement in which the hands, placed a little distance apart on both sides of the client's arm or leg and working downward, apply a twisting motion against the bones in the opposite direction.

Learning Objectives

After completing this chapter, you will be able to:

- Describe the various types of cosmetics and their uses.
- Demonstrate an understanding of cosmetic color theory.
- Demonstrate a basic makeup procedure for any occasion.
- Identify different facial types and demonstrate procedures for basic corrective makeup.
- Demonstrate the application and removal of artificial lashes.
- List safety measures to be followed during makeup application.

Key Terms

Page number indicates where in the chapter the term is used.

band lashes
pg. 634

cake (pancake) makeup
pg. 611

cheek color
pg. 608

concealers
pg. 607

cool colors
pg. 614

eyebrow pencils
pg. 610

eyelash adhesive
pg. 634

eyeliner
pg. 610

eye makeup removers
pg. 611

eye shadows
pg. 609

eye tabbing
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face powder
pg. 607

foundation
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greasepaint
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lip color
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lip liner
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mascara
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matte
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warm colors
pg. 614

Makeup is a part of cosmetology that is very interesting and can produce dramatic and immediate changes in clients' appearance. Most clients prefer a natural look, simply covering or focusing attention away from facial flaws, and accenting good facial features (Figure 23-1). Application of makeup can vary greatly among clients, and the needs of each client can be very different.

In this chapter, you will learn about basic makeup techniques and products, and about how to use color to make your clients look their best. You will also learn about highlighting and contouring, methods that help to accent good features, hide not-so-good features, and change the appearance of facial shapes (Figure 23-2).

When you have learned these techniques, you can imagine the client's face as a blank canvas, using your skills to cover, change, or accentuate features, making your client look her very best. Combining hairstyles, color, and makeup can help your client achieve beautiful changes.

COSMETICS FOR FACIAL MAKEUP

FOUNDATION

Foundation is a tinted cosmetic, also known as base makeup, and is used to cover or even out the coloring of the skin. It can be used to conceal dark spots, blemishes, and other imperfections. Foundation is usually the first cosmetic used during makeup application (Figure 23-3).

Foundation comes in liquid, stick, and cream forms. One of the newest trends, mineral powder makeup, is a powder form of foundation.

FOUNDATION CHEMISTRY

Most liquid and cream forms of makeup are mixtures of water and oil spreading agents as a base that contain a significant amount of talc and various color agents called pigments. Pigments can be natural derived minerals or color agents called lakes.

Liquid foundations, also called water-based foundation, is mostly water, but often contains an emollient such as mineral oil or a silicone such as cyclomethicone. Some may contain alcohols or other drying agents to

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Figure 23-2 A wide variety of cosmetics is available to you and your client.



Figure 23-3 Foundations.



Focus on . . . Retailing

Retailing cosmetics is a great way to increase your income. Most salons will pay you a 5- to 10-percent commission on every product you retail. If you focus on retailing to every client, this amount will add up quickly. It is not unusual for a cosmetologist who is retailing makeup on a daily basis to pay for a long weekend vacation or even make a car payment or two each year using these rewards. And you will be helping your clients by giving them professional advice and allowing them to shop for makeup while receiving other salon services. If you don't take advantage of this opportunity, the department store down the street surely will!

help the product dry quickly on the skin. The mixture of water and oil helps in applying the makeup color agents evenly, and keeps the colors suspended evenly throughout the product. Water-based foundation is most often used for lighter coverage needs, and for oily to combination skin types. They often dry quickly and produce a **matte** finish, meaning they dry to become nonshiny.

Some foundations are marketed as oil-free. These are usually intended for oilier skin types, but some contain oil substitutes that can be equally as oily as a foundation containing oil. Be sure to read the label carefully and to check with the manufacturer to make sure it has been tested for oily and acne-prone skin.

Cream foundation, also known as oil-based foundation, is a considerably thicker product and is often sold in a jar or a tin. It may or may not contain water. The thicker the product, the less likely it is to contain water. Cream foundations provide heavier coverage and are usually intended for dry skin types. They tend to produce a shinier appearance than water-based products.

Using a cream foundation on oily or acneic skin can possibly cause more clogged pores to form. Cosmetic products that cause the formation of clogged pores or comedones are called comedogenic, which means that they produce comedones.

All types of foundation can contain sunscreen ingredients.

USING FOUNDATION

Choosing the correct color of foundation is extremely important in making makeup look natural. The foundation should be as close to the client's natural skin coloring as possible. To choose the correct foundation color, have the client sit in a well-lit area. Apply a small amount of the foundation product to the jawline. It is important that the color chosen matches the skin on both the face and neck. If the color of the foundation is too light, it will look dull and chalky. If the color is too dark, it will look muddy or splotchy.

Makeup should be blended onto the skin with a disposable makeup sponge. After choosing the correct color, remove some makeup from the container with a clean sanitized spatula. The foundation product may be placed in or on a small disposable palette or plastic cup to avoid contamination of the product container. Using the sponge, blend out the foundation across the skin with short strokes. The product should match the color of the skin very closely. A line of demarcation is an obvious line where the foundation starts or stops. These are very unattractive, and should not be obvious if the correct color has been chosen.

Cream foundation is usually applied to the sponge and then blended across the skin. Liquid foundation is often applied to the skin in small dots across the face and then quickly blended with a sponge.

Mineral powder foundation is applied with a large fluffy brush. It contains a lot of pigment for coverage. The pigments stick to the skin, providing natural-looking coverage.

Here's a TIP

Eye shadow in pressed powder form may be applied to the eyes with an eyeliner brush to create a softer lined effect. Whether using shadow or pencil liner, it may be helpful to pull the skin taut, from right below the eyebrow up, to ensure smooth application.



Figure 23-8 Eyeliners.



CAUTION

According to the American Medical Association, eye pencils should not be used to color the inner rim of the eyes, because this can lead to infection of the tear duct, causing tearing, blurring of vision, and permanent pigmentation of the mucous membrane lining the inside of the eye.

A *base color* is generally a medium tone that is close to the client's skin tone. It is available in a variety of finishes. This color is generally used to even skin tone on the eye. It is often applied all over the lid and brow bone from lash to brow before other colors are applied, thus providing a smooth surface for the blending of other colors. If used this way, a matte finish is generally preferred.

A *contour color* is a color, in any finish, that is deeper and darker than the client's skin tone. It is applied to minimize a specific area, to create contour in a crease, or to define the eyelash line.

To apply eye shadow, remove the product from its container with a spatula, and then use a fresh applicator or clean brush. Unless you are doing corrective makeup, apply the eye color close to the lashes on the upper eyelid, sweeping the color slightly upward and outward. Blend to achieve the desired effect. More than one color may be used if a particular effect is desired.

EYELINERS

Eyeliner is a cosmetic used to outline and emphasize the eyes. It is available in a variety of colors, in pencil, liquid, pressed (cake), or felt tip pen form.

With eyeliner you can create a line on the eyelid close to the lashes to make the eyes appear larger and the lashes fuller (Figure 23-8).

Eyeliner pencils consist of a wax (paraffin) or hardened oil base (petrolatum) with a variety of additives to create color. They are available in both soft and hard form for use on the eyebrow as well as the upper and lower eyelid.

USING EYELINERS

Most clients prefer eyeliner that is the same color as the lashes or mascara for a more natural look. More dramatic colors may be chosen depending on seasonal color trends.

Be extremely cautious when applying eyeliner. You must have a steady hand and be sure that your client remains still. Sharpen the eyeliner pencil and wipe with a clean tissue before each use. Also, remember to sanitize the sharpener before each use. Apply to the desired area with short strokes and gentle pressure; the most common placement is close to the lash line. For powder shadow liner application, scrape a small amount onto a tissue and apply to the eyes with a disposable applicator or clean brush. If desired, wet the brush before the application for a more dramatic look.

EYEBROW COLOR

Eyebrow pencils or shadows are used to add color and shape to the eyebrows, usually after tweezing or waxing. They can be used to darken the eyebrows, correct their shape, or fill in sparse areas. Brow powders are similar to pressed eye shadows, and are applied to the brows with a brush. Brow powders cling to eyebrow hairs, making the brows appear darker and fuller.

The chemistry of eyebrow pencils is similar to that of eyeliner pencil. The chemical ingredients in eyebrow shadows are also similar to those in eye shadows.

USING EYEBROW COLOR

Sharpen the eyebrow pencil and wipe with clean tissue before each use. Sanitize the sharpener before each use. For powder shadow application, scrape a small amount onto a tissue and use a disposable applicator or clean brush to apply shadow to brows. Avoid harsh contrasts between hair and eyebrow color, such as pale blond or silver hair with black eyebrows.

MASCARA

Mascara is a cosmetic preparation used to darken, define, and thicken the eyelashes. It is available in liquid, cake, and cream form, and in a variety of shades and tints (Figure 23-9). Mascara brushes can be straight or curved, with fine or thick bristles. The most popular mascara colors are shades of brown and black, which enhance the natural lashes, making them appear thicker and longer.

Mascara is available in tube and wand applicators. Both are polymer products that include water, wax, thickeners, film formers, and preservatives. The pigments in mascara must be inert (unable to combine with other elements) and usually are carbon black, carmine, ultramarine, chromium oxide, and iron oxides. Some wand mascaras contain rayon or nylon fibers to lengthen and thicken the hair fibers.

USING MASCARA

Mascara may be used on all the lashes, from the inner to outer corners. Using a disposable wand, dip into a clean tube of mascara and apply from close to the base of the lashes out toward the tips, making sure your client is comfortable throughout the application. Dispose of the wand. Never double-dip!

If you are using an eyelash curler, you must curl the lashes before applying mascara. If lashes are curled after mascara, eyelashes may be broken or pulled out. Use extreme caution whenever using an eyelash curler.

The easiest way to learn how to use this tool is by first observing its use. Ask your instructor to demonstrate before attempting to use an eyelash curler on someone else.

OTHER COSMETICS

Eye makeup removers do just that: remove eye makeup. Most eye makeup products are water-resistant, so plain soap and water are less effective for removal. Eye makeup removers are either oil-based or water-based. Oil-based removers are generally mineral oil with a small amount of fragrance added. Water-based removers are comprised of a water solution to which other solvents have been added.

Greasepaint is a heavy makeup used for theatrical purposes. **Cake (pancake) makeup** is a shaped, solid mass applied to the face with a



Figure 23-9 Mascara products.

Here's a TIP

Apply mascara carefully. The most common injury with mascara application is poking the eye with the applicator. Practice applying mascara repeatedly until you feel confident enough to apply it on clients.



Figure 23-10 Makeup brushes.

moistened cosmetic sponge. It gives good coverage and is generally used to cover scars and pigmentation defects.

MAKEUP BRUSHES AND OTHER TOOLS

Makeup brushes come in a variety of shapes and sizes (Figure 23-10). They may be made of synthetic or animal hair with wooden or metal handles. Commonly used makeup brushes and implements are listed below.

- *Powder brush.* Large, soft brush used to apply powder and for blending edges of color.
- *Blush brush.* Smaller, more tapered version of the powder brush, excellent for applying powder cheek color.
- *Concealer brush.* Usually narrow and firm with a flat edge, used to apply concealer around the eyes or over blemishes.
- *Lip brush.* Similar to the concealer brush, with a more tapered edge; may be used to apply concealer or lip color.
- *Eye shadow brushes.* Available in a variety of sizes, from small to large, and in finishes from soft to firm. The softer and larger the brush, the more diffused and blended the shadow will be. A firm brush is better for depositing dense color than for blending it.
- *Eyeliner brush.* Fine, tapered, firm bristles; used to apply liquid liner or shadow to the eyes.
- *Angle brush.* Firm, thin bristle; angled for ease of application of shadow to the eyebrows or shadow liner to the eyes.
- *Lash and brow brush.* Comb-like brush used to remove excess mascara on lashes or to comb brows into place.
- *Tweezers.* Available in metal or plastic; used to remove excess facial hair.
- *Eyelash curler.* Metal or plastic device used to give lift and upward curl to the upper lashes.

CARING FOR MAKEUP BRUSHES

If you invest in high-quality makeup brushes, you will have them for years. Take good care of your brushes by cleaning them gently.

A commercial sanitizer can be used for quick cleaning, although spray-on instant sanitizers contain a high level of alcohol and will dry brushes over time. A gentle shampoo or brush solvent should be used to truly clean the brushes. These products will not hurt brushes and may actually help them last longer. One cautionary note: the brush should always be put into running or still water with the ferrule (the metal ring that keeps bristles and handle together) pointing downward. If the brush is pointed up, the water may remove the glue that keeps the bristles in place. Rinse brushes thoroughly after cleansing. Because they will dry in the shape they are left in, reshape the wet bristles and lay the brushes flat to dry.

DISPOSABLE IMPLEMENTS

Disposable implements include the following items:

- *Sponges.* Available in a variety of sizes and shapes, including wedges and circles, and work well to apply and blend foundation, cream or powder blush, powder, or concealer.

- *Powder or cotton puffs.* May be made of velour or cotton and are used to apply and blend powder, powder foundation, or powder blush.
- *Mascara wands.* Usually plastic and are used to apply mascara on a client; generally disposable, so as to ensure proper hygiene.
- *Spatulas.* Wooden or plastic, with a wide, flat base; used to remove makeup such as lipstick, foundation, concealer, powder, blush, and shadow from their containers.
- *Disposable lip brushes.* May be plastic or another synthetic; used to hygienically apply lip color to a client.
- *Sponge-tipped shadow applicators.* Used to apply shadow and lip color or to blend eyeliner; may be used to remove unwanted makeup from eyes or lips.
- *Cotton swabs.* May be used to apply shadow, blend eyeliner, or remove unwanted makeup from the eyes or lips.
- *Cotton pads or puffs.* May be used with astringents or makeup removers; also used to apply powder products.
- *Pencil sharpener.* Used before each application of eye or lip liner pencil to ensure hygienic application.

MAKEUP COLOR THEORY

A strong understanding of how color works is vital to effective makeup application. Everyone sees color a little differently, and it may take a while to learn to see color naturally and easily. The following guide will help you to identify primary, secondary, and tertiary colors, as well as warm, cool, and complementary colors. Once you understand these basics of color theory, you can use your creative instincts to invent any color palette you desire.

Primary colors are fundamental colors that cannot be obtained from a mixture. The primary colors are yellow, red, and blue (Figure 23-11).

Secondary colors are obtained by mixing equal parts of two primary colors. Yellow mixed with red makes orange. Red mixed with blue makes violet. Yellow mixed with blue makes green (Figure 23-12).

Tertiary colors are formed by mixing equal amounts of a secondary color and its neighboring primary color on the color wheel. These colors are named by primary color first, and secondary color second. For example, when we mix blue (a primary) with violet (a neighboring secondary), we call the resulting color blue-violet (Figure 23-13).

Primary and secondary colors directly opposite each other on the color wheel are called complementary colors. When mixed, these colors cancel each other out to create a neutral brown or gray color. When complementary colors are placed next to each other, each color makes the

LAW

Guidelines for cleaning and sanitizing brushes vary from state to state, so check with your regulatory agency.

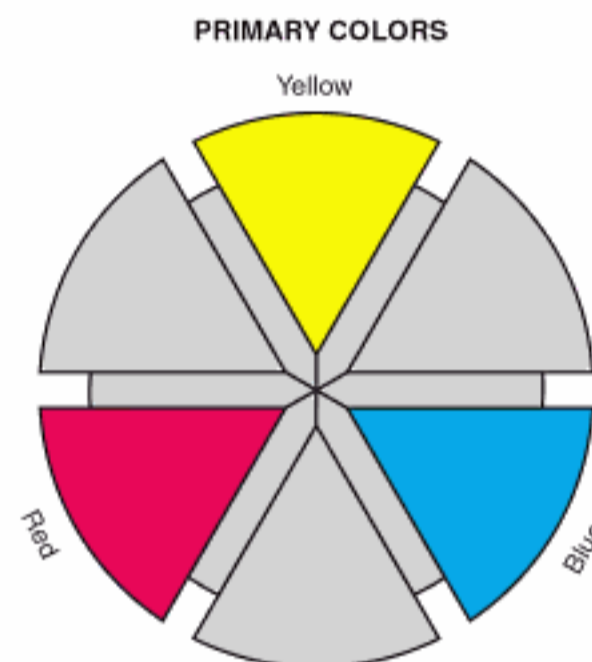


Figure 23-11 Primary colors.

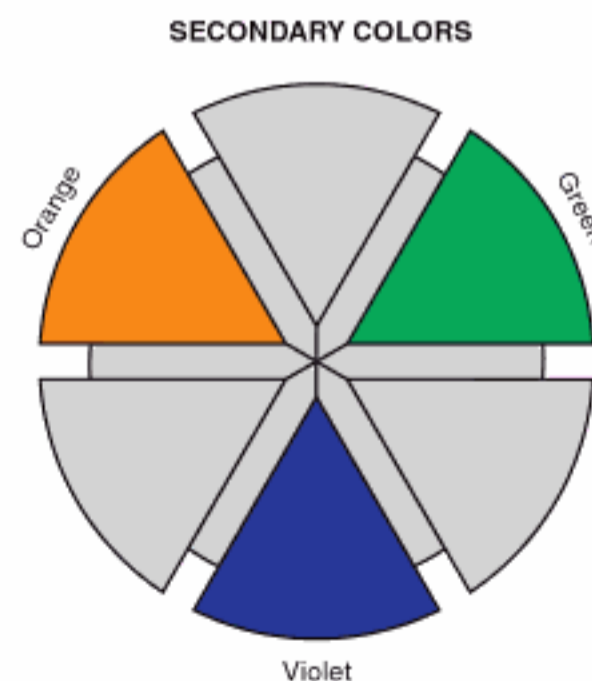


Figure 23-12 Secondary colors.

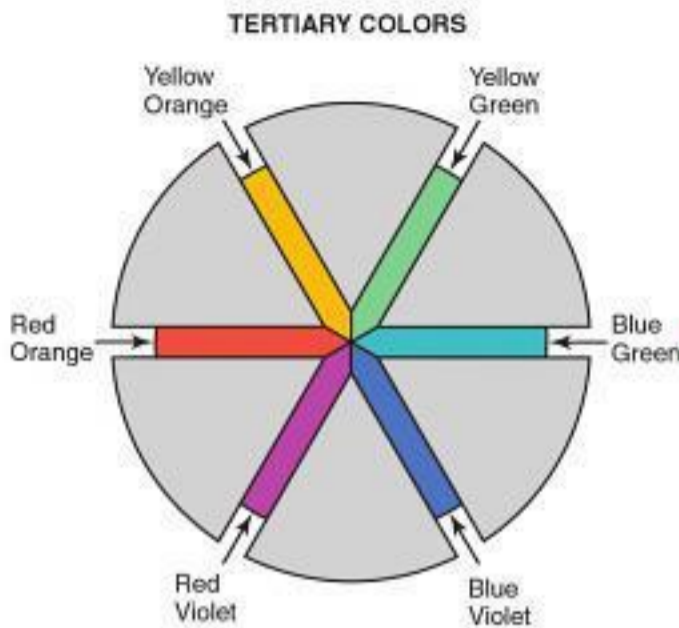


Figure 23-13 Tertiary colors.

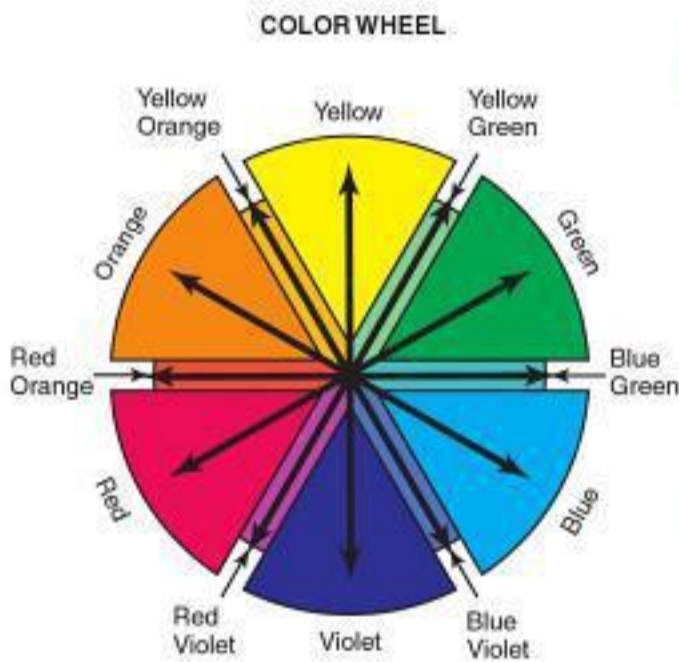


Figure 23-14 Complementary colors.

other look brighter, resulting in greater contrast. For example, if you place blue next to orange, the blue seems bluer, the orange brighter. Try this with markers or colored paper to compare. The concept of complementary colors is useful when determining color choice. For example, the use of complementary colors will emphasize eye color, making the eyes appear brighter (Figure 23-14).

WARM AND COOL COLORS

Learning the difference between warm and cool colors is essential to your success as a makeup artist. This is the basis of all color selection, and understanding the difference will enable you to properly enhance your client's coloring.

As you look at the color wheel, think of it as a tool in determining color choice. There are three main factors to consider when choosing colors for a client: skin color, eye color, and hair color.

DETERMINING SKIN COLOR

When determining skin color, you must first decide if the skin is light, medium, or dark in level. Then determine whether the tone of the skin is warm or cool (use Table 23-1 as a guide). You may not see skin colors truly in the beginning. Give yourself time and practice to develop your eye.

Warm colors are the range from yellow and gold through the oranges, red-oranges, most reds, and even some yellow-greens. **Cool colors** suggest coolness and are dominated by blues, greens, violets, and blue-reds (Figure 23-15). You will notice that reds can be both warm and cool. If the red is orange-based, it is warm. If it is blue-based, it is cool. Green is similar: if a green contains more gold, it is warm; if it contains more blue, it is cool.

SKIN COLORS	Warm	Cool
	Light skin	yellow, gold, pale peach
Medium skin	yellow, yellow-orange, red	olive (yellow-green)
Dark skin	red, orange-brown, red-brown	dark olive, blue, blue-black, ebony

Table 23-1 Skin Colors and Tones

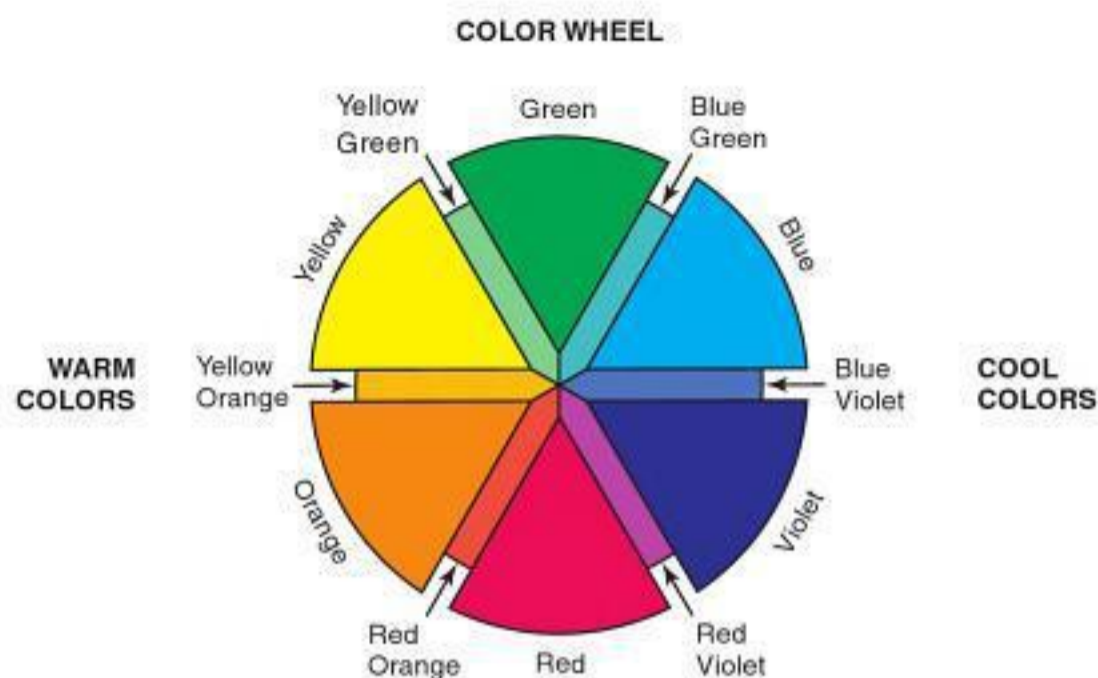


Figure 23-15 Warm and cool colors.

You may hear people refer to a color as having a lot of blue in it. For example: “This lipstick has a blue base” or “That blush is very blue.” This does not mean that the color is truly blue. Rather, it means that when the pigments were mixed to create that cosmetic, more blue color was added. What you are seeing might look primarily violet or magenta.

SELECTING MAKEUP COLORS

Now that we have defined warm and cool, it is time to learn a system that will help you feel more comfortable when choosing colors for your clients. Keep in mind that this is simply one way of choosing colors. The art of makeup application allows for more than one way to achieve the result you want.

A neutral skin tone contains equal elements of warm and cool, no matter how light or dark the skin is. Remember to always match your foundation color to the color of the skin, or use the corrective techniques discussed later in this chapter.

Once you have determined if the skin is light, medium, or dark, you may choose eye, cheek, and lip colors to match the skin color in level, or try contrast for more impact. Most skin tones and levels can wear a surprisingly wide range of eye, cheek, and lip colors.

- If skin color is light, you may use light colors for a soft, natural look. Medium to dark colors will create a more dramatic look.
- If skin color is medium, medium tones will create an understated look. Light or dark tones will provide more contrast and will appear bolder.
- If skin color is dark, dark tones will be most subtle. Medium to medium-light or bright tones will be striking and vivid (Figure 23-16).

Be cautious when choosing tones lighter than the skin. If the color is too light, it will turn gray or chalky on the skin. Look for translucent, shimmery colors if you are choosing these tones.



Figure 23-16 Choose cosmetics to enhance your client's skin color and hair color.

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COMPLEMENTARY COLORS FOR EYES

As you begin recommending eye, cheek, and lip colors, neutrals will always be your safest choice. They contain elements of warm and cool and work well on any skin tone, eye color, or hair color. They come in variations of brown or gray. For instance, they may have a warm or cool base with brown tones. Or you might choose a plum-brown, which would be considered a cool neutral. An orange-brown would be considered a warm neutral. Charcoal gray is a cool neutral, as is blue-gray.

Contrary to popular belief, matching eye color with shadow color is not the best way to enhance this area as it only creates a flat region of color. By contrasting eye color with complementary colors, you emphasize the color most effectively.

The following is a guideline for eye color selection. You may refer back to the color wheel for additional help in determining complementary colors.

REVIEWING COLOR SELECTION STEPS

1. Determine skin level: light, medium, or dark.
2. Determine skin undertone: warm, cool, or neutral.
3. Determine eye color: blue, green, brown, and so forth.
4. Determine complementary colors.
5. Determine hair color: warm or cool.
6. Choose eye makeup colors based on complementary or contrasting colors.
7. Coordinate cheek and lip colors within the same color family: warm, cool, or neutral.
8. Apply makeup.

The best thing about choosing colors is the unlimited number of choices you have. Try one or all methods of choosing color. Complementary color choices for eye colors are summarized below.

- *Complementary colors for blue eyes.* Orange is the complementary color to blue. Because orange contains yellow and red, shadows with any of these colors in them will make eyes look bluer. Common choices include gold, warm orange-browns like peach and copper, red-browns like mauves and plum, and neutrals like taupe or camel.
- *Complementary colors for green eyes.* Red is the complementary color to green. Because red shadows tend to make the eyes look tired or bloodshot, pure red tones are not recommended. Instead, use brown-based reds or other color options next to red on the color wheel. These include red-orange, red-violet, and violet. Popular choices are coppers, rusts, pinks, plums, mauves, and purples.
- *Complementary colors for brown eyes.* Brown eyes are neutral and can wear any color. Recommended choices include contrasting colors such as greens, blues, grays, and silvers.

BASIC MAKEUP APPLICATION



Figure 23-17 Client consultation.

CLIENT CONSULTATION

The first step in the makeup process, as with all other services that take place in the salon, is the client consultation. This is where you ask the client the questions that will bring out her wishes and concerns. Listen closely and try not to impose your own opinions too much. Your role is to listen to what your client is saying, and only then make recommendations based on your knowledge. If she chooses not to act on your recommendations, do not take it personally. In time, perhaps she will.

CONSULTATION AREA

The area that you use for consultations must be clean and tidy. No one wants to see a messy makeup unit or dirty brushes lying about. Clean your brushes after each use and tidy your makeup area daily. Also, keep a portfolio in the consultation area that includes photographs of your own work, or pictures from magazines. The client can go through your portfolio to find styles and colors that appeal to her.

LIGHTING

Adequate and flattering lighting is essential for both the consultation and application parts of the makeup process. Be sure your client's face is evenly lit and without dark shadows. Natural light is the best choice, but if it is necessary to use artificial light, it should be a combination of incandescent light (warm bulb light) and fluorescent light (cool industrial tube light). If you must choose between the two, incandescent light will be more flattering.

Make sure that the light always shines directly and evenly on the face. And remember, good lighting makes a client look good, and clients who look good are more likely to purchase the products you recommend. When this happens, everyone comes out a winner.

MAKEUP CONSULTATION

A makeup service should always begin with a warm introduction to your client. Visually assess her to understand her personal style. This will give you cues as you continue your consultation (Figure 23-17).

Engaging the client in conversation will help you to determine her needs. Gather whatever information you can on her skin condition, how much or how little makeup she wears, daily versus special occasion makeup, the amount of time she spends applying makeup, colors she likes or dislikes, and any makeup areas she is having trouble with.

Record this information on a client consultation card. Also, write down your recommendations so that you may refer back to them at the end of the makeup application. Reviewing and restating your written advice with the client at the end of the service will also help you sell the retail products you hope she will purchase (Figure 23-18). Escort your client to the reception area where you can assist her in gathering the products that



Figure 23-18 Retailing cosmetic products.

you have recommended. Ask her if she has any other questions and, if so, give clear answers. If possible, set up a time for her next appointment. Then give her a business card with your name on it and shake her hand as you turn her over to the receptionist who will check her out.

4. **Apply cleansing cream or lotion.** Remove a small quantity of cleanser from the container with a spatula and place it in the palm of the left hand, or apply a dab of lotion to an applicator. With the fingertips of the right hand, place dabs of cleanser on the forehead, nose, cheeks, chin, and neck. Spread the cleanser over the face and neck with light upward and outward circular movements (Figure 23-20).
5. **Remove cleanser.** Use tissue mitts or moistened cotton pads to remove the cleanser, using an upward and outward motion (Figure 23-21). Be especially gentle around the eyes. If makeup or color is particularly heavy on the eyes and lips, apply the cleanser a second time, as needed.
6. **Apply astringent lotion or toner.** For oily skin, apply astringent lotion; for dry skin, apply a skin toner. Moisten a cotton pad with the lotion and pat it lightly over the entire face and under the chin and neck. Blot off excess moisture with tissues or a cotton pad (Figure 23-22).
7. **Apply moisturizer.** When necessary, as in the case of dry and delicate skin, apply a moisturizing lotion. Dab a small amount of the moisturizer on the forehead, cheeks, and chin. Blend upward over the face. Remove excess with a tissue, cotton pad, or facial sponge.
8. **Groom eyebrows.** Eyebrow arching (tweezing) is a complete service in itself (see Chapter 21.) You may, however, choose to remove a few stray hairs before a facial makeup by tweezing the hair in the same direction in which it grows.

PROCEDURE

1. **Apply foundation.** Test the color by blending the foundation on the client's jawline. When you are satisfied with your choice, place a small amount of the foundation on a palette, in the palm, or on the back of your hand and, using the tips of your fingers or a cosmetic sponge, apply sparingly and evenly over the entire face and around the neckline.

Starting at the center of the face, blend with outward and downward motions (Figure 23-23). Blend near the hairline, and remove excess foundation with a cosmetic sponge or cotton pledget.



Figure 23-20 Apply cleansing cream or lotion.



Figure 23-21 Remove the cleanser.



Figure 23-22 Blot excess moisture.



Figure 23-23 Apply foundation.

2. **Apply concealer.** Select the appropriate type and color of concealer and then scrape a small amount onto a spatula. Using a brush or fingertips, apply the concealer lightly where needed (under the eyes, over blemishes, to cover redness). Blend in with a patting motion. If a powder foundation is being used, the concealer must be applied before the foundation (Figure 23-24). Your instructor may prefer a different method that may be equally correct.



Figure 23-24 Apply concealer.

3. **Apply powder.** Apply the powder with a sanitary puff or cosmetic sponge, pressing it over the face and whisking off the excess with a puff or powder brush (Figure 23-25). A moistened cosmetic sponge may be pressed over the finished makeup to give the face a matte look.



Figure 23-25 Apply powder.

4. **Apply eye color.** Select a complementary color in a medium tone and then, beginning at the lash line or crease, apply lightly and blend outward with a brush or disposable applicator (Figure 23-26).



Figure 23-26 Apply eye color.

5. **Apply eyeliner.** Select pencil, pressed, or liquid liner in a color to harmonize with the mascara you will be applying. Pull the eyelid taut as the client looks down, and draw a very fine line along the entire lid (Figure 23-27). You may apply to the top lash line and/or bottom lash line. If eyeliner pencil is used, the point should be fine and care should be taken to avoid injury or discomfort. Be sure to trim the pencil before each use.



Figure 23-27 Apply eyeliner.

6. **Apply eyebrow color.** Brush the brows in place. With light feathery strokes, apply color with a fine-pointed pencil or fill in with a brush and shadow (Figure 23-28). Excess color can be removed with a cotton-tipped swab.



Figure 23-28 Apply eyebrow color.

7. **Apply mascara.** Apply mascara to the top and underside of the upper lashes with careful, gentle strokes until the desired effect is achieved (Figure 23-29). Use a fresh brush or applicator to separate the lashes. Mascara may be applied to the lower lashes if desired, but the effect should be subtle.



Figure 23-29 Apply mascara.

8. **Apply cheek color.** Have the client smile, to raise the cheeks, and then apply powder cheek color,

blending outward and upward toward the temples (Figure 23-30). Liquid or cream cheek color is applied with a sanitized applicator before powder, and sometimes on bare skin.

9. **Apply lip color.** Use a freshly sharpened pencil to line the lips, beginning at the outer corner of the upper lip and working toward the middle (Figure 23-31). Repeat on the opposite side. Connect the center peaks using rounded strokes, following the natural line of the lip.

Outline the lower lip from the outer corners in, and then apply liner on the lips, staying within the outline. For reasons of hygiene, lip color must not be applied directly from the container unless it belongs to the client. Use a spatula to remove the lip color from the container, then take it from the spatula with a lip brush. Rest your ring finger on the client's chin to steady your hand. Ask the client to relax her lips and part them slightly. Brush on the lip color (Figure 23-32). Then ask the client to smile slightly so that you can smooth the lip color into any small crevices. Blot the lips with tissue to remove excess product and set the lip color. Powdering is not recommended, as a moist look is more desirable for lips (Figure 23-33).

CLEANUP AND SANITATION

1. Discard all disposable items, such as sponges, pads, spatulas, and applicators, after each use.
2. Disinfect implements such as eyelash curlers.
3. Clean and sanitize brushes using a commercial brush sanitizer.
4. Place towels, linens, makeup cape, and other washable items in a hamper.
5. Sanitize your workstation.
6. Wash your hands with soap and warm water.

Here's a TIP

Skin varies in color and tone from person to person, regardless of ethnic background. When applying makeup, always remember to analyze the skin and choose makeup that will enhance the client's skin, eyes, and hair color, as well as her features.



Figure 23-30 Apply cheek color.



Figure 23-31 Outline the lips with lip liner.



Figure 23-32 Apply lip color.



Figure 23-33 Finished makeup application.



CAUTION

Remember, when applying mascara, use a disposable mascara wand and dip into a clean tube of mascara. Then dispose of the wand. Never "double dip."



CAUTION

Corrective makeup can be very effective if applied properly. However, a less-experienced cosmetologist should proceed with caution, as improper application, insufficient blending, or the wrong choice of colors can make the face look dirty and artificial.



Figure 23-36 Oval face.



Figure 23-37 Oval face with makeup.

than the other, or the eyebrows might not match. In fact, these tiny imperfections can make the face more interesting if treated artfully. In any case, facial makeup can create the illusion of better balance and proportion when so desired.

Facial features can be accented with proper highlighting, subdued with correct shadowing or shading, and balanced with the proper hairstyle. A basic rule for the application of makeup is that highlighting emphasizes a feature, while shadowing minimizes it. A highlight is produced when a cosmetic, usually foundation that is lighter than the original foundation, is used on a particular part of the face. A shadow is formed when the foundation is darker than the original color. The use of shadows (dark colors and shades) minimizes prominent features so they are less noticeable.

Before you undertake any kind of corrective makeup application, you should have a clear sense of how to analyze the shape of the faces you will be working with.

ANALYZING FEATURES AND FACE SHAPE

The basic rule of makeup application is to emphasize the client's attractive features, while minimizing features that are less appealing. Learning to see the face and its features as a whole and determining the best makeup for an individual takes practice. While the oval face with well-proportioned features has long been considered the ideal, other face shapes are just as attractive in their own way. The goal of effective makeup application is to enhance the client's individuality, not to "remake" her image according to some ideal standard.

OVAL-SHAPED FACE

The artistically ideal proportions and features of the oval face are the standard to which you will refer when learning the techniques of corrective makeup application. The face is divided into three equal horizontal sections.

The first third is measured from the hairline to the top of the eyebrows. The second third is measured from the top of the eyebrows to the end of the nose. The last third is measured from the end of the nose to the bottom of the chin.

The ideal oval face is approximately three-fourths as wide as it is long. The distance between the eyes is the width of one eye (Figures 23-36 and 23-37).

ROUND FACE

The round face is usually broader in proportion to its length than the oval face. It has a rounded chin and hairline. Corrective makeup can be applied to slenderize and lengthen the face (Figures 23-38 and 23-39).

SQUARE-SHAPED FACE

The square face is composed of comparatively straight lines with a wide forehead and square jawline. Corrective makeup can be applied to offset the squareness and soften the hard lines around the face (Figures 23-40 and 23-41).



Figure 23-46 Diamond-shaped face.



Figure 23-47 Diamond-shaped face with corrective makeup.



Figure 23-48 Oblong face.



Figure 23-49 Oblong face with corrective makeup.



Figure 23-50 Protruding forehead with corrective makeup.



Figure 23-51 Short flat nose with corrective makeup.

DIAMOND-SHAPED FACE

This face has a narrow forehead. The greatest width is across the cheekbones. Corrective makeup can be applied to reduce the width across the cheekbone line (Figures 23-46 and 23-47).

OBLONG FACE

This face has greater length in proportion to its width than the square or round face. It is long and narrow. Corrective makeup can be applied to create the illusion of width across the cheekbone line, making the face appear shorter (Figures 23-48 and 23-49).

FOREHEAD AREA

For a low forehead, the application of a lighter foundation lends a broader appearance between the brows and hairline. For a protruding forehead, applying a darker foundation over the prominent area gives an illusion of fullness to the rest of the face and minimizes the bulging forehead. A suitable hairstyle also goes a long way toward drawing attention away from the forehead (Figure 23-50).

NOSE AND CHIN AREAS

For a large or protruding nose, apply a darker foundation on the nose and a lighter foundation on the cheeks at the sides of the nose. This will create fullness in the cheeks and will make the nose appear smaller. Avoid placing cheek color close to the nose.

For a short and flat nose, apply a lighter foundation down the center of the nose, ending at the tip. This will make the nose appear longer and larger.

If the nostrils are wide, apply a darker foundation to both sides of the nostrils (Figure 23-51).

For a broad nose, use a darker foundation on the sides of the nose and nostrils. Avoid carrying this dark tone into the laugh lines because it will accentuate them. The foundation must be carefully blended to avoid visible lines (Figure 23-52).

For a protruding chin and receding nose, shadow the chin with a darker foundation and highlight the nose with a lighter foundation. For a receding chin, highlight the chin by using a lighter foundation than the one used on the face.

For a sagging double chin, use a darker foundation on the sagging portion, and use a natural skin tone foundation on the face (Figure 23-53).

JAWLINE AND NECK AREA

The neck and jaw are just as important as the eyes, cheeks, and lips. When applying makeup, blend the foundation onto the neck so that the client's color is consistent from face to neck. Always set with a translucent powder to avoid transfer onto the client's clothing.

To correct a broad jawline, apply a darker shade of foundation over the heavy area of the jaw, starting at the temples. This will minimize the lower part of the face and create an illusion of width in the upper part of the face (Figure 23-54).

To correct a narrow jawline, highlight by using a lighter foundation shade (Figure 23-55).

For a round, square, or triangular face, apply a darker shade of foundation over the prominent part of the jawline. By creating a shadow over this area, the prominent part of the jaw will appear softer and more oval.

For a small face and a short, thick neck, use a darker foundation on the neck than the one used on the face. This will make the neck appear thinner.

For a long, thin neck, apply a lighter shade of foundation on the neck than the one used on the face. This will create fullness and counteract the long, thin appearance of the neck (Figure 23-56).



Figure 23-52 Broad nose with corrective makeup.



Figure 23-53 Double chin with corrective makeup.



Figure 23-54 Broad jawline with corrective makeup.



Figure 23-55 Narrow jawline with corrective makeup.



Figure 23-56 Long, thin neck with corrective makeup.

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CORRECTIVE MAKEUP FOR THE EYES

The eyes are very important in balancing facial features. The proper application of eye colors and shadow can create the illusion of the eyes being larger or smaller, and will enhance the overall attractiveness of the face.

Round eyes can be lengthened by extending the shadow beyond the outer corner of the eyes (Figure 23-57 and 23-58).

Close-set eyes are closer together than the length of one eye. For eyes that are too close together, lightly apply shadow up from the outer edge of the eyes (Figure 23-59 and 23-60).

Protruding or bulging eyes can be minimized by blending the shadow carefully over the prominent part of the upper lid, carrying it lightly toward the eyebrow. Use a medium to deep shadow color (Figures 23-61 and 23-62).

Heavy-lidded eyes. Shadow evenly and lightly across the lid from the edge of the eyelash line to the small crease in the eye socket (Figures 23-63 and 23-64).



Figure 23-57 Round eyes.



Figure 23-58 Round eyes with corrective makeup.



Figure 23-59 Close-set eyes.



Figure 23-60 Close-set eyes with corrective makeup.



Figure 23-61 Protruding eyes.



Figure 23-62 Protruding eyes with corrective makeup.

service. The objective is to make the client's own lashes look fuller, longer, and more attractive without appearing unnatural.

Two types of artificial eyelashes are commonly used. **Band lashes** (also called strip lashes) are eyelash hairs on a strip that are applied with adhesive to the natural lash line. Individual lashes are separate artificial eyelashes that are applied to the eyelids one at a time. **Eyelash adhesive** is used to make artificial eyelashes adhere, or stick, to the natural lash line.

APPLYING BAND LASHES

Band lashes (sometimes referred to as strip lashes) are available in a variety of sizes, textures, and colors. They can be made from human hair, certain animal hair such as mink, or synthetic fibers. Synthetic fiber eyelashes are made with a permanent curl and do not react to changes in weather conditions. Artificial eyelashes are available in natural colors ranging from light to dark brown and black or light to dark auburn, as well as bright, trendy colors. Black and dark brown are the most popular choices.

REMOVING BAND EYELASHES

You may use commercial preparations, such as pads saturated with special lotions, to remove band eyelashes. The lash base may also be softened by applying a face cloth or cotton pad saturated with warm water and a gentle facial cleanser. Hold the cloth over the eyes for a few seconds to soften the adhesive. Starting from the outer corner, remove the lashes carefully to avoid pulling out the client's own lashes. Use cotton tips to remove any makeup and adhesive remaining on the eyelid.

INDIVIDUAL LASHES

Individual eyelashes are synthetic and attach directly to a client's own lashes at their base. This procedure is sometimes referred to as **eye tabbing**. Follow the manufacturer's instructions for attaching individual lashes.

PROCEDURE

23-2

BAND LASH APPLICATION

IMPLEMENTS AND MATERIALS

- Wet sanitizer for metal implements
- Headband or hair clip
- Tweezers
- Cotton swabs
- Eyelash brushes
- Eyelash curler
- Hand mirror
- Manicure scissors
- Adjustable light (gooseneck lamp)
- Makeup chair
- Lash adhesive
- Adhesive tray
- Eyelid and eyelash cleanser
- Eyelash remover
- Cotton pads
- Eye makeup remover
- Makeup cape
- Trays of artificial eyelashes
- Pencil sharpener

PREPARATION

1. **Client consultation.** Discuss with the client the desired length of the lashes and the effect she hopes to achieve.
2. **Wash your hands.**
3. **Seat client.** Place the client in the makeup chair with her head at a comfortable working height. The client's face should be well and evenly lit, but avoid shining the light directly into the eyes. Work from behind or to the side of the client. Avoid working directly in front of the client whenever possible.
4. **Drape client.** Properly drape the client to protect her clothing and have her use a hairline strip, headband, or turban during the procedure.
5. **Remove contact lenses.** If the client wears contact lenses, they must be removed before starting the procedure.
6. **Remove eye makeup.** If the client has not already done so, remove all eye makeup so that the lash adhesive will adhere properly. Work carefully and gently. Follow the manufacturer's instructions carefully.

PROCEDURE

1. **Prepare lashes.** Brush the client's eyelashes to make sure they are clean and free of foreign matter, such as mascara particles. If the client's lashes are straight, they can be curled with an eyelash curler before you apply the artificial lashes.
2. Carefully remove the eyelash band from the package.
3. **Shape eyelash.** Start with the upper lash. If it is too long to fit the curve of the upper eyelid, trim the outside edge. Use your fingers to bend the lash into a horseshoe shape to make it more flexible so that it fits the contour of the eyelid.
4. **Feather lash.** Feather the lash by nipping into it with the points of your scissors. This creates a more natural look (Figure 23-77).
5. **Apply adhesive.** Apply a thin strip of lash adhesive to the base of the lash and allow a few seconds for it to set (Figure 23-78).



Figure 23-77 Feather the band lashes.



Figure 23-78 Apply lash adhesive to the band lashes.

6. **Apply the lash.** Start with the shorter part of the lash and place it on the inner corner of the eye toward the nose. Position the rest of the artificial lash as close to the client's own lash as possible. Use the rounded end of a lash liner brush or tweezers to press the lash on (Figure 23-79). Be very careful and gentle when applying the lashes. If eyeliner is to be used, the line is usually drawn on the eyelid before the lash is applied and retouched when the artificial lash is in place (Figure 23-80).
7. **Apply the lower lash.** Lower lash application is optional, as it tends to look more unnatural. Trim the lash as necessary and apply adhesive in the same way you did for the upper lash. Place the lash on top of the client's lower lash. Place the shorter lash toward the center of the eye and the longer lash toward the outer part of the lid (Figure 23-81).

CLEANUP AND SANITATION

1. Discard all disposable items, such as sponges, pads, spatulas, and applicators.
2. Disinfect implements, such as the eyelash curler.
3. Clean and sanitize brushes using a commercial brush sanitizer.
4. Place all towels, linens, and makeup cape in a hamper.
5. Sanitize your workstation.
6. Wash your hands with soap and warm water.



Figure 23-79 Apply the band lashes to the eyelid.



Figure 23-80 Retouch the lash line with eyeliner.



Figure 23-81 Finished band eyelash application.



CAUTION

Remind the client to take special care with artificial lashes when swimming, bathing, or cleansing the face. Water or cleansing products will loosen artificial lashes.

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CHAPTER GLOSSARY

<i>eye tabbing</i>	Procedure in which individual synthetic eyelashes are attached directly to a client's own lashes at their base.
<i>face powder</i>	Cosmetic powder, sometimes tinted and scented, that is used to add a matte or nonshiny finish to the face.
<i>foundation</i>	Cosmetic, usually tinted, that is used as a base makeup and is used to cover or even out the coloring of skin.
<i>greasepaint</i>	Heavy makeup used for theatrical purposes.
<i>lip color</i>	Cosmetic in paste form, usually in a metal or plastic tube, manufactured in a variety of colors and used to color the lips; also called lipstick or gloss.
<i>lip liner</i>	Colored pencil or brush used to outline the lips and to help keep lip color from bleeding into the small lines around the mouth.
<i>mascara</i>	Cosmetic preparation used to darken, define, and thicken the eyelashes.
<i>matte</i>	Nonshiny.
<i>warm colors</i>	Range of colors from yellow and gold through oranges, red-oranges, most reds, and even some yellow-greens.