Testimony in Opposition to Senate Bill 348

AN ACT concerning cosmetologists and cosmetology; exempting hair threading from the practice of cosmetology; requirements; amending K.S.A. 65-1901 and 65-1928 and repealing the existing sections.

Presented to the House Committee of Health and Human Services By Nichole Hines, Vice Chairperson of the Kansas Board of Cosmetology

March 07, 2022

Chairperson Landwehr and Members of the Committee:

Thank you for letting me provide testimony in opposition to SB 348

The mission of the Kansas Board of Cosmetology (Board) is to protect the health and safety of the consuming public by licensing qualified individuals and enforcing standards of practice and sanitation. The Board of Cosmetology (Board) licenses over 26,000 individual practitioners, instructor/trainers, apprentices, and holders of temporary permits in cosmetology, electrology, esthetics, nail technology, and body arts. The Board licenses almost 5,000 facilities and schools in those same professions, including tanning.

Because of the impact on the public's health and safety, the Board requests you leave the practice of threading under the Board's jurisdiction.

This bill would exclude hair threading from the jurisdiction of the Board. Hair threading is a method of removing unwanted hair from the eyebrows, upper lip, or other parts of the body. The threading technique involves the use of cotton thread. The thread is twisted and rolled along the surface of the skin entwining the hairs in the thread, which are then lifted quickly from the follicles. The bill, as introduced, would allow a person to use over-the-counter astringents, gels or powders, tweezers or scissors on the threaded area. This bill would be effective upon publication in the statute book.

According to the Milady Standard Cosmetology textbook, 1 the dermis 2 is comprised of two layers: the papillary or superficial layer, and the reticular or deeper layer. The papillary layer is the outer layer of the dermis, directly beneath the epidermis. Here you will find the dermal papillae, which are small, cone-shaped elevations at the base of the hair follicles. Some papillae contain looped capillaries, which are disturbed during the hair removal. This can cause a small drop of blood to rise to the surface of the skin and exposes the client/consumer to possible infection, and the practitioner to bloodborne pathogens. Other papillae contain small epidermal structures called tactile corpuscles, with nerve endings that are sensitive to the touch and pressure.³ Knowledge, procedural practices and skill are necessary to prevent the spread of infection or disease.

² Dermis is the vascular, thick layer of the skin lying below the epidermis and above the superficial fascia that

contains fibroblasts, macrophages, mast cells, B cells, and sensory nerve endings and has an extracellular matrix composed of proteoglycans and glycoproteins embedded with collagen and elastin fibers. https://www.merriamwebster.com/dictionary/dermis, accessed February 21, 2019.

¹ 12th Edition (2012).

³ A pictorial representation of the anatomy of the skin may be found at the following website: https://www.hopkinsmedicine.org/neurology_neurosurgery/centers_clinics/cutaneous_nerve_lab/patients/skin_a natomy.html.

Additionally, the Board is concerned with sanitation standards for both the practitioner and the facility. Although the bill would require the Kansas Department of Health and Environment to develop a brochure containing information about infection control techniques appropriate for threading, the individual would only be required to complete a self-test. That means the individual will not be subjected to an independent review of his or her knowledge, practice or skill in the implementation of sanitation and infection control techniques. Further, the facility where threading would be practiced is not subjected to any sanitation requirements, or any requirements for that matter, under the bill.

On behalf of the Board, I thank you for your time and consideration of our testimony as we seek to protect the consuming public. For all of the reasons stated above, the Board request the law not be changed to exclude threading from the definition of cosmetology.

Sincerely,

Nichole Hines, Vice Chairperson Kansas Board of Cosmetology

- COMPLAINTS
- INSPECTIONS
- REMEDIAL ACTION
- VIOLATIONS
- HAIR BRAIDING COMPLAINT

#120

Page 03/03

RECEIVED BOARD OF COSMETOLOGY JAN 2 9 2016



KANSAS BOARD OF COSMETOLOGY 714 S.W. Jackson, Suite 100

714 S.W. Jackson, Suite 100 Topeka, Kansas 66603 www.kansas.gov/kboc (785) 296-3155 COMPLAINT FORM

No. ______For Office Use Only

Have you contacted the individual or the establishment to try and resolve your complain	nt?
If yes, please tell us what happened? (Include names of persons contacted and dates of	of contact)
a told him that his requires that individuals to be is senced the told me that he in each establishment so that he can him girls. Lisenced individuals work during work evenings to weekends, as not to get the middle eastern girls 700 an hour. Thay also have would you like this complaint to be resolved? that he knows that girls no nothing about Sanitation. He hire how would not be have the sanitation. He hire how. It tells them that he will pay them to due to the fact they had to be trained.	victuals who thread re imiddle eastern' the day & the others caught the pays to buy thydrocide + patit le text messages confirmin irls should belicensed. The middle eastern shem @ 17.00 an
VANCE TO SPIN O	
Supporting Documentation Attach copies of related documents that support your complaint. Please do not enclose original documents, as they cannot be returned to you. Photographs Medical Records Social Media Postings Correspondence Other (please list):	Advertisements Recelpt(s)
Testimony	
Are you willing to appear under oath as a witness to be cross-examined concerning the Yes \sum No (If you are unwilling to testify or fail to appear if requested, the Board maths complaint).	
Verification I declare under penalty of perjury that I have read and understand this fo	orm and that the information provided
on this form and all attached pages/documents is true, correct and complete to the best	
MARIE	1-27-16
Signature-Please print this form and sign your pame OR type your First and Last Name if submitting the form electronically)	Date Signed

Ms. Flowers,

BOARD OF COSMETOLOGY

JUN 0 8 2016

I would like to inform you about the Perfect Brow Bar threading salon in Topeka, KS. The owner of the salon hired employees who do not hold any state license. These employees are not authorized to work there. I would like to request you to take necessary actions against the owner and staff who are involved in this activity. The staff members' names that don't carry license are following:

Bhumi

Hina

Andleep

Chandni

These employees run entire business. The owner uses someone else's employee license for display who doesn't even work there. I received this information somehow and I would like to aware the cosmetology department. As a citizen of The United States, I take it as my duty to inform about unauthorized activities in our community. I hope you take necessary action and keep equality in our community.

Sincerely,

An ordinary Citizen



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BOARD OF COSMETOLOGY

MAR 3 2017

nature o	of Complaint (Check all t	hat apply)		
	Unlicensed Establishmen Unlicensed Practitioner Expired Establishment Expired Practitioner/Appr Felony Conviction		Obtaining a License by Fraud Discipline in another State False/Deceptive Advertising Injury Infection	Health & Sanitation Procedure on a Minor (Body Art) Service to a Minor (Tanning)
If you were injured, was there a blood spill? Yes No No				
If yes, wh	nat did the practitioner do	after the blood	spill?	
I CI ELIGH DUTE:	omplaned about the she is unlice	out the retector resect	blood on my ski ntion and nothing	r. So I figured
Have you	u been treated by a physic	cian?	9	Yes No
Have you Physicia		cian?	Email	Phone
Physicia		cian?	Email	
		cian?	Email City	
Physicia		cian?		Phone
Address Have you	n Name			Phone Zip
Physician Address	n Name		City	Phone Zip
Address Have you	n Name	another state/lo	City	Phone Zip
Address Have you Date Date	n Name	another state/lo Agency Agency	City cal agency or a law enforcement ager	Phone Zip
Address Have you Date Date	n Name u filed this complaint with u retained an attorney to a	another state/lo Agency Agency	City cal agency or a law enforcement ager	Phone State Zip ncy Yes No
Address Have you Date Date Have you	n Name u filed this complaint with u retained an attorney to a	another state/lo Agency Agency	City cal agency or a law enforcement ager blying this matter?	Phone State Zip ncy Yes] No
Address Have you Date Date Have you	n Name u filed this complaint with u retained an attorney to a	another state/lo Agency Agency	City cal agency or a law enforcement ager blying this matter?	Phone State Zip ncy Yes] No

Narrative

- Please provide a statement of the facts, allegations and/or concerns.
- Please include a specific description of the incident:
 - When did it happen
 - Where did it happen
 - Who was involved
 - What happened
 - How did it happen
- Attach a copy of each document you possess that can substantiate any facts in your complaint.
- You may complete the narrative in the space provided on the next page. If you need additional space to describe your complaint, please continue on an additional sheet of paper.



this complaint).

KANSAS BOARD OF COSMETOLOGY

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COMP	LAINT	FORM	
No.			
For	Office Use	Only	

Have you contacted the individual or the establishment to try and resolve your complaint? If yes, please tell us what happened? (Include names of persons contacted and dates of contact)

Be cause the Lady doesn't speak English Resolution How would you like this complaint to be resolved? Shop should be shut down Supporting Documentation Attach copies of related documents that support your complaint. Please do not enclose original documents, as they cannot be returned to you. **Photographs** Medical Records Advertisements Correspondence Social Media Postings Receipt(s) Other (please list): **Testimony**

Verification I declare under penalty of perjury that I have read and understand this form and that the information provided on this form and all attached pages/documents is true, correct and complete to the best of my knowledge.

Are you willing to appear under oath as a witness to be cross-examined concerning the allegations made in this complaint?

All Yes No (If you are unwilling to testify or fail to appear if requested, the Board may dismiss any action associated with

Signature (Please print this form and sign your name OR type your First and Last Name if submitting the form electronically)

Date Signed

RECEIVED BOARD OF COSMETOLOGY

MAR 3 2017

EMAIL MY FORM lindsey.bowes@ks.gov





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No. ______For Office Use Only

Narrative Statement

Tairative Statement
DN FEBRUARY 11, at 10:20am, Safurday. I
WENT to K.C. Threading in Shawnee Mission KS
a lady clid my Elythrows, I was cut bleeding
on my skin, she chopped up my eyebrows,
I complained and she was on the phone
with the owner, speaking a different language
The whole shop was stinking because
Lrash was overflowing. I was so sick
from infection, I was forced to miss work
that following Monday. The lady had a bad
body odor as well. This lady had no the
what she was cloing. I've seen her working
CIENS OF INVAMONS TO OPERS
SAturdays as I am a regular chient at the wowner called Pardeep but she was not there
Wowner called Pardeep but she was not there
that morning. This facility should be shot
down due to spriding contagious dispases.
the this place is very dirty tearly morning when
I was there, the shop was unclean from the Prior night. This facility needs to be SHUT Down
prior night. This facility needs to be SHUT Down



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COMPLAINT FO	ORM
No.	
For Office Hee Onl	·

Yes No Have you contacted the individual or the establishment to try and resolve your complaint? If yes, please tell us what happened? (Include names of persons contacted and dates of contact) be shut down forever because afaction through customers mail I Resolution How would you like this complaint to be resolved? **Supporting Documentation** Attach copies of related documents that support your complaint. RECEIVED Please do not enclose original documents, as they cannot be returned to you. BOARD OF COSMETOLOGY Advertisements MAR 1 3 2017 **Medical Records Photographs** Social Media Postings Correspondence Receipt(s) Other (please list): **Testimony** Are you willing to appear under oath as a witness to be cross-examined concerning the allegations made in this complaint? Yes No (If you are unwilling to testify or fail to appear if requested, the Board may dismiss any action associated with this complaint). Verification I declare under penalty of perjury that I have read and understand this form and that the information provided on this form and all attached pages/documents is true, correct and complete to the best of my knowledge. Signature (Please print this form and sign your name OR type your First and Last Name if submitting the form electronically) **Date Signed**

EMAIL MY FORM

aubrie.pryer@ks.gov



714 S.W. Jackson, Suite 100 Topeka, Kansas 66603 www.kansas.gov/kboc

COMPLAINT FORM

Narrative Statement

- Please provide a statement of the facts, allegations and/or concerns in the space provided below.
- Attach a copy of each document you possess that can substantiate any facts in your complaint.
- Please include a specific description of the incident:
 - What happened?
 - When did it happen?
 - Where did it happen?

- How did it happen?
- Who was involved?

The only two employees working at Perfect Brow Bar on Wanamaker road by HyVee are both unlicensed. One of them is named Bhoomi, who has been working there for at least, if not more than, two years. Another lady named Andeleb (also known as Gazal) works on the weekends and has been working there for maybe five years. The reason for this complaint is the bad, inexperienced, and unprofessional customer service provided by them. When doing eyebrows, they've cut people's skin and have completely ruined their eyebrows at times. As a citizen, I felt it was my duty to inform the Board of such practices. Due to safety reasons, I request to stay anonymous. Thank you for your time.



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COMPLAINT FORM

Narrative Statement

Please provide a statement of the facts, allegations and/or concerns in the space provided below.

Attach a copy of each document you possess that can substantiate any facts in your complaint.

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Please include a specific description of the incident:

What happened?

When did it happen?

Where did it happen?

How did it happen?

OCT 3 0 2018

Who was involved?

BOARD OF COSMETOLOGY

Many customers came to my shop Complaining that Miss Karki provides Services for cheaper at her house. She also advertises to the public via facebook. I just think this is unfair because 1 (and other Beauticians)
nad to pay a for money and go through a lot of schooling to be able to work and start are our businesses, which are being negatively by those working illegally and providing services for cheaper.



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No.
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Nature of Complaint (Chack all that apply)

mature o	i Compianii (Check ali ii	iat apply)				
	Unlicensed Establishmen Unlicensed Practitioner Expired Establishment Expired Practitioner/Appr Felony Conviction		Obtaining a License by Fraud Discipline in another State False/Deceptive Advertising Injury Infection	Pro	ealth & Sanitatio ocedure on a N ervice to a Mino	linor (Body Art)
If you we	re injured, was there a bl	ood spill?	es No N/A			-
16	(P 0 P 1	(t - t - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	:110			
\$1 you, wi	a I VIS la arch IS	M MAN LID	And there was blue	d. No	boland soil	
Cr.		and the	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. /00	Special spirit	
Pro	ocedure used.					
Have you	u been treated by a physic	cian?			Yes 🗾	lNo
Physiciar	n Name		Email		Phone	
Address	L. Zant Likariya	Character Co	City	State		Zip
	filed this complaint with	another state/lo	cal agency or a law enforcement a	gency	Yes 🔼	łNo
Date		Agency				
Date		Agency				
Have you	retained an attorney to a	assist you in res	olving this matter?		Yes 🖳	No
Attorney	Name		Email		Phone	
Address			City	State		Zip

Narrative

Please provide a statement of the facts, allegations and/or concerns.

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JAN 0 4 2019

BOARD OF COSMETOLOGY

- Please include a specific description of the incident:
 - When did it happen
 - Where did it happen
 - Who was involved
 - What happened
 - How did it happen
- Attach a copy of each document you possess that can substantiate any facts in your complaint.
- You may complete the narrative in the space provided on the next page. If you need additional space to describe your complaint, please continue on an additional sheet of paper.



714 S.W. Jackson, Suite 100 Topeka, Kansas 66603 www.kansas.gov/kboc (785) 296-3155 **COMPLAINT FORM**

No. _____

Mar	rativ	o Cta	tam	ant
IVAI	Iduv	t ola	telli	CIIL

An Unlicensed was foresent and worked on my liga name
or hill a tour" Wherear the strength
intellation me UP and III
and cleaned me up in two individuals with were working and
and cleaned the of
only one license was posted in the name of jigisha".

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JAN 0 4 2019

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COMP	LAINT	FORM	
No			

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	Yes No
If yes, please tell us what happened? (Include names of persons contacted and dates of co	ontact)
Resolution How would you like this complaint to be resolved?	
Need inspector to check establishment on same the receipt provided	day + date of
the receipt provided	i deed i duck of
The teap, posts,	
	RECEIVED
	JAN 0 4 2019
Supporting Documentation Attach copies of related documents that support your complaint. Please do not enclose original documents, as they cannot be returned to your	BOARD OF COSMETOLOGY
Please do not enclose original documents, as they cannot be returned to you. Photographs Medical Records	Advertisements
Social Media Postings Correspondence	Receipt(s)
Social Media Postings Correspondence Other (please list):	Receipt(s)
Social Media Postings Correspondence Other (please list):	Receipt(s) egations made in this complaint?
Social Media Postings Correspondence Other (please list): Testimony Are you willing to appear under oath as a witness to be cross-examined concerning the alled Yes No (If you are unwilling to testify or fail to appear if requested, the Board may described.	egations made in this complaint? lismiss any action associated with
Social Media Postings Correspondence Other (please list): Testimony Are you willing to appear under oath as a witness to be cross-examined concerning the alled Yes No (If you are unwilling to testify or fail to appear if requested, the Board may of this complaint). Verification I declare under penalty of perjury that I have read and understand this form on this form and all attached pages/documents is true, correct and complete to the best of the second with the second pages.	egations made in this complaint? lismiss any action associated with

EMAIL MY FORM

aubrie.pryer@ks.gov



KANSAS BOARD OF COSMETOLOGY 0 2 2019 COMPLAINT FORM

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Narrative Statement

On March 22, 2019 a customer was getting service from salon and the prationer was using the same dirty implements on multiple customers without santizing her hands. After seeing this from outside 2 left without getting serviced be cause I felt it was unsanitary. I feel like an inspector should visit salan for an inspection aheak to conduct a complete disinfectant, require that she "leans implements and make sure she is not possing along bateria, infections or operus.

Prease make sure an inspection is performed and please send results to my email

Thanks



COMPLAINT FORM

714 S.W. Jackson, Suite 100 4 S.W. Jackson, Suite 100
Topeka, Kansas 66603
BOARD OF COSMETOLNOY
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Have you contacted the individual or the establishment to try and resolve your complaint?
If yes, please tell us what happened? (Include names of persons contacted and dates of contact)
Resolution How would you like this complaint to be resolved?
Conduct Enspection By Enspector
Supporting Documentation
Attach copies of related documents that support your complaint. Please do not enclose original documents, as they cannot be returned to you. Photographs Medical Records Advertisements Social Media Postings Other (please list):
Testimony Are you willing to appear under oath as a witness to be cross-examined concerning the allegations made in this complaint? Yes No (If you are unwilling to testify or fail to appear if requested, the Board may dismiss any action associated with this complaint).
Verification I declare under penalty of perjury that I have read and understand this form and that the information provided on this form and all attached pages/documents is true, correct and complete to the best of my knowledge.
(lime) Mathia 03/28/19
Signature /Please print this form and sign your page OP type your First and Last Name if submitting the form electronically) Date Signed

EMAIL MY FORM

lindsey.bowes@ks.gov



714 S.W. Jackson, Suite 100
Topeka, Kansas 66603

www.kansas.gov/kboc (785) 296-3155

COMPLAINT FORM

BOARD OF COSMETNO.OGY

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Narrative Statement

I went to go get my eyerrows done on wed,

Riporde 27, 6pm. While waiting outside Brow Art 123

I watched this practitioner working on customers

one ofter another without cleaning any
instruments she was using on clients and
did not clean her hands either. All the

disinfected instruments appeared dirty so I

choose to not get service.

APR 02 2019



KANSAS BOARD OF COSMETOLOGY

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)F	COSMECOMPLAINT FORM	
	No	
	For Office Hee Only	

www.karisas.gowkboc (700) 290-0100
Have you contacted the individual or the establishment to try and resolve your complaint? Yes No If yes, please tell us what happened? (Include names of persons contacted and dates of contact)
Resolution How would you like this complaint to be resolved?
An inspector to go and make sure all of these
An inspector to go and make sure all of these issues are addressed and corrected.
Supporting Documentation Attach copies of related documents that support your complaint. Please do not enclose original documents, as they cannot be returned to you.
Photographs Medical Records Advertisements Social Media Postings Correspondence Receipt(s) Other (please list):
Testimony Are you willing to appear under oath as a witness to be cross-examined concerning the allegations made in this complaint? No (If you are unwilling to testify or fail to appear if requested, the Board may dismiss any action associated with this complaint).
Verification I declare under penalty of perjury that I have read and understand this form and that the information provided on this form and all attached pages/documents is true, correct and complete to the best of my knowledge.
03/30/19

EMAIL MY FORM

aubrie.pryer@ks.gov



714 SW Jackson, Suite 100 • Topeka, KS 66603 Telephone: (785) 296-3155 • Fax: (785) 296-3002

E-mail: Kboc@ks.gov • Website: www.kansas.gov/kboc

Narrative Statement

- Please provide a statement of the facts, allegations and/or concerns in the space provided below.
- Attach a copy of each document you possess that can substantiate any facts in your complaint.
- Please include a specific description of the incident:
 - What happened?
 - When did it happen?
 - Where did it happen?

- How did it happen?
- Who was involved?

Hello,

This establishment has been ticketed many times for working illegally with taking customers but they always bring new employees with no license. They tell all the new employees it is ok to work at this establishment without licence.

We have contacted Jesse (inspector) regarding this issue and he told us that we have to make a complaint again on paper so that way it will get processed quicker.

Please have someone look into this and if you need any more information please contact me any time.

Thank You Shawn

Kansas Board of Cosmetology Topeka, KS 66603 785-296-3155(PHONE) • 785-296-3002(FAX)

Establishment Inspection Report/Certificate

The most recent inspection report/certificate should be posted where it can be easily viewed by the consuming public.

FACILITY
Perfect Brow Bar
2919 SW Wanamaker Rd Ste G
Topeka, KS 66614
Owner: Nadirshah Maknojia
Ownership Type: Business

LICENSE
License No: 204-9156
Profession: KBOC-Cosmetology
License Type: Esthetics
Establishment Phone: 7852289400

Inspection Type:	
Inspection Date:	4/19/2018
Result	Pass

Violation	Inspection Item	Remarks
Salon Q03 (Licensure)	Licensed Services - Salon and all individuals licensed for services being provided	Anila Tajdin Ali and Almas Karowalia, was providing threading services and is not licensed in Kansas to provide services.
Salon Q08 (Disinfectant Procedures)		Disinfectant must be made daily and mixed according to communicatures instructions.
Salon Q11 (Disinfectant Procedures)		If brow brushes are being reused, they must be cleaned with soap and water, and then immersed in disinfectant after each customer.
Salon Q14 (Disinfectant Procedures)	14) Used Instruments - Stored in labeled, covered container or drawer for used instruments only	Used instruments must be stored in a labeled, covered container or drawer for used instruments only.
Salon Q26 (General Requirements)	26) Trash - Covered; excessive accumulation removed	Trash cans must be covered in the service area.

nspection was impeded.

The undersigned licensee, designee, or other authorized representative of the licensee acknowledges receipt of this inspection report

If this is a compliance inspection for a new establishment license, a PASS inspection form will serve as a temporary authority to operate pending final review and approval by the State Board. The temporary authority must be prominently displayed and will expire upon receipt of a properly issued license or six months from the date of inspection.

If this is a compliance inspection for a new establishment license, a FAIL inspection form will result in the denial of the establishment application. A new application and fee must be submitted to receive additional compliance inspections.

Signature of Inspector

4/19/2018 8:35:17 PM

Date Time

Signature of Owner/Representative

RECEIVED



KANSAS BOARD OF COSN By Lindsey Bowes at 3:27 pm, May 02, 2018

714 S.W. Jackson, Suite 100 Topeka, Kansas 66603 www.ks.gov/kboc (785) 296-3155

REMEDIAL ACTION

April 19, 2018

Perfect Brow Bar 2919 SW Wanamaker Rd, Suite G Topeka, KS 66614

Dear Owner(s) and/or Management:

Re: Establishment License No. 204-9156

YOU MUST COMPLETE AND RETURN THIS FORM TO THE BOARD WITHIN 20 DAYS. FAILURE TO COMPLETE AND RETURN MAY RESULT IN BOARD ACTION.

You may submit the form via Fax (785) 296-3002, e-mail KBOC@KS.GOV or by mail.

Health & Sanitation Regulations can be found on the Regulations sign posted in your establishment.

The following health and sanitation violations were found during a recent inspection of the facility. The facility is considered out of compliance with the State of Kansas and requires immediate remedial action.

INSTRUCTIONS: Please refer to your inspection report and describe what corrective action you have taken to remedy each violation.

Inspection Report Violation No.	Describe Remedial (Corrective) Action Taken (You may type your answers on a separate sheet or attach additional sheets)				
yes, It's corrected and hired new Employee LIC# 00 - 95					
. 03	"Corrected, They are not from Kamsas & left from KS				
08	Advised our Employees as Birected by Inspector				
11	Corrected				
14	yes, labeled . & concred with container				
26	Front Cans are Concred & keep close all times				

DID YOU KNOW? The Board offers Infection Control seminars free of charge! If you are interested in scheduling a seminar at your facility, please visit our website and download the Infection Control Seminar request form (form #28).

VERIFICATION I have read and understand the violations outlined in the Inspection Report dated 04/13/2018. I declare under penalty of perjury that I have taken the remedial actions described above to correct the violations. I understand that by failing to comply with all Kansas statutes, rules and regulations, the above-named establishment is subject to recheck inspections and disciplinary action.

affairle	ARIF	KAROWALIA	05	[01/2018
Signature of Owner/Manager	Printed Name	of Owner/Manager	Date Signed	
		- Applied		

Kansas Board of Cosmetology Topeka, KS 66603 785-296-3155(PHONE) • 785-296-3002(FAX)

Establishment Inspection Report/Certificate

The most recent inspection report/certificate should be posted where it can be easily viewed by the consuming public.

FACILITY

Miracle Eyebrows 13600 S Alden St Ste 2 Olathe, KS 66062 Owner: Jignesh Biscuitwala

Owner. Jignesh Biscultwa

Ownership Type:

LICENSE

License No: 204-9485

Profession: KBOC-Cosmetology License Type: Esthetics Establishment

Phone: 9139800778

Inspection Type:	Complaint
Inspection Date:	6/13/2019
Result:	Completed

Violation	Inspection Item	Remarks
Salon Q03 (Licensure)	Licensed Services – Salon and all individuals licensed for services being provided	Kuldeep Kaur date of birth Sept. 18, 1992, provided three eye brow threading and is not licensed in Kansas to provide services.
Salon Q04 (Licensure)	Required Signage - KDHE Regulations, Inspection Report & Consumer Complaint sign posted in a conspicuous location	KDHE Regulations, Most recent inspection report, Consumer Complaint Sign, Active facility license] need to be posted in a location where clients and the inspector can easily view them when entering the establishment.
Salon Q08 (Disinfectant Procedures)	Disinfectant Solution - Prepared daily and mixed according to manufacturer's instructions; free of debris and not cloudy	Hair and Debris in disinfectant. Disinfectant must be made daily and mixed according to manufacturer's instructions.
Salon Q11 (Disinfectant Procedures)	11) Nail Technology & Esthetic Instruments - Cleaned and disinfected prior to use on a consumer	Dirty tweezers, scissors, in cup and used on customers.
Salon Q14 (Disinfectant Procedures)	14) Used Instruments – Stored in labeled, covered container or drawer for used instruments only	Used instruments must be stored in a labeled, covered container or drawer for used instruments only. Empty more often so the container is not overflowing and the lid can be closed.
Salon Q15 (Disinfectant Procedures)	15) Disinfected Instruments – Stored in labeled, clean, covered containers or drawers for clean instruments only	Disinfected instruments may only be stored with other disinfected instruments and must be separated by using bins or dividers from any other items. Drawers, containers, or cabinets must be covered and labeled. This includes manicure, pedicure, and waxing disinfected instruments as well.
Salon Q19 (General Sanitation)	19) Clean Linens - Stored in a labeled, clean, enclosed cabinet	Must be stored in a labeled drawer, container, or cabinet.

The undersigned licensee, designee, or other authorized representative of the licensee acknowledges receipt of this inspection report.

If this is a compliance inspection for a new establishment license, a **PASS** inspection form will serve as a temporary authority to operate pending final review and approval by the State Board. The temporary authority must be prominently displayed and will expire upon receipt of a properly issued license or six months from the date of inspection.

If this is a compliance inspection for a new establishment license, a **FAIL** inspection form will result in the denial of the establishment application. A new application and fee must be submitted to receive additional compliance inspections.

	6/13/2019 5:11:23 PM	forali
Signature of Inspector	Date/Time	Signature of Owner/Representative



Phone: 785-296-3155 Fax: 785-296-3002 KBOC@ks.gov www.ks.gov/kboc

Laura Kelly, Governor

NARRATIVE REPORT

Inspector Eric Lynch
Date of Inspection: June 13, 2019
Facility Name: Miracle eyebrows
Owner: Jignesh Biscuitwala
Location: 13600 S Alden st. Ste 2

Olathe, KS 66062

License Number: 204-9485 Reason for Inspection: Complaint

On the above date at approximately 2:40 P.M. I conducted a complaint inspection on Miracle Eyebrows in Olathe, KS. Miracle Eyebrows is located at 13600 S. Alden and is inside of a Walmart supercenter. I arrived at approximately 2:10 P.M. and stood in the checkout lanes and watched the lone employee. The employee later identified as Kuldeep Kaur with a date of birth of September 18, 1992 was alone in the establishment.

As I watched her, three different customers entered the business and received serviced from her from 2:10 through 2:40. I watched her take instruments from an open glass cup and return the same instruments to the cup without cleaning or disinfecting them. She did this for all three clients that entered the establishment. When I entered the business, she immediately called the owner, Jignesh Biscuitwala, and informed her that I was at the business to conduct an inspection.

I asked for Kuldeep Kaur's practitioner license and she stated that she did not have one. She said that she was only there to run the cash register. I informed her that I watched her provide services to three different customers. She stated that she has only had a small amount of training. I asked about blood spill procedure, but she was unable to answer me.

When the Jignesh Biscuitwala arrived, she told me that her friend Kuldeep was not supposed to provide services but to only take down the names of customers and wait until Jignesh arrived. I told her that she was providing services and that was a violation of state law.

I went over the other violation that were found in the establishment and answered any questions she had.

Date: June 14, 2019

Eric Lynch Facility Inspector

Kansas Board of Cosmetology Topeka, KS 66603 785-296-3155(PHONE) • 785-296-3002(FAX)

Establishment Inspection Report/Certificate

The most recent inspection report/certificate should be posted where it can be easily viewed by the consuming public.

FACILITY

Bella Threading Salon & Spa 14523 Metcalf Ave Overland Park, KS 66223

Owner: Bella Threading Salon & Spa, LLC

Ownership Type: Business

LICENSE

License No: 004-100022

Profession: KBOC-Cosmetology License Type: Cosmetology Establishment

Phone: 9133371326

Inspection Type:	Complaint	
Inspection Date:	6/20/2019	
Result:	Completed	

Violation	Inspection Item	Remarks
-	14) Used Instruments – Stored in labeled, covered container or drawer for used instruments only	Used instruments must be stored in a labeled, covered container or drawer for used instruments only. Empty more often so the container is not overflowing and the lid can be closed.
	17) Single-Use Supplies & Instruments - Disposed of in covered trash can immediately after use on a consumer	Rubber gloves and string for threading are one time use and must be thrown away immediately after used on a consumer.
	Disinfectant Solution - Prepared daily and mixed according to manufacturer's instructions; free of debris and not cloudy	Debris in disinfectant. Disinfectant must be made daily and mixed according to manufacturer's instructions.

The undersigned licensee, designee, or other authorized representative of the licensee acknowledges receipt of this inspection report.

If this is a compliance inspection for a new establishment license, a **PASS** inspection form will serve as a temporary authority to operate pending final review and approval by the State Board. The temporary authority must be prominently displayed and will expire upon receipt of a properly issued license or six months from the date of inspection.

If this is a compliance inspection for a new establishment license, a FAIL inspection form will result in the denial of the establishment application. A new application and fee must be submitted to receive additional compliance inspections.

	6/20/2019 1:40:06 PM	FLL	
Signature of Inspector	Date/Time	Signature of Owner/Representative	

Kansas

KANSAS BOARD OF COSMETOLOGY

714 SW Jackson, Suite 100 • Topeka, KS 66603 Telephone: (785) 296-3155 • Fax: (785) 296-3002

E-mail: Kboc@ks.gov • Website: www.kansas.gov/kboc

Narrative Statement

- Please provide a statement of the facts, allegations and/or concerns in the space provided below.
- Attach a copy of each document you possess that can substantiate any facts in your complaint.
- Please include a specific description of the incident:
 - What happened?
 - When did it happen?
 - Where did it happen?

- How did it happen?
- Who was involved?

I am concerned regarding the sanitary practices that are nappening an Exotic African Hair Braiding. The place is in snambles. There is nain au over the floor. Their chairs are all nipped up where they have their customers sit at their different Stations. Their hair is kept in the back of the shop in the most unsanitary conditions. I asked if they were practicing social distancing and she reasoured me 20 minutes into me aptiting my hair braided the braider now her make down talking away breathing on me. The owner sonja does Nothing! Next I look none of the braided have a mak on. If they do its hunging on their onin. After your nain is braided they dip the ord or your hair in not water. This water looks extremly unsanitary it gets you all wet, smell weind and then they we a take on you that I noticed is powed down the now to we on ALL customers. There are no clean tower in the building. Not to montion I saw No comb being sanitized in that Blue solution. The product they we have now main au in Exit from other people so crow confamunation is happening. Hair would fall on the floor (the extension) an they would pick it up off of the dirty floor, with The combination of the dirty combintowels and durt water I left itahung. I heard this was happening for years, something has to be done. what happened: unsanitary Procedures who: Braiding Person...multiple people broud you 4 don't wash hand

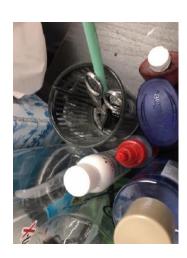














ARTICLES

- EYEBROWN THREADING: A POPULAR HAIR-REMOVAL PROCEDURE AND ITS SELDOM-DISCUSSED COMPLICATIONS - DR. S.B. VERMA CLINICAL DERMATOLOGY CONSISE REPORT.
- EYEBROW THREADING: A BOON OR A BANE INDIAN JOURNAL OF DERMATIOLOGY DR. SANJEEV GUPTA.
- METRO WOMAN BLAMES POPULAR PROCEDURE FOR SERIOUS EYEBROW PROBLEMS FOX 4
 NEWS ARTICLE SOPHIA WILLIAMS INJURY OVERLAND PARK
- EYEBROW THREADING IS GENTLER THAN WAXING, BUT IT STILL CARRIE HEALTH RISKS SOLVADERM 2016 ARTILCE.
- DOES EYEBROW THREADING CARRY HEALTH RISKS? WOMEN'S HEALTH

Eyebrow threading: a popular hair-removal procedure and its seldom-discussed complications

S. B. Verma

Nirvana Skin Clinic, Baroda, India

doi:10.1111/j.1365-2230.2008.02920.x

Summary

Removal of eyebrow and facial hair by 'threading' has gained popularity worldwide. Threading is an ancient Eastern method of removing unwanted facial and eyebrow hair by a technique whereby one end of a cotton thread is held in the mouth of the technician and the other end looped around individual hair shafts, which are then pulled out. This is repeated in quick, successive movements. In India, this is used extensively for shaping and removing eyebrow hair. Threading now enjoys immense popularity with women worldwide, irrespective of race or colour, and is an accepted method for removing eyebrow hair and shaping the eyebrows. However, this popular cosmetic procedure has some significant dermatological side-effects and is not familiar to many dermatologists. To our knowledge, this is the first report of verrucae occurring in threaded eyebrows. Other complications include erythema, folliculitis, pseudofolliculitis, hyperpigmentation, and depigmentation, including koebnerization of vitiligo. This report should alert dermatologists to the possible complications that may arise from this popular aesthetic epilatory procedure.

Removal of eyebrow and other unwanted facial hair by the technique of 'threading' is an ancient hair removal procedure practiced in countries in the Middle East, where it is known as 'khite' meaning 'thread', and in Egypt as 'fatla'. ¹ It is practised very widely in India, ¹ and is the single most popular method of hair removal of eyebrow hair in South Asia. The technique is used to give the eyebrow an aesthetically pleasing shape, and is also practised to remove other unwanted facial hair, e.g. from the sides of the face and from the upper lip.

Threading involves a great degree of operator skill, deftness and speed. In threading, the beautician holds one end of a long cotton thread in her mouth and grasps the eyebrow hairs between the thread, which is wound around the fingers of the operator's hand like a loop. The thread is looped around individual hair shafts or a

few shafts together and the hairs are quickly pulled out with brisk movements (Fig. 1) in rapid succession.

The popularity of threading is growing in western countries. The usual methods of removing eyebrow hair in these countries include waxing, plucking with tweezers and electrolysis. Waxing is an involved, time-consuming and expensive procedure; using tweezers is slow and tedious; and electrolysis is a permanent but expensive procedure.

A search of 'eyebrow + threading' or 'khite' in PubMed found only four results including my previous report,² whereas a search using the search engine 'Google' on 'eyebrow threading' rendered 165,000 results! This shows the growing popularity of the technique for cosmetic and aesthetic reasons among lay people, but the ironic inadequacy of its knowledge in dermatological circles, especially in western countries. There is only brief mention of this procedure in the dermatological literature,³ even though his procedure is associated with several dermatological complications that have been described in the literature as a result of other hair-removal procedures such as waxing and electrolysis. These include acute erythema during and

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Conflict of interest: none declared.

Accepted for publication 22 January 2008

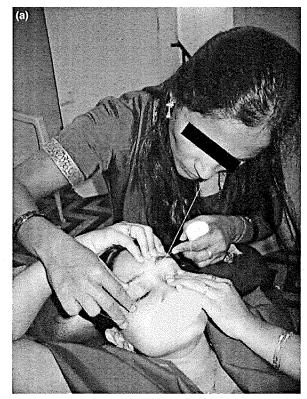




Figure 1 (a, b) Threading procedure.

after the procedure, folliculitis, pseudofolliculitis, bullous impetigo, hyperpigmentation and depigmentation. ^{1,3,4} We have seen a case of unilateral molluscum contagiosum along the threaded eyebrow, and koebnerization of vitiligo after the procedure has also been reported from this clinic. ²

In this paper, we report a series of eight cases from our clinic, showing a new complication of eyebrow threading.

Report

All patients presented with flat to slightly raised warts in the eyebrow region (Fig. 2). They were all women between 18 and 35 years of age, who attended beauty salons at least once every month to have their eyebrows shaped by threading. None of the patients could remember exactly when the warts developed as they grew very gradually, were asymptomatic and were covered by eyebrow hair in most cases. None of the patients gave a history of any verrucous growths elsewhere on the body, and none had noticed any warts on the fingers of the beauticians.

Physical examination did not reveal any verrucae on the body of any of the patients except at the area of the eyebrow. The verrucae followed the line of the eyebrow along the hair growth and also occurred immediately adjacent to the eyebrow. None of the patients had warts elsewhere on the face, apart from one patient who had developed a few warts on her upper lip and used to get the hair in this area removed by the same procedure.

Two of the patients were atopic, and none had any relatives with verrucae. The clinical appearance of the lesions in all the patients was sufficiently characteristic for diagnosis without the need for a biopsy, which would have been unacceptable to the patients due to the location of the lesions.



Figure 2 Warts along the eyebrows.

All patients were informed about the different reactions that could be evoked by warts. Four patients agreed to get the verrucae removed by electrodessication in our clinic. The verrucae did not recur, although the patients continued to attend their usual beauty salon (> 1 salon was involved). Two patients they did not want to stop the threading because they found it much more convenient and less painful than plucking; they did not opt for treatment in our clinic, but instead chose to use a herbal treatment suggested by their beautician. They were lost to follow-up. Two patients decided to use tweezers for home removal rather than continue to use the threading technique, and they too were lost to follow-up.

Threading is a traumatic procedure involving the removal of multiple hair shafts. We suggest that this trauma may disturb epidermal-barrier function, rendering the eyebrow area more susceptible to development of verrucae by seeding of the virus. In other words, it creates a *locus minor resistentiae* to development of verrucae. The source of the human papilloma virus (HPV) lodging on the eyebrows could possibly be the thread, cotton wool, the beautician's hands, powder applied with a puff before the procedure, or virus particles in the environment; HPV can survive for many months, and at low temperatures it can survive without needing a host. Infection typically occurs when basal

cells in the host are exposed to the infectious virus through a disturbed epithelial barrier, as would occur in threading-induced trauma to the skin.⁵ Once the verrucae appear in these areas it would be logical to assume that they would be prone to koebnerization, which may also have happened in these cases to a varying extent.

In conclusion, we report on eight cases of verrucae induced by the hair-removal procedure of threading. Because of its growing popularity, dermatologists need to have an awareness of the procedure and its complications.

References

- 1 Abdel-Gawad MM, Abdel-Hamid IA, Wagner RF. Khite: a Non-Western technique for temporary hair removal. *Int J Dermatol* 1997; 36: 217.
- 2 Verma SB. Vitiligo koebnerized by eyebrow plucking by threading, *J Cosmet Dermatol* 2002; 1: 214–15.
- 3 Ramos-e-Siva M, de Castro MC, Carneiro LV. Hair removal. Clin Dermatol 2001; 19: 437–44.
- 4 Bloom MW, Carter EL. Bullous impetigo of the face after epilation by threading. *Arch Dermatol* 2005; **141**: 1174–5.
- 5 Gearheart PA, Human papillomavirus, http://www.emedicine.com; July 5, 2007.

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Superficial Dermatophytosis and Topical steroids View project

Vitiligo koebnerized by eyebrow plucking by threading

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Metro woman blames popular procedure for serious eyebrow problems

POSTED 10:39 PM, MARCH 6, 2019, BY LINDA WAGAR



OVERLAND PARK, Kan. — A popular technique for shaping your eyebrow also has some serious risks. FOX4 Problem Solvers spoke with a woman who developed an infection that caused her to lose most of her eyebrows, and while the problem is rare, it can happen and there are ways to protect yourself.

A year ago, Sophia Williams' eyebrows were so infected she was required to take medical leave from her job as a nurse.



So what happened? Williams blames eyebrow threading, a technique that originated in the Middle East and is growing in popularity in the United States. Thread is used to remove hair on eyebrows, lips and even legs. Although it's quick and often painless, there are risks.

Williams says her eyebrows started showing signs of infection the day after she had them threaded.

"The next day I woke up and it was little bumps, and I remember looking in the mirror, 'oh that's weird,'"
Williams recalled.

As the day progressed her eyebrows became more and more irritated.

"I was at work and I literally thought something was falling from the ceiling. I went to the bathroom and I realized it was pus," she described.

Then her face started to swell. She went to a doctor who immediately treated her with antibiotics and anti-fungals. Williams said it took almost a month for the infection to go away, and now, a year later, her eyebrows have finally grown back in enough so that she feels she looks normal again.

Doctor Atieh Jibbe with The University of Kansas Hospital says a sterile environment is key with

eyebrow threading.

"It creates small tears that you might not be able to see with the naked eye," Dr. Jibbe said.

Those tears can become a route for bacteria, including staph, strep, herpes and warts.

"It's very important prior to getting it done make sure the people doing it have a cleaning technique prior to doing the threading," Dr. Jibbe said.

"They should be washing their hands before treating you, and cleaning your eyebrows with alcohol before threading, and never reusing thread or any other utensil that's been used on someone else."

Dr. Jibbe says customers also need to take care of their eyebrows for a week or so after having threaded, making sure to clean the area thoroughly and not touch it too much.

Williams blames Brow Art 23 in Overland Park for causing the infection. Although the salon gave her money back for the procedure, Brow Art's insurance company denied the salon was responsible.

"It's a ridiculous stance to sit there and say you didn't cause the woman's eyebrow injuries when her injured area is in the eyebrow, and she went to Brow Art 23 to get her eyebrows done," said attorney Reginald Stockman.

Problem Solvers requested the last four years of state inspection reports for the salon. Up until January 2017 the salon had perfect inspections. Then in February 2017 the salon was sold to the current owners.

The first inspection showed no problems, but the very next year, just two months before Williams was a customer. The salon failed in six areas, four of them involving cleanliness, including not having containers with enough disinfectant to fully immerse instruments, and not properly storing and labeling instruments that had already been used.

FOX4 shared the reports with Williams' attorney.

"Honestly at the end of the day, it's a public safety issue," Stockman said.

FOX4 called Brow Art 23 twice to get its side, and were told someone would call us back, but they never did.

Williams, who has permanent scarring from the infection, is now back at work and back to leading a normal life, but says she never plans to go back to a threading salon.

It's important to note that infections are rare, but they can happen. If you notice redness, or a heat sensation or pus, you should see a doctor immediately.



Indian J Dermatol. 2011 Nov-Dec; 56(6): 715-717.

doi: 10.4103/0019-5154.91835

PMCID: PMC3276903 PMID: 22345777

EYEBROW THREADING: A BOON OR A BANE

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Abstract

Eyebrow threading is a practice of shaping the eyebrows. Many dermatological complications have been briefly mentioned in various publications. There are scant data regarding the appearance of molluscum in the line of eyebrows after a session of threading. We report a series of eight patients both males (3) and females (5) who had lesions of molluscum in the eyebrow region after threading. The earlier reported cases are only among the females. The present study is highlighting the appearance of molluscum in the region of eyebrow after a session of threading from beauty salon. So, to the best of our knowledge, this is the first report of its kind describing same pathology in males. The rational of reporting this case series is to create awareness among the dermatologists as well as in general population about potential hazards of threading.

Keywords: Beauty parlor dermatoses, males, molluscum contagiosum, threading

Introduction

There are various ways of removing unwanted hair from eyebrow region to give a good aesthetic hair line. These include threading, tweezing or plucking, waxing, and laser. Of these, threading is the most common and widely acceptable technique because of its convenience, low cost, and negligible complications.

Before a threading session, the skin is prepared by wiping the area with a cotton ball soaked in astringent. This produces a cooling effect which numbs the skin and hence causing less pain. Threading technique involves usage of cotton thread. The cotton thread is twisted and rolled along the surface of the skin entwining the hairs in the thread, which are then lifted quickly from the follicle. Eyebrow threading is a preferred hair removal technique for a number of reasons. Unlike tweezing or plucking, eyebrow threading removes one clean line of hair all at once, making it much quicker and easier to shape the brows. As opposed to waxing, the top layers of skin are not peeled or traumatized in the process. It is important to find an aesthetician who is experienced at eyebrow threading. Inexperienced

aesthetician/beautician can result in uneven brows, hair breakage, ingrown hairs, or unnecessary pain and other complications. After a threading session, a soothing lotion/antibiotic cream is applied to the threaded area. Hair threading usually lasts 2 to 3 weeks.

Though this technique looks quite benign in nature, it is associated with some dermatological complications, especially near the eyebrows. This is so because the skin in this region is very delicate. Many dermatological complications briefly mentioned in various articles include acute erythema during and after the procedure, folliculitis, pseudofolliculitis, bullous impetigo, verruca plana, molluscum contagiosum (MC), hyperpigmentation, and hypopigmentation.[1–7]

Report

We report a series of eight patients between November 2006 and April 2010 who developed molluscum lesions over eyebrows after a session of eyebrows threading from beauty salons. All patients were young males and females in the age range of 17 to 35 years, with mean age of 23.6 years. Lesions appeared within in 2 to 4 weeks after visiting to salon. None of the patients had any lesion suggestive of molluscum on any part of body prior to threading. Brief profile of the patients is given in Table 1. Routine investigations in all patients were normal including serology for Human immune deficiency virus.

Table 1

Clinical details of patients presenting with Molluscum on eyebrows

Sex	Age	History of atopy	Time interval between threading and appearance of molluscum	Site of lesions
Female	17	No	2 weeks	Eyebrows, upper eyelid.
Male	22	No	3 weeks	Eyebrows, upper and lower eyelid.
Male	26	No	Could not tell	Eyebrows, upper eyelid, face.
Female	17	No	2 weeks	Eyebrows, upper and lower eyelid.
Male	35	No	4 weeks	Eyebrows, upper and lower eyelid [Figure 1]
Female	24	No	Could not tell	Eyebrows, upper eyelid and eyelid margin [Figure 2]
Female	22	No	3 weeks	Eyebrows, upper eyelid
Female	26	No	2 weeks	Eyebrows, upper eyelid, face.

Open in a separate window

All patients presented with classical appearance of molluscum lesions as painless, flesh-colored, dome-shaped, pearly white lesions with central umbilication 2 to 4 mm in diameter. These lesions initially were confined to eyebrows region and later by koebnerization spread to nearby areas. The classical clinical appearance of the lesions in all the patients was sufficient for diagnosis. Therefore, biopsy was not done to establish the diagnosis in any of the patient. However, histopathological examination of extracted contents revealed molluscum bodies. Extraction of molluscum bodies followed by light electric desiccation/chemical cauterization was done in all patients with good cosmetic results. None of the patient had any lesion suggestive of molluscum on any other part including face prior to threading. All patients were asked to avoid threading in future but most of them continued because of being more convenient and economical.

In our present day of civilization with globalization and a rapidly growing fashion industry, more and more people of all ages are very particular about their persona. Cinema and television idols cause a mass hysteria, thus causing a great impact on general population to follow their footsteps blindly. In order to look glamorized, people opt for various beauty regimens without paying attention to their adverse unforeseen consequences. Threading is one such technique which is practiced widely by all adults (from common layman to film stars) to give an aesthetic look of evebrows by removing excess of hair. It is a centuries-old technique of hair removal practiced widely in India and other countries. Due to its easy accessibility, being inexpensive, less time consuming, not very painful, it has gained wide popularity. It is thought to originate from Turkey and was traditionally used on the entire face such as the chin, eyebrows, sideburns, and cheeks. However, it has been an ancient art for many countries such as India. In Arabic, hair threading is called "khite." In Egypt, hair threading is called "fatla."[1,2] In the procedure, the beautician removes individual or group of unwanted hair by using "thread" which is wound around the fingers like a loop, the thread is looped around hair follicles and pulled out quickly with brisk movements in rapid succession. Though threading is a safe technique, but because it is a traumatic procedure and because of improper hygienic measures, it may cause acute erythema during and after the procedure, folliculitis, pseudofolliculitis, bullous impetigo, verruca plana, MC, hyperpigmentation, and hypopigmentation.[1-7]

MC is a viral infection of the skin or occasionally of the mucous membranes caused by a DNA poxvirus. It is transmitted by direct contact, either person to person, or by shared items, such as clothing, towels, etc. The virus later may be autoinoculated from one primary site to distant site. Threading being a traumatic procedure can disturb epidermal-barriers function, rendering the eyebrow area more susceptible to inoculation and development of warts by seeding the virus. Pox virus may survive for longer time in environment. Source of getting infection can be beautician's hands, cotton puff, powder, cotton thread, towels, clothing's, scissors, adoption of poor hygienic ways, and lack of awareness.

In the present study, some patients gave history of using same towels and thread on many of customers during threading. This is largely due to poverty, illiteracy, and ignorance among the population. Even the beauticians do not understand the importance of sterilizing their instruments prior to using on their customers as well as of use of same cotton thread on many of patients. Use of same towel on many of customers is very common practice in many of haircut and beauty salons. A beautician should be given a proper awareness regarding maintenance of the local hygienic measures like washing hands prior to any procedure, using disposable gloves, not using the same clothing, cotton, cotton thread, and towels on all customers, and similarly customers should never hesitate to interrupt the beautician if they feel she/he is noncompliant. Moreover, to avoid these hazards completely, customers can carry their own items such as cotton thread, towels, powder, etc., if possible. These simple precautions might change the scenario of threading and will make it free from complications.

Appearance of MC after eyebrow threading was first reported by Verma SB in a female patient.[7] Later, Ghosh SK and Bandyopadhyay observed the same in three females.[8] The present series of eight patients which also includes three males is the largest case series till date. Nowadays, the word "Beauty" is no longer confined to females as males also are not lagging behind in getting themselves pampered. The rapidly growing male beauty salon, spa center are examples of the same. So, the appearance of MC after eyebrow threading in males in the present case series is reported for the first time.

To conclude, all of the case reports reported so far mentioning the appearance of warts or molluscum are only in females, but in our study, three male patients were also reported to have appearance of molluscum lesions after threading. Current series of case reports warns the young populations and also make the Dermatologists aware about the potential hazard of this widely-practiced technique. At the same time, people among all sections of society need to be made aware of such incidents since the eye brow threading is a very common procedure not limited to one group, but it is commonly practiced by all, e.g., males or females, young or old, educated or uneducated, high or low socioeconomic people. Thus, it has become mandatory to raise awareness of complications not only among beauticians, but also in the general population.

There is a growing popularity of threading for shaping of the eyebrows, especially in the young population. It is very important for the beauticians and the dermatologists to be aware of the potential complications of this seemingly benevolent procedure, as this may lead to significant cosmetic blemish and mental trauma to the patient.

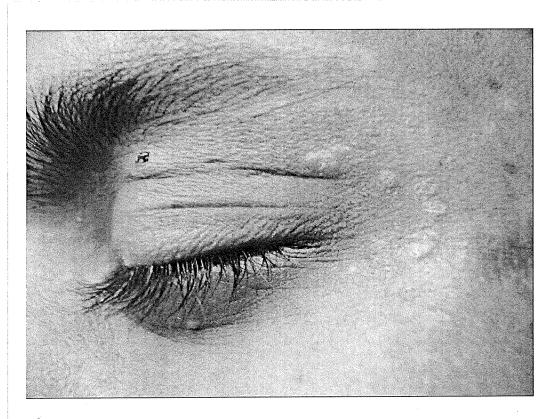


Figure 1

Multiple skin-colored and pearly white papular lesions over eyebrow, upper and lower eyelid (male)



Figure 2

Multiple pearly white popular lesions with central umbilication inside eyebrows, on upper eyelid and lid margin (female)

Footnotes

Source of support: Nil

Conflict of Interest: Nil.

References

- 1. Abdel-Gawad MM, Abdel-Hamid IA, Wagner RF. Khite: A non-western technique for temporary hair removal. Int J Dermatol. 1997;36:217. [PubMed] [Google Scholar]
- 2. Verma SB. Eyebrow threading: A popular hair-removal procedure and its seldom-discussed complications. Clin Exp Dermatol. 2008;34:363–5. [PubMed] [Google Scholar]
- 3. Ramos-e-Siva M, de Castro MC, Carneiro LV. Hair removal. Clin Dermatol. 2001;19:437–44. [PubMed] [Google Scholar]
- 4. Bloom MW, Carter EL. Bullous impetigo of the face after epilation by threading. Arch Dermatol. 2005;141:1174–5. [PubMed] [Google Scholar]
- 5. Odom RB, James WD, Berger TG. Andrew's diseases of the skin. 9th ed. Philadelphia: W.B. Saunders; 2000. pp. 473–525. [Google Scholar]
- 6. Kumar R, Zawar V. Threading warts: A beauty parlor dermatosis. J Cosmet Dermatol. 2007;6:279 –82. [PubMed] [Google Scholar]

- 7. Verma SB. Vitiligo koebnerised by eyebrow plucking by threading. J Cosmetic Dermatol. 2002;1:214–5. [PubMed] [Google Scholar]
- 8. Ghosh SK, Bandyopadhyay D. Molluscum contagiosum after eyebrow shaping: A beauty salon hazard. Clin Exp Dermatol. 2009;34:e339–40. [PubMed] [Google Scholar]

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Researched by Scientist
Formulated by Dermatologist
Dispensed by Skincare Professionals

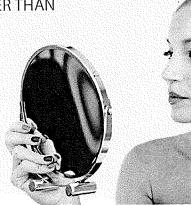
Home

Skin Care

Eyebrow Threading Carries Health Risks, Says Study

EYEBROW THREADING IS GENTLER THAN WAXING, BUT IT STILL CARRIES HEALTH RISKS. SEE WHAT OUR EXPERTS SAY ABOUT EYEBROW THREADING





Eyebrow Threading Carries Health Risks, Says Study

By Solvaderm On January 21, 2016

Eyebrows are important for our beauty. In fact, it is the one of the most important facial features. Just by changing the look or the size of your eyebrows, you might notice how you seem like a different person. Now, you have a wide selection of treatments for your eyebrows. Some women tattoo their eyebrows so they don't have to worry about grooming anymore, other women pluck their eyebrows, or simply let them grow. Big eyebrows became a huge hit with the popularity of Cara Delevingne. On the other hand, there are women who undergo eyebrow threading process. However, it seems

like this process is related to various health risks. Is that completely true? Let's find out.

What is, Really, Eyebrow Threading?

Eyebrow threading is, in fact, an ancient method of hair removal. It originates in India, but its popularity in Western countries increased significantly. According to some theories, the practice of eyebrow threading started in India, about 6000 years ago and it spread throughout Asia, the Middle East, and Europe.

Eyebrow threading has a long history. For example, in ancient Persia this meant that girl reached her adult years. In China and Korea only married women or brides were allowed to thread their eyebrows.

Unlike tweezing, where you pluck hairs one by one, eyebrow threading removes short lines of hair at once. In this technique, a thin thread made of cotton or polyester is doubled and twisted. Then, the thread is rolled over the areas of unwanted hair, plucking the hair at the follicle level.

Eyebrow threading provides more précised control in shaping eyebrows which prevents ending up with undesirable result on your face. In some cases, this technique can be quite painful, because several lines of hair are removed at the same time, but if done correctly the pain can be quite tolerable.

Eyebrow Threading Issues

The popularity of eyebrow threading raised some concerns about its safety. For example, Anita Hamilton from TIME magazine has written an article about eyebrow threading and possible health risks. In her work, she mentioned some valuable points such as:



Poor sanitation

Reusing one thread on multiple customers.

For example, Susan Stanford, public information officer for the Texas Department of Licensing and Regulation stated that a lot of people throughout Texas and Arizona perform eyebrow threading without possessing the license. Furthermore, these people use one thread on multiple customers which raises the risk of staph infections and other contagious skin conditions.

On the other hand, people who perform eyebrow threading claim the technique is safe, doesn't cause infections or bleeding. However, they stress the importance of adequate sanitation.

Dermatologist Amy Derick of Barrington, III provided some insight into how safe eyebrow threading really is. She says that technique is gentler than waxing eyebrows. However, it does carry some health risks including the possibility of spreading herpes virus and staph infections through broken skin and dirty threads.

Every woman, or even a man, who wants their eyebrow threaded should be aware of the risks that come with this technique. Furthermore, it's of crucial importance to make sure that person who performs this method washes their hands first and takes a new, unused and clean thread.

Studies conducted in 2007 and 2008, and published in the journals Clinical and Experimental Dermatology and Journal of Cosmetic Dermatology discovered 10 cases of threading warts (small, raised bumps on the skin which can be removed surgically).

The latter study points out that beauticians who perform this technique should be educated. Furthermore, they should pay attention to sterilization, hygiene and always use clean threads. Additionally, the study is concluded with the words that people who want their eyebrows threaded should opt for licensed practitioners.

Eyebrow Threading: Boon or Bane

Team of scientists led by Sanjeev Gupta from Department of Dermatology MM Institute of Medical

Sciences and Research, Mullana, Ambala in India conducted a study which reviewed eyebrow threading safety.

According to a study conducted by team of scientists led by sanjeev gupta, eyebrow threading results in lesion of molluscum in the eyebrow region.

The study reports a series of 8 patients (3 male and 5 female patients) who had lesions of mol-

luscum (common viral infection of the skin) in the eyebrow region after threading. This is, also, the first study that inspects the consequences of eyebrow threading on both men and women. Previous studies involved women only.

All patients were young and aged between 17 and 35, with mean age of 23.6 years. Lesions in their eyebrow region appeared 2 to 4 weeks after eyebrow threading in beauty salon. Furthermore, none of these patients had lesions suggestive of molluscum prior eyebrow threading.

Patients had the same symptoms; their lesions were painless, flesh-colored, and dome-shaped. At first, lesions only affected the eyebrow area, but they gradually started spreading to nearby areas as well.

Since all patients had same symptoms and diagnosis could be made just by physical exam, they didn't have to undergo biopsy. Patients also pointed out that; beauticians didn't only use same thread on multiple patients; they used the same towel as well.

Scientists concluded this study stressing out that beauticians should be given a proper awareness regarding maintenance of the local hygienic measures like washing hands prior any procedure, usage of disposable gloves, avoiding using the same clothing, cotton, cotton thread, and towels on multiple customers.

Furthermore, the scientists also encourage customers to interrupt the beautician if they feel that person who's about to perform eyebrow threading doesn't respect basics of hygiene.

Additionally, to avoid any awkwardness or potential damage, customers are encouraged to take their own cotton, towels etc. to beauty salon.

Results of this study were published in the Indian Journal of Dermatology.

Health Risks Associated with Eyebrow Threading

Eyebrow threading health riskswere briefly mentioned above, but now, we are going to discuss them in detail.

Staph infections occur due to bacteria reaching in exposed areas of the skin; in this case cracks occur due to eyebrow threading

Stap Infections and threading Other Contagious Skin Conditions

Any type of bacteria infection would around eyebrow region occurs because of the fact that threader touches the face of the customer. In reality, this should never happen. The customer's makeup combined with sweat gets into the person's pores. Clogged pores can become inflamed and cause infections or other skin conditions, even acre.

The general practice of eyebrow threading states that beautician should pull the thread in one area of the eyebrow only. Basically, it states that it requires one gentle pull to remove unwanted hair in particular area. However, some beauticians don't really respect that code and they go over one area repeatedly. The longer the contact with customer's skin, the higher the chances of skin infections.

Staph infections occur due to bacteria reaching in exposed areas of the skin; in this case they are cracks that occur due to eyebrow threading. Staph infection and other contagious skin condition can be prevented if customer reminds beautician to take clean thread and wash their hands.

Facial Bleeding

Thread used for this technique isn't completely smooth, it has tiny bumps. These bumps are the ones that remove unwanted hair. In some cases, the thread gets twisted from pulling out the hair and it causes cuts on the skin. These cuts start to bleed. Bleeding or even mere formation of cuts and cracks in the skin can put a person in

danger of getting herpes virus, staph infections, and other diseases or infections that are transmitted through touch or usage of unsanitary equipment.

What if I Really Want to Thread my Eyebrows?

If you've never threaded your eyebrows and want to see what it's like, or you like the fact you don't have to worry about unshapely eyebrows, then you have to pay attention to some things. For example:

Never allow someone to do it at their home – ideally, only licensed beautician should do it. Why? It's because they know what to do and how to move the thread without causing injuries, pain etc. Furthermore, people who perform these techniques in the comfort of their home usually use same thread on multiple people, same towel etc. All these, seemingly unimportant practices can have a significant impact on your skin.

Hygiene – if you notice that beautician didn't change thread, towel, or didn't wash their hands, kindly remind them to do so. Most infections occur due to unsanitary equipment, or even towels.

Monitor – one of the best ways to prevent any health risks associated with eye-brow threading is to monitor how a certain beautician treats other clients. Sit in the corner for a while and see whether they wash their hands prior and after each treatment, whether they use new towel or always the same one, and most importantly see if they discard the used thread and use new one for the next client. Ideally, beautician should wear disposable gloves as well, to ensure the maximum protection for the client (and themselves).

Conclusion

Eyebrow threading is a technique that exists for centuries. In recent years, it took the United States by storm. Everyone wants their eyebrow threaded. First, it's less painful than waxing, and it's quite durable. However, most people aren't aware of the health risks that accompany this technique. Some health risks include staph infections, herpes, and other contagious skin conditions. The infections occur due to poor hygiene. You should strive to get your eyebrows threaded at places where they use clean thread for each client and pay attention to basics of adequate hygiene.

References

http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3276903/

http://healthland.time.com/2011/08/02/does-eyebrow-threading-carry-health-risks/

http://www.seoulbrow.com/2013/07/04/eyebrow-threading-hygiene-concerns-and-health-risks/

TONE

Age Group: 25 - 50+

Rating:



Clarifying and Hydrating Toner

Deep cleans and fights blemishes, blackheads and whiteheads

Know More

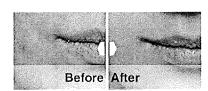




EXFOLIATE

Age Group : 25 - 50+

Rating:



Skin firming and tightening effect

Gentle foaming and deep cleaning action

Renews skin

Know More



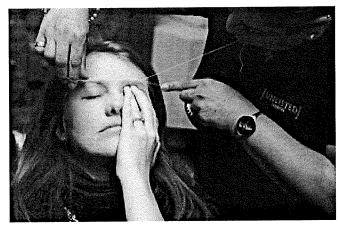
WOMEN'S HEALTH

Does Eyebrow Threading Carry Health Risks?

By Anita Hamilton @anitafhamilton Aug. 02, 2011

When Reema Khan and her husband Mosin Mohammad launched their threading business in Chicago in 2003, the ancient hair-removal technique was little known to most Americans.

An alternative to hot-waxing and plucking that involves using a simple cotton thread to grasp and pull unwanted facial hair out by the root, threading has been commonplace for centuries among women in India and the Middle East. Over the past several years, the craft, which enthusiasts say is gentler and safer than other depilatories, has boomed in the U.S.



Tim Whitby/Getty Images

A woman has her eyebrows threaded in London

Indian-born Khan and Mohammad began their eyebrow-threading venture with a single kiosk in a mall, where they allowed curious customers to observe exactly what the technique involved. Today, the couple's Shapes Brow Bar has 70 outlets across the U.S. and brings in about \$14 million in annual revenue, according to Mohammad.

But the enterprise has hit a snag, inevitably perhaps. With the rapid growth in popularity of threading have come concerns about the health and safety of the method.

The issue: over the past two years, the state-run boards of cosmetology in Texas and Arizona have been issuing cease and desist letters to eyebrow threaders who practice without a cosmetology license. "People practicing threading should be required to have a cosmetology license for the safety of the public," notes Susan Stanford, public information officer for the Texas Department of Licensing and Regulation, who says that poor sanitation, such as reusing threads on multiple customers, can spread staph infections and other contagious skin conditions. In Arizona, inspectors claim to have observed facial bleeding as a result of people's skin getting pinched by the threads.

Juana Gutierrez, who works for Shapes Brow Bar in Mesa, Ariz., is one of five threaders who sued the Arizona Board of Cosmetology on June 29 for the right to practice the technique without a cosmetology license. She says that the health worries of the trendy practice are overblown. "It doesn't cause bleeding.

Gutierrez adds that threading is much safer than using hot wax to remove eyebrow hairs. "You don't get irritated. You don't get burned," she says. What's more, she says, some waxers double-dip the same applicator into the pot of hot wax, which can spread germs from one customer to another. Threading is also "more defined than waxing. It gets every little hair," Gutierrez says.

Mohammad says that while he agrees that threaders should follow basic sanitation guidelines, requiring them to obtain a cosmetology license — which involves taking a course that can cost as much as \$12,000 — is unreasonable. Threading isn't tested on the state licensing exams, and few beauty schools even teach the craft. Most threaders, who typically earn minimum wage plus tips at Shapes Brow Bar, learned their craft from family or friends, not formal training programs.

"The boards don't understand anything about threading. It's plain ignorance and highhandedness," says Mohammad.

Indeed, over the past few years, the states of California, Colorado, Indiana, Nevada and Utah have all exempted threaders from having to obtain a beauty license.

To find out how safe threading really is, Healthland spoke with dermatologist Amy Derick of Barrington, Ill. Derick says the practice is gentler on the skin than waxing, but it does carry health risks, including the potential spread of the herpes virus and staph infections through dirty threads and broken skin. "The consumer needs to be aware that there is a risk with threading, and you need to make sure that there is a clean thread, and the person is washing their hands," she says.

Further, some 10 cases of "threading warts" — small raised bumps on the skin, which can be surgically removed — were reported in studies in 2007 and 2008 in the journals *Clinical and Experimental Dermatology* and the *Journal of Cosmetic Dermatology*. In the latter study, the authors concluded that "beauticians should be educated in maintaining hygiene and using sterilized thread for their procedures" and recommended that "persons wishing to go for threading should be encouraged to visit certified beauticians or beauty parlors."

Potential customers who wish to make sure their threading practitioners follow at least minimum safety measures should also spend a few minutes watching the threader's technique on other clients before submitting to the service. Since the procedure is so quick — it takes just three to five minutes to thread a set of eyebrows — it is easy to see whether the threader changes threads and cleans up between customers. It's also worth checking online reviews on sites like Yelp or Angie's List to see if there is a history of complaints at a particular salon or brow bar.

Mohammad says that his threaders at Shapes Brow Bar already follow basic hygienic practices, even though they aren't certified beauticians. They use hand sanitizers between customers, always use a fresh

Hit with some \$100,000 in fines in Texas and forced to pay legal fees of \$200,000 to keep his shopping-mall kiosks open in that state and in Arizona, Mohammad says he is now focusing his business's growth plans in states that are more tolerant of the practice, such as California. "I am not opening any more Brow Bars in Texas, and I'm not opening any more in Arizona until I see what the outcome is going to be," he says.

The threading battle isn't just a niche business or minor health concern, either. The Institute for Justice, a nonprofit civil liberties group that is providing legal counsel for threaders in Arizona and Texas, sees it as a fundamental assault on workers' rights. "The government is taking away people's right to earn an honest living," notes Wesley Hottot, an Institute for Justice attorney. "It is about economic liberty and there being judicially enforceable limits on how the government can regulate your living."

But as the legal battle rages on in both states, threading's newfound popularity across the rest of the nation shows few signs of waning.

Anita Hamilton is a TIME contributor. You can follow her tweets at @anitafhamilton. You can also continue the discussion on TIME's Facebook page and on Twitter at @TIME.

Anita Hamilton @anitafhamilton

Hamilton is a contributor to TIME and TIME.com who covers business, technology, lifestyle and an oddball assortment of other topics. Follow her on Twitter or find links to all her stories here.

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TEXTBOOK AND REGULATORY RESOURCES - THREADING

- KANSAS CURRICULUM FOR ESTHETICS INCLUDING THREADING
- MILADY ADVANCED ESHTEICS ADVANCED HAIR REMOVAL THREADING PAGES 563-568;601
- MILDAY STANDARD COSMETOLOGY HAIR REMOVAL –THREADING AND EYEBROW TWEEZING PAGES 688-703.
- MILDADY STANDARD ESHETICS HAIR REMOVAL TEMPORARY HAIR REMOVAL PAGES 473-485; 506-508; 525-526
- THE NEVADA REPORT: IDENTIFYING RISKS IN BEAUTY SERVICES PAGES 54-55 HAIR REMOVAL

Esthetics Training	Theory Instruction	Practical Hours	Minimum Procedures
(1) Infection Control	10	50	
(2) Skin anatomy and physiology (a) Structure and function of the body systems and nerves (b) Dermatology (c) Cosmetic chemistry (d) Pharmacology (e) Nutrition	200		
 (3) Skin analysis and consultation (a) Skin types and conditions (b) Contraindications (c) Health screening (d) Consultation, post consultation and home care (e) Skin analysis equipment 	80	40	
(4) Skin treatments (a) Cleansing techniques (b) Exfoliation Mechanical Chemical (enzymes, hydro-aphroxy) (c) Extraction Without lancet (d) Conditioning (e) Masque therapy (f) Protection (g) Massage (h) Basic facial equipment and safety Steamer Brush machine	120	120	80 facials

Esthetics Training cont.	Theory Instruction	Practical Hours	Minimum Procedures
(5) Body treatments	20	20	10
(6) Advanced skin treatments (a) Advanced exfoliation (b) Extractions using a lancet (c) Microdermabrasion (d) LED (e) Chemical exfoliation Gessner's AHA's (f) Microcurrent and other electrical treatments (g) Equipment for advanced skin treatments Microdermabrasion Microcurrent LED Mechanical	80	60	45
(a) Tweezing (b) Waxing (c) Depilatories (d) Sugaring (e) Threading (f) Contraindications and safety	10	30	40 facial waxes 10 body waxes
(8) Make up	20	40	25
(9) Business Practices (a) Business planning (b) Client records			
(10) State law	50		
Total Hours	.1000		

CHAPIER

Advanced Hair Removal

Chapter Outline

- Safety and Disinfection First
- Hirsutism and Hypertrichosis
- Threading
- Sugaring
- Hard Wax

- Soft Wax
- Product Evaluation
- Advanced Facial Waxing
- Speed Waxing and Body Techniques
- Advanced Male Waxing
- Electrolysis
- Hair Removal and Plastic Surgery



Learning Objectives

After completing this chapter, you should be able to:

- ☑ L01 Discuss the importance of safety and disinfection procedures.
- ☑ LO2 Explain the difference between hirsutism and hypertrichosis.
- LO3 Describe basic threading techniques and their uses.
- ✓ LO4 Discuss sugaring as an alternative technique.
- ☑ LO5 Employ advanced facial waxing techniques.
- ☑ L07 Perform Brazilian waxing.
- ☑ LO8 Perform male waxing services.
- ☑ L09 Discuss the basics of electrolysis.
- ☑ LO10 Discuss the uses of hair removal associated with medical intervention.

Key Terms

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

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pg. 590

fatlah

pg. 566

galvanic electrolysis

pg. 591

gender reassignment

pg. 586

human papillomavirus

(HPV)

pg. 564

khite

pg. 566

labia majora

pg. 583

labia minora

pg. 583

pedicle

pg. 593

perineum

pg. 584

rhinoplasty

pg. 594

vaginoplasty

pg. 594

air removal is big business. A client's personal preference and budget will dictate whether he or she seeks temporary hair removal, permanent hair reduction with laser treatment, or permanent hair removal through electrolysis. Whatever technique you use in your clinic, providing a safe and effective service adhering to the principles learned is paramount. Your skill and knowledge of multiple hair removal techniques will allow you to better serve and educate your clients and enhance your business.

Why Study Hair Removal?

Estheticians should study and have a thorough understanding of hair removal because:

- Having knowledge and understanding of all current methods of hair removal will help you better answer clients' questions and advise them, particularly with regard to more advanced methods such as laser hair reduction and electrolysis.
- Learning and subsequently offering a broader range of hair removal services, including advanced
 waxing services such as Brazilian bikini waxing, will increase your potential for profit. A business that
 can offer multiple methods will be assured a larger clientele that will take advantage of all the other
 services offered.
- When undertaking advanced hair removal services, increased risks must often be learned and understood
 for the safety and protection of both the client and the technician. Understanding these risks is essential to
 avoid injury and malpractice liability.
- Studying and improving hair removal techniques will ensure a comfortable and effective hair removal service that is carried out in an efficient and timely manner, generating client satisfaction. The happy client is a regular, repeat client who will bring referrals to the business.

Safety and Disinfection First

As you learned in basic waxing, safety and disinfection precautions are important. This cannot be stressed enough. Times have changed and old practices have been retired because of risks to you and your client. Just as your physician and dentist have changed their infection control and decontamination techniques to more modern practices involving disinfecting or sterilizing multiuse tools and implements, so must you, the esthetician.

the surface. This means two things for you. First, you must wear gloves during all hair removal procedures, such as waxing, tweezing, and sugaring. Second, you must take care to avoid cross-contamination of product or applicators from client to client. As you do more intimate waxing, such as the Brazilian bikini wax, it is critical to keep in mind the possibility of herpetic breakouts or genital warts, along with other health issues. The more hygienic your practice, the more comfortable clients will be with coming to you for hair removal services.

When hair is extracted from skin, there is a *real* potential for blood, lymph, or body fluids to come to

CAUTION!

Always wear a fresh pair of gloves with each client during procedures and replace them if they become compromised.

Herpes Simplex Breakouts

A herpes simplex virus (HSV-2) breakout presents as an ulceration on the penis or the mucous membrane of the vulva, vagina, and cervix. Recurrent breakouts usually occur in the genital and buttock regions.

Tingling, itching, or burning usually result in clusters of vesicles on a red platform. Infections usually heal within 7 to 10 days. Mild fever, pain, and swollen lymph nodes sometimes accompany recurrent HSV-2.

Clients with HSV-2 are acutely aware of the virus and its patterns of breakout. You will discover this when you take a thorough health history during the pre-treatment consultation. Counsel these clients to obtain antiviral medication from a physician, which they should use before hair removal treatments. Under no circumstances should you perform hair removal services on a client experiencing a herpetic breakout.

Genital Warts

Genital warts are visible signs of a cutaneous viral infection—the most common sexually transmitted disease—caused by the human papillomavirus (HPV) (also known as genital herpes). Scientists have identified more than 100 different types of HPV, and most people do not even know that they have been infected with genital warts. Because HPV infection can go unnoticed, transmission is easy. If during waxing you find any unidentified lesions in the pelvic area, abort the procedure and refer the client to a physician for diagnosis and treatment.

Pregnancy

Pregnant women, particularly those in the third trimester, should not have hair removal procedures in which the client has to lie flat for more than 20 minutes. Many clinics require a pregnant client to obtain permission from her physician for hair removal. Figure 19–1 offers contraindications for waxing but can be applied to other forms of hair removal. L01

Hirsutism and Hypertrichosis

There is often some confusion between hypertrichosis and hirsutism; one condition may be simply superfluous hair that may be removed, or the condition may indicate that the client should seek evaluation from a physician for an underlying medical condition. A woman with a significant amount of vellus hair on the face, visible in an ordinary mirror,

has a degree of hypertrichosis. A woman or child with dark terminal hair on the upper lip and face or in the adult male sexual hair growth pattern, such as on the abdomen, chest, and back, has a degree of hirsutism. A woman with a small amount of blond vellus hair on the upper lip or chin that is visible only in an 8-diopter mirror has neither hypertrichosis nor hirsutism, as this is deemed normal. However, when individuals find vellus hair that is visible to them under magnification to be unacceptable and regularly employ temporary measures to remove that hair, such as tweezing or waxing against its direction of growth and distorting the hair follicles, the hair eventually changes to a hirsute situation. This is most apparent during and after menopause. The hair grows in longer, thicker, stronger, and often darker, despite not being caused by a medical condition.

Key to determining whether the client has hirsutism or hypertrichosis is ascertained through observation followed by an evaluation of the client's health history, which is noted on the intake form. Although it is not within the realm of the esthetician to offer a diagnosis, when there is a clear indication of a condition caused by a medical condition, the client can and should be referred to a physician, particularly a reproductive endocrinologist, for further evaluation, diagnosis, and possible treatment.

The Differences Between Hypertrichosis and Hirsutism

Hypertrichosis is excess hair growth on any particular part of the body that is abnormal for the age, sex, race, and culture of the individual; does not necessarily grow in the adult male sexual hair growth patterns; and is not stimulated by male androgens. Although there may not be a cure for the condition, the hair can be removed by temporary or permanent means. Hirsutism, on the other hand, is the term used for terminal hair growth in women and children (not men) that is caused by excessive male androgens present in the blood. It is hair that does grow in the areas of adult male sexual hair growth patterns. The cause may be congenital (from birth) or acquired. If the underlying cause is treated, the hirsute condition may be minimized or eliminated. In the meantime, other methods of hair removal may be employed.

- **Blood and circulatory disorders**—Blood and circulatory disorders, particularly those that cause easy bruising (e.g., thrombosis) are contraindicated.
- Cancer treatments—Chemotherapy and radiation may cause increased sensitivity. It would be advisable to wait until 6 weeks after the last cancer treatment.
- **Epilepsy**—Epilepsy is contraindicated unless it has been controlled for a long period and with medication that does not cause easy bruising. A physician's approval must be obtained before the waxing service. The technician should receive a physician's note and have the client sign a release.
- **Diabetes**—The client with diabetes should consult with the physician for the degree of severity and the degree of healing and sign a release.
- Fractures and sprains—The area of fracture or sprain should not be waxed until it is completely healed.
- Hemophilia—Clients with hemophilia should not be waxed, because bleeding can occur, especially when removing a high percentage of anagen hairs. The removal of anagen hairs breaks the cycle of blood flow to the dermal papilla and causes bleeding in the follicle.
- Herpes, herpes simplex (cold sore)—Clients with herpes should not be waxed during active outbreaks. Prophylactic medication should be taken before waxing.
- Inflamed or irritated skin—Inflamed or irritated skin should not be waxed.
- Lack of skin sensation—The lack of skin sensation can be due to circulatory problems arising from heart disease, diabetes, or multiple sclerosis. There can be an increased risk of burning, injury, or infection. These clients should not be waxed.
- Lupus—Those with mild forms of lupus and not presenting with the rash on the areas to be waxed can be waxed, but it is not advisable. At the very least, these clients should seek referrals from physicians and sign waivers.
- Moles, skin tags, and warts—All moles, skin tags, and warts should be avoided. Any mole that looks suspicious; has any of the pre-cancer signs of size, shape, and color; or has hair growing out of it should not be waxed without the permission of a physician. Hair-removal specialists offer a valuable service when they recognize suspicious moles and refer their clients to physicians.
- Pregnancy—There is nothing intrinsically wrong with waxing the bikini area or any other area on the pregnant client, but a judgment should be made by both parties jointly and a release form should be signed. If the pregnant client is considered high risk or has high blood pressure or anxiety, it is better to avoid waxing. If the areas to be waxed take more than 20 minutes of the client lying flat on her back, then the client should wait until after the birth of the baby. Prolonged time flat on the back could deplete oxygen to the fetus. Even though there are no recorded cases of infants being harmed because their mothers received wax service, the possibility of a lawsuit remains. The bottom line is to get a physician's permission and have the client sign a release form
- Scar tissue—No scar tissue, including keloids, should be waxed over.
- Sunburn—Sunburned areas should not be waxed. Any such area must have healed completely.
- Skin disorder conditions—Skin disorder conditions like eczema, seborrhea, and psoriasis maybe waxed depending on severity. Minimal flakiness of dead skin cells can be waxed, but not if the skin is broken. Double dipping should be avoided. In mild cases, the skin may benefit from the exfoliating properties of waxing, but in more advanced stages, broken skin could result, so it is imperative that the technician receives a signed release from the client before waxing.
- Varicose veins—Technicians must not wax over varicose veins but they may wax surrounding areas.
- Sensitive areas—Never wax eyelids, inside the ears or nose, or the areola of the breast.
- Any uncertain situation.

▲ Figure 19–1
Waxing contraindications.



Causes of Hypertrichosis

Causes of hypertrichosis include the following:

- Congenital causes (acquired from birth).
- Androgen independence.
- Natural life occurrences, such as puberty, pregnancy, or menopause.
- Reaction to certain medical procedures.
- Result of some cancer treatments.
- Reaction to certain prescription medications, especially steroids.

Causes of Hirsutism

Causes of hirsutism include the following

- Genetic inheritance.
- Androgen dependence.
- Diseases and disorders of the endocrine system.

A client may present herself with what, on "Main Street USA," is a condition of considerable hairiness throughout her body. However, given her race and culture, it may not be considered either a problem or unattractive, and she may be physically very healthy. This is hypertrichosis—hairiness that does not follow the adult male sexual hair growth pattern. Another female client may present with a beard, and further questioning may reveal that she also has diabetes. She should be referred to a physician. A more thorough examination from an endocrinologist will likely reveal that she has a rare disorder called *Archard-Thiers syndrome*, and her "beard" is hirsute. With medical treatment and hair removal, the hirsute condition can be rectified. **102**

Threading

Threading, also known as banding, is a method of hair removal in which the technician maneuvers a looped and twisted cotton thread with his or her fingers. The most common area for threading is on the face. Although not as common as other means of hair removal, threading is worthy of mention because it is a fast, inexpensive method of mass tweezing that does not cause trauma to the skin. It is a method of hair removal worth considering for individuals who have skin treatments or use products that prohibit waxing. Threading is a technique

that is difficult to self-teach, and hands-on training is recommended.

The History of Threading

Threading has been used for centuries in Middle Eastern countries such as Iran, Turkey, India, and Pakistan. In Arabic, threading is known as *khite*; in Egyptian, it is *fatlah*. It is an inexpensive method of hair removal that is gaining popularity in many parts of the United States. For many clients, finding an experienced and skilled threader is like finding gold.

The Benefits of Threading

In the hands of a master threading practitioner, threading moves at a much faster rate than tweezing and does so without the trauma to the skin from waxing. Because it does not affect the skin, threading is a good choice for individuals who cannot tolerate waxing on the face because they use prescription medications and other products (such as Retin-A, Differin, Accutane, and alpha hydroxy acids) or have had facial treatments that cause negative reactions when waxed. The level of discomfort during threading is usually less than electrolysis but is similar to tweezing. Because the hairs are snagged faster than tweezing, the plucking sensation is more tolerable. Threading requires only the use of strong household cotton thread, an antiseptic pre-treatment, and soothing aftercare. The effects of threading closely resemble the effects of waxing and last about the same length of time. And the final benefit: The speed of an experienced and skilled technician combined with the minimal product overhead equates to a good profit margin.

Preparation of Equipment and the Treatment Area

To begin, use a new, clean thread for each client. As thread can wear when working, make sure you have several strands of pre-cut thread available in a closed container. Place the client in the treatment chair lined with a fresh sheet, towel, or paper.

Preparation of the Technician

Because of the potential of exposure to blood, lymph, or body fluids, the technician must wear gloves.

thumb and forefinger

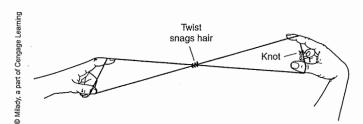
Preparation of the Client

Protect the client's hair by wrapping it to avoid snagging hairs on his or her head. After the hair is wrapped, thoroughly wash your hands and don gloves. Cleanse the area to be treated of any makeup, wipe it with a mild liquid antiseptic, and allow it to dry. Avoid creams, as they will remain on the hair and reduce the gripping effectiveness of the threading.

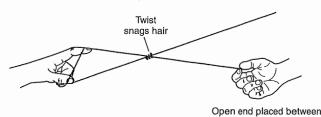
Threading Technique

The most popular areas for threading are the eyebrows, the area above the eyebrow (up to the hairline), the sideburns, the sides of the face, the upper lip, the chin, and under the jaw. The thread should be a strong cotton household thread. Maintain lengths of thread in a sanitary environment and dispose of used thread after each client. Thread length should range from 24 to 30 inches (60 to 75 centimeters). Shorter lengths are easier to control when learning and developing the skill and are better for technicians with smaller hands. As you become more skilled, you will be able to manage a larger loop of thread.

Knot the two ends of the thread together, forming a loop. Place your forefingers, middle fingers, and thumbs through each end of the loop in a "cat's cradle." Twist the loop at one end approximately a dozen times. Then coax the twists into the center of the loop, making sure the knot is at one end near the fingers so it does not interfere with the twisting. To start threading, place the upper end of the twist under the unwanted hairs so that they hang over the twist, then quickly manipulate the twist upward by spreading the lower fingers, thus entrapping or snagging the unwanted hairs and plucking them out (Figures 19–2 and 19–3). This is followed by quickly spreading the upper fingers, thus moving



▲ Figure 19–2 Two-handed threading.



▲ Figure 19–3
Traditional hand-and-mouth threading.

the twist toward the lower fingers, dropping some of the plucked hairs. Move quickly to another area of unwanted hairs. The fingers must move rapidly at a rate of one movement approximately every $\frac{1}{4}$ second.

As the twist becomes congested with hair, the rapid movement of the twisting is inhibited, so twist a new part of the loop or use a new thread (Figure 19–4). After the service is complete, apply a soothing lotion to the skin.

A second, more traditional technique that many threading practitioners use is to put one end of the loop of thread in the practitioner's mouth gripped between the teeth and maneuvering the loop from one end. This method is usually applied by threading practitioners on themselves. Although the idea of this method may seem unhygienic to many, there has been no data to suggest that it is harmful to a client. However, before trying it, check with your state's cosmetology or esthetic regulatory board.



▲ Figure 19–4
Eyebrow threading.

Indications & Contraindications of Threading

Indications

The indication for threading is unwanted hair including the eyebrows; between the eyebrow and hairline; the upper lip; and the hair along the jaw, under the chin, and on the sides of the face

Contraindications

- Broken, irritated skin
- Active eczema and psoriasis
- Active herpes lesion
- Sunburned skin

▲ Figure 19-5

Threading indications and contraindications.

Pros & Cons of Threading

Pros

- Good alternative for those unable to tolerate waxing on the face due to use of prescription drugs and other products (e.g., Retin-A, Differin, AHAs) or facial treatments that cause negative reactions when waxed
- Inexpensive, requiring only the use of strong household cotton thread, an antiseptic pre-treatment, and soothing aftercare
- Minimal cost and, when administered by an experienced practitioner, achieved quickly (faster than tweezing) for a high profit
- Discomfort level is usually less than electrolysis and waxing, similar to tweezing, but because it is faster than tweezing, the plucking sensation is more tolerable

Cons

- Ineffective for large parts of the body
- Can be uncomfortable because the hairs are snagged out of the skin faster than tweezing but more slowly than waxing
- When threading is not done with care and accuracy, the practitioner may unwittingly remove vellus hair that was not problematic and in doing so encourage the vellus hair to grow back irregularly or become terminal hair, thereby aggravating the hair growth situation
- Because some follicles become distorted because of the pulling, the regrowth hair may stand in a wispy fashion where it once lay flat on the skin
- As the hair grows back, folliculitis, pustules, and inflammation that can cause pigmentation problems may increase

▲ Figure 19-6
Threading pros and cons.

See Figures 19-5 and 19-6 for further discussion of threading. LO3

Sugaring

Like threading, sugaring is an ancient method of hair removal that has found its way to North America and has become increasingly popular. Customers like the idea of an ancient, well-used technique, and they like that the sugar paste is 100 percent natural (Figure 19–7). As ancient as this method is, it is still employed in its original form around the world; however, the technique has evolved in the Western world with different aspects and consequences.

The original sugaring formulas, made without resins, required only a warm, moist cloth for aftercare. Manufacturers who have jumped on the sugaring bandwagon have attempted to distinguish themselves by altering the original formulas with additives and

Review Questions

- 1. Discuss the two techniques of threading and how they differ.
- 2. Discuss the two techniques of sugaring and their pros and cons.
- 3. What services is hard wax best used for? What are its key attributes?
- 4. What services is soft wax best used for? What are its key attributes?
- 5. Outline the protocol used for brow design.
- Outline the steps for Brazilian waxing.
- 7. What is the difference between American and Brazilian waxing?
- 8. What are the three positions for removing hair between the buttocks, based on growth and mobility?
- 9. Discuss three reasons why electrolysis may be the preferred choice over laser hair removal.
- 10. Discuss three reasons why waxing is not suitable on patients after forehead rotation flap surgery to the nose.
- Outline the three main stages that patients completing male-to-female gender reassignment go through.

Glossary

human

khite

electrocoagulation the process by which heat causes cells to coagulate and become dysfunctional.

fatlah the Egyptian word for threading.

galvanic electrolysis a modality of electrolysis using direct current.

gender reassignment the process of physically changing to the opposite gender.

papillomavirus (HPV) genital warts.

the Arabic word for threading.

labia majora the outer folds of the vulva on either side of the vagina.

the inner folds of the vulva on the edge of the vaginal opening. labia minora

pedicle part of a skin graft that is temporarily attached to its original site for the purpose of

maintaining a good blood supply.

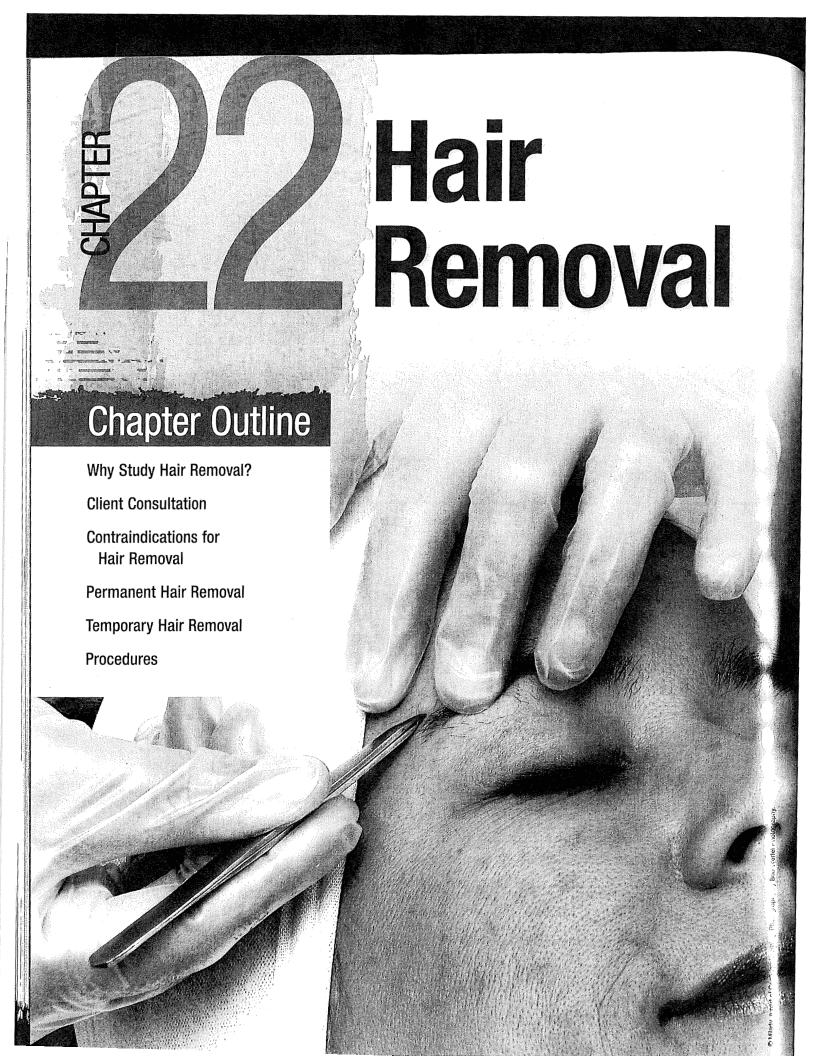
the area between the vulva and anus or scrotum and anus. perineum

rhinoplasty plastic or reconstructive surgery performed on the nose to change or correct its appearance.

a cutaneous viral infection commonly caused by sexual transmission and exhibited by

genital surgery in which the testicles are removed and the skin from the penis (with the hair vaginoplasty

permanently removed) is inverted to form a vaginal opening.



Learning Objectives

After completing this chapter, you will be able to:

▼ LO1 Describe the elements of a client consultation for hair removal.

▼LO2 Name the conditions that contraindicate hair removal in the salon.

▼ LO3 Identify and describe three methods of permanent hair removal.

▼ LO4 Demonstrate the techniques involved in temporary hair removal.

Key Terms

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

Brazilian bikini waxing

pg. 688

depilatory

pg. 693

electrolysis pg. 692 epilator pg. 694

health screening

form pg. 689

hirsuties (hypertrichosis)

pg. 688

hirsutism pg. 688

laser hair removal pg. 692

photoepilation (Intense Pulsed

Light) pg. 692 sugaring pg. 695

threading pg. 695

tweezing pg. 693 ne 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. **Brazilian bikini waxing**, a waxing technique that requires the removal of all the hair from the front and the back of the bikini area, is a popular style of waxing. The method was named for the completely hairless look required when wearing a Brazilian style bikini. Brazilian bikini waxing requires more specific training than offered in this book. Ask your instructor about advanced courses in Brazilian bikini waxing.

Many men are now frequently requesting hair removal services. It has become a fashion trend for men to have hairless legs, arms, and even chests. Men who participate in sports such as cycling, swimming, body building, and soccer often remove hair from the legs and arms, and occasionally the entire body. The nape of the neck, chest, and back are the most frequent removal requests for men.

The most common form of hair removal in salons and spas is waxing, but with the popularity of these services on the rise, many different methods are now coming into play.

Hirsuties (hur-SOO-shee-eez), also known as hypertrichosis (hy-pur-trih-KOH-sis), refers 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. Hirsutism (HUR-suh-tiz-um) is an excessive growth or cover of hair, especially in women. 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.

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 fall into two major categories: permanent and temporary. Salon techniques are generally limited to temporary methods.

Why Study Hair Removal?

Cosmetologists should study and have a thorough understanding of hair removal because:

- Removing unwanted hair is a primary concern for many clients, and being able to advise them on the various types of hair removal will enhance your ability to satisfy your clients.
- Offering clients hair removal services that meet their needs and can be scheduled while they are already in the salon can be a valuable extra service you can offer.

Learning the proper hair removal techniques and performing them safely makes you an even more important part of a client's beauty regimen.

Consultation

Before performing any hair removal service, a consultation is always necessary. Ask the client to complete a health screening form. Similar to an intake form, a health screening form is frequently used in skin care services and is 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 that might affect treatment (Figure 22-1). Allergies or sensitivities must be noted, highlighted, and documented on the service record card—the client's permanent progress record of services received, and products purchased or used. Keep in mind that many changes can occur between client visits. Since a client's last visit, he or she may have been prescribed medications such as antidepressants, hormones, cortisone, medicine for blood pressure or diabetes, or topical prescriptions such as Retin-A°, Renova°, and hydroquinone. A client using any one of these prescriptions may not be a candidate for hair removal. See Figure 22–2 for a sample health screening form.



▲ Figure 22-1 Filling out a service record card.

▼ Figure 22–2 Health Screening Form.

	Date
	Name Sex
	Address
	City State Zip
1.	Have you been seen by a dermatologist? Yes No If yes, for what reason?
	Please list all medications that you take regularly. Include hormones, vitamins, and other similar supplements:
	Do you take steroid drugs or prednisone? Yes No
4.	Have you ever used Accutane® (isotretinoin)? Yes No If yes, when did you stop taking Accutane® (isotretinoin)?
	Accutatic (Societinoin);
5.	
5.	Do you use or have you recently used Retin-A*, Renova*, Tazorac*, Differin*, Azelex*, or any other medical peeling agent? Yes No If yes, for how long?
	Do you use or have you recently used Retin-A*, Renova*, Tazorac*, Differin*, Azelex*, or any other
	Do you use or have you recently used Retin-A°, Renova°, Tazorac°, Differin°, Azelex°, or any other medical peeling agent? Yes No If yes, for how long?
6.	Do you use or have you recently used Retin-A*, Renova*, Tazorac*, Differin*, Azelex*, or any other medical peeling agent? Yes No If yes, for how long? Do you have any allergies? Are you allergic to any medications? Yes No
6. 7.	Do you use or have you recently used Retin-A°, Renova°, Tazorac°, Differin°, Azelex°, or any other medical peeling agent? Yes No If yes, for how long? Do you have any allergies? Are you allergic to any medications? Yes No If yes, please list allergies:
6. 7.	Do you use or have you recently used Retin-A°, Renova°, Tazorac°, Differin°, Azelex°, or any other medical peeling agent? Yes No If yes, for how long? Do you have any allergies? Are you allergic to any medications? Yes No If yes, please list allergies: Are you pregnant or lactating? Yes No
6. 7.	Do you use or have you recently used Retin-A°, Renova°, Tazorac°, Differin°, Azelex°, or any other medical peeling agent? Yes No If yes, for how long? Do you have any allergies? Are you allergic to any medications? Yes No If yes, please list allergies: Are you pregnant or lactating? Yes No Have you had any of the following procedures?
6. 7.	Do you use or have you recently used Retin-A°, Renova°, Tazorac°, Differin°, Azelex°, or any other medical peeling agent? Yes No If yes, for how long? Do you have any allergies? Are you allergic to any medications? Yes No If yes, please list allergies: No Have you pregnant or lactating? Yes No Have you had any of the following procedures? Laser resurfacing: Yes Date No
6. 7.	Do you use or have you recently used Retin-A°, Renova°, Tazorac°, Differin°, Azelex°, or any other medical peeling agent? Yes No If yes, for how long? Do you have any allergies? Are you allergic to any medications? Yes No If yes, please list allergies: Are you pregnant or lactating? Yes No Have you had any of the following procedures? Laser resurfacing: Yes Date No Light chemical peel: Yes Date No
6.7.8.	Do you use or have you recently used Retin-A°, Renova°, Tazorac°, Differin°, Azelex°, or any other medical peeling agent? Yes No If yes, for how long? Do you have any allergies? Are you allergic to any medications? Yes No If yes, please list allergies: No Have you pregnant or lactating? Yes No 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
6.7.8.9.	Do you use or have you recently used Retin-A°, Renova°, Tazorac°, Differin°, Azelex°, or any other medical peeling agent? Yes No If yes, for how long? Do you have any allergies? Are you allergic to any medications? Yes No If yes, please list allergies: No Have you pregnant or lactating? Yes No 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 Any microdermabrasion? Yes Date No

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Many of these medications cause changes in the skin that can cause epidermal skin to lift during waxing treatment. In other words, the epidermal skin can peel off along with the wax and the hair.

Clients who have autoimmune diseases such as lupus can have reactions to the inflammation caused by waxing, electrolysis, or other hair removal methods.

Clients with conditions such as rosacea or eczema can experience severe inflammation, because these skin conditions are likely to already be inflamed before treatment.

It is imperative that every client fill out a release form for the hair removal service you are going to provide. This should be completed prior to every service. It serves as a reminder to the client to really think about any topical or oral medication they might have started since their last visit. See **Figure 22–3** for a sample release form.

M LO1

Contraindications for Hair Removal

One of the main purposes of a client consultation is to determine the presence of any contraindications for hair removal. Some medical conditions and medications may cause thinning of the skin or make the skin more vulnerable to injury. Waxing clients with these conditions could cause unnecessary inflammation or severe injuries to the skin. Clients should not have any waxing or

▼ Figure 22–3
Sample release form.

RELEASE FORM FOR HAIR REMOVAL					
l,, am am not	presently using:				
Retin-A, or any other topical prescription medication					
Accutane: (isotretinoin)					
any alphahydroxy-based products					
any medications such as cortisone, blood thinners, or diabetic medication					
I understand that if I begin using any of the above products and do not inform my esthetician/cosmetologist prior to hair removal, I am accepting full responsibility for any skin reactions.					
The hair removal process has been thoroughly explained to me, and I have had an opportunity to ask questions and receive satisfactory answers.					
Client's Signature	Date				
Technician's Signature	Date				

hair removal performed anywhere on the body if one or more of the following is the case, without first obtaining written permission from their physician:

- Client is using or has used isotretinoin (Accutane) in the last six months.
- Client is taking blood-thinning medications.
- · Client is taking drugs for autoimmune diseases, including lupus.
- Client is taking predisone or steroids.
- Client has psoriasis, eczema, or other chronic skin diseases.
- Client has a sunburn.
- Client has pustules or papules in area to be waxed.
- Client has recently had cosmetic or reconstructive surgery within the previous three months.
- · Client has recently had a laser skin treatment on the body.
- Client has severe varicose leg veins.
- Client has any other questionable medical condition.

Facial waxing should not be performed on clients with any of the following conditions, without first obtaining permission from their physician:

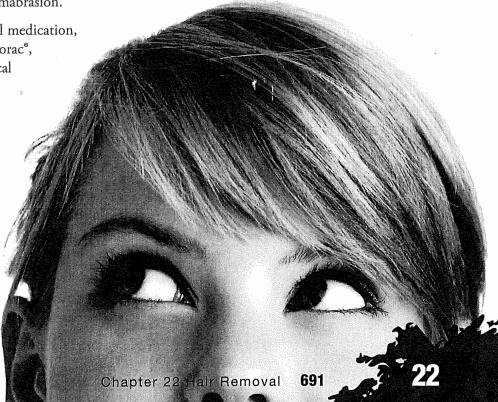
- · Client has rosacea or very sensitive skin.
- Client has a history of fever blisters or cold sores. (Waxing can cause a flare-up of this condition without medical pretreatment.)
- Client has had a recent chemical peel using glycolic, alpha hydroxy, or salicylic acid, or other acid-based products.

· Client has recently had microdermabrasion.

 Client uses any exfoliating topical medication, including Retin-A°, Renova°, Tazorac°, Differin°, Azelex°, or other medical peeling agent.

 Client has recently had laser skin treatment or surgical peel.

 Client uses hydroquinone for skin lightening. ▼ LO2



Shaving

The most common form of temporary hair removal, particularly of men's facial hair, is shaving. The targeted area should be softened by applying a warm, moist towel, and then applying a shaving cream or lotion that has excellent lubrication qualities and calms the skin. An electric clipper may also be used, particularly to remove unwanted hair at the nape of the neck. The application of a preshaving lotion helps to reduce any irritation. An electric trimmer can also make short work of unwanted hair at the nape of the neck.

Contrary to popular belief, shaving does not cause the hair to grow thicker or stronger. It only seems that way because the razor blunts the hair ends and makes them feel stiff.

Tweezing

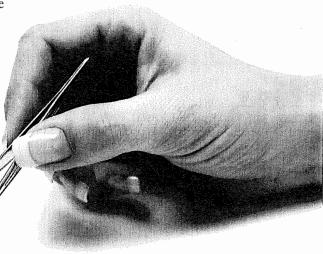
Tweezing is using tweezers to remove hairs, commonly used to shape the eyebrows, and can also be used to remove undesirable hairs from around the mouth and chin. Eyebrow arching is often done as part of a professional makeup service. Correctly shaped eyebrows have a strong, positive impact on the overall attractiveness of the face. The natural arch of the eyebrow follows the orbital bone, or the curved line of the eye socket, but hair can grow both above and below the natural line. These hairs should be removed to give a clean and attractive appearance.

PROCEDURE Eyebrow Tweezing SEE PAGE 701

Depilatories

A depilatory is a substance, usually a caustic alkali preparation, used for the temporary removal of superfluous hair by dissolving it at the skin's surface. It contains detergents to strip the sebum from the hair and adhesives to hold the chemicals to the hair shaft for the five to ten minutes necessary to remove the hair. During the application time, the hair expands and the disulfide bonds break. Finally, such chemicals as sodium hydroxide, potassium hydroxide, thioglycolic acid, or calcium thioglycolate destroy the disulfide bonds. These chemicals turn the hair into a soft, jelly-like mass that can be scraped from the skin. Although depilatories are not commonly used in salons, you should be familiar with them in the event that your clients have used them.

Depilatories can be inflammatory to skin, and should not be used on sensitive skin types or on clients who have contraindications for waxing. It is a good idea to patch test any depilatory on your client's skin prior to treatment the first time. Select a hairless part of the arm, apply a small



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	APPROPRIATE HAIR REMOVAL PROCEDURES				
BODY AREA	WAXING	TWEEZING	DEPILATORIES		
FACE/UPPER LIPS/EYEBROWS	X	X			
UNDERARMS	X				
ARMS	X		X		
BIKINI LINE	X	X			
BACK/SHOULDERS	X	x (after waxing or sugaring)	X		
LEGS	X		. .		
TOPS OF FEET/TOES	X	-7	x		

Table 22-1 Appropriate Hair Removal Procedures.

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amount according to the manufacturer's directions, and leave it on the skin for seven to ten minutes. If there are no signs of redness, swelling, or rash, the depilatory can probably be used safely over a larger area of the skin. Follow the manufacturer's directions for application.

For an easy reference guide for which type of hair removal procedure is appropriate for various areas of the body, refer to **Table 22–1**.

FOCUS ON

CLIENT CONSULTATION – EYEBROW DESIGN

As with any procedure, always perform a client consultation prior to tweezing or waxing the eyebrows. Determine the client's wishes for final eyebrow shape. If you remove too much hair, it will generally grow back, but regrowth may take several months. You will also end up with an unhappy client who is not likely to return for your services. Conducting a thorough consultation beforehand will help you avoid such mistakes.

Epilators

An **epilator** removes the hair from the bottom of the follicle. Wax is a commonly used epilator, applied in either hot or cold form as recommended by the manufacturer. Both products are made primarily of resins and beeswax. Cold wax is somewhat thicker and does not require fabric strips for removal. Because waxing removes the hair from the bottom of the follicle, the hair takes longer to grow back. The time between waxings is generally four to six weeks.

Wax may be applied to various parts of the face and body, such as the eyebrows, cheeks, chin, upper lip, arms, and legs. On male clients, wax may be used to remove hair on the back and nape of the neck. The hair should be at least ¼-inch (0.6 centimeters) long for waxing to be effective. Hair shorter than ¼ inch may not adhere to the wax. If hair is more than ½-inch long, it should be trimmed before waxing.

Be aware that removing vellus (lanugo) hair may cause the skin to temporarily feel less soft. When waxing is done properly, the hair will not feel like beard stubble as it grows out.

Before beginning a wax treatment, be sure that the client completes a health screening form, and have the client sign a release form. Wear disposable gloves to prevent contact with bloodborne pathogens.

- To prevent burns, always test the temperature of the heated wax before applying to the client's skin. Use a professional wax heater for warming wax. Never heat wax in a microwave or on a stove top. Wax can become overheated and burn the client's skin.
- Use caution so that the wax does not come in contact with the eyes.
- Do not apply wax over warts, moles, abrasions, or irritated or inflamed skin. Do not remove hair protruding from a mole, because the wax could cause trauma to the mole.
- The skin under the arms is sometimes very sensitive. If so, use cold wax.
- Redness and swelling sometimes occur after waxing sensitive skin. Apply an aloe gel and cool compresses to calm and soothe the skin.

22-4 Waxing

Eyebrow

SEE PAGE 703

PROCEDURE

Body Waxing SEE PAGE 705

Threading

Threading is a temporary hair removal method whereby cotton thread is twisted and rolled along the surface of the skin, entwining the hair in the thread and lifting it from the follicle. The technique is still practiced in many Eastern cultures today. Threading has become increasingly popular in the United States as an alternative to other methods. It requires specialized training.

Sugaring

Sugaring is another temporary hair removal method that involves the use of a thick, sugar-based paste and is especially appropriate for more sensitive skin types. Sugaring is becoming more popular and produces the same results as hot or cold wax. One advantage with sugaring is the hair can be removed even if it is only 1/8-inch long.

Removing the residue from the skin is simple, as it dissolves with warm water. M LO4

Threading, sugaring, and specialty waxing, such as Brazilian waxing, are advanced techniques that require additional training and experience. Check with your instructor about advanced training that is often available at trade shows and seminars, as well as through videos.

CAUTION

Beeswax can sometimes cause allergic reactions. Always give a small patch test of the product to be used prior to the service.

2 Luba V Nei, 2010; used under license from Shutterstock.com

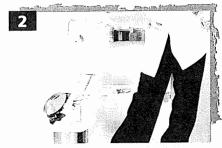
Pre-Service Procedure

A. Preparing the Facial Room

Check your room supply of linens (towels and sheets) and replenish as needed.



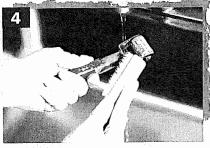
Change the bed or treatment chair linens.



2 Throw away any disposables used during the previous service.



Clean and disinfect any used brushes or implements, such as mask brushes, comedo extractors, tweezers, machine attachments, and electrodes.



4 Clean and disinfect any machine parts used during the previous service.



- 5 Clean and disinfect counters and magnifying lamp or lens.
- 6 Check water level on vaporizer as needed.



Replace any disposable implements you may need, such as gloves, sheet cotton, gauze squares, sponges for cleansing and makeup, disposable makeup applicators (mascara wands, lip brushes, other brushes), spatulas and tonguedepressor wax applicators, cotton swabs, facial tissue, and wax strips.

8 Prepare to greet your next client.



Review your client schedule for the day and decide which products you are likely to need for each service. Make sure you have enough of all the products you will be using that day. You may have to retrieve additional product from the dispensary. This is also a good time to refresh your mind about each repeat client you will be seeing that day and his or her individual concerns.

Your room should be ready to go from the previous night's thorough cleaning and disinfecting. (See "At the End of the Day" in Procedure 22–2, Post-Service Procedure.)

B. Preparing for the Client

11 Retrieve the client's intake form or service record card and review it. If the appointment is for a new client, let the receptionist know that the client will need an intake form.

12 Organize yourself by taking care of your personal needs before the client arrives—use the restroom, get a drink of water, return a personal call—so that when your client arrives, you can place your full attention on her needs.

Turn off cell phone, pager, or PDA. Be sure that you eliminate anything that can distract you from your client while she is in the salon.

Take a moment to clear your head of all your personal concerns and issues. Take a couple of deep breaths and remind yourself that you are committed to providing your clients with fantastic service and your full attention.

15 Wash your hands following Procedure 5–3, Proper Hand Washing, before going to greet your client.

Service Tip

Before servicing a client, take a moment to sit on your bed or facial chair and take a good look around. Based on what you see, hear, and feel, ask yourself this question: What kind of an experience will my client have while she is here?

Answering the following questions will enable you to provide your client with a positive experience:

- Is my room clean and organized or cluttered and messy?
- Will the music and the temperature be comfortable for the client?
- Am I wearing too much perfume/cologne? Am I carrying an unpleasant food or tobacco odor? Is my breath pleasant smelling?
- When I look at myself in the mirror, do I see the professional I want to be? Does my personal grooming—my hair, makeup, and clothing look professional?
- Do I look as if I am happy and enjoying my work?
- Is there some problem bothering me today that is affecting my ability to concentrate on the needs of my client?

Remember the old adage: You only get one chance to make a good first impression. Stack the odds in your favor!



C. Greet Client



Greet your client in the reception area with a warm smile and in a professional manner. Introduce yourself if you've never met, and shake hands. The handshake is the first acceptance by the client of your touch, so be sure your handshake is firm and sincere. If the client is new, ask her for the intake form she filled out in the reception area.



Escort the client to the changing area for her to change into a smock or robe. Make sure you tell her where to securely place her personal items. If you do not have a changing room or lockers, she will need to change in the treatment room.

Ask the client to remove all jewelry and put it in a safe place, because you do not want to stop the service for her to remove the jewelry later.

19 Invite her to take a seat in the treatment chair or to lie down on the treatment table.





Drape the client properly and either place her hair in a protective cap or use a headband and towels to drape her hair properly. Give her a blanket and make sure she is comfortable before beginning the service. Remember, the client is not just a waxing or another service, but a person you want to build a relationship with. By first showing clients respect, you will begin to gain their trust in you as a professional. Openness, honesty, and sincerity are always the most successful approach in winning clients' trust, respect, and, ultimately, their loyalty.

Perform a consultation before beginning the service. If you are servicing a returning client, ask how her skin has been since her last treatment. If the client is new, discuss the information on the intake form, and ask any questions you have regarding her skin or any conditions listed on the form. Determine a course of action for the treatment, and briefly explain your plan to the client.

Post-Service Procedure

A. Advise Clients and Promote Products



Before your client leaves your treatment area, ask her how she feels and if she enjoyed the service. Explain the conditions of her skin and your ideas about how to improve them. Be sure to ask if she has any questions or anything else she wishes to discuss. Be receptive and listen. Never be defensive. Determine a plan for future visits. Give the client ideas to think over for the next visit.



Advise client about proper home care and explain how the recommended professional products will help to improve any skin conditions that are present. This is the time to discuss your retail product recommendations. Explain that these products are important and explain how to use them.

B. Schedule Next Appointment and Thank Client



Escort the client to the reception desk and write up a service ticket for the client that includes the service provided, the recommended home care, and the next visit/service that needs to be scheduled. Place all recommended professional retail home-care products on the counter for the client. Review the service ticket and the product recommendations with your client.



4 After the client has paid for her service and take-home products, ask if you can schedule her next appointment. Set up the date, time, and type of service for this next appointment, write the information on your business card, and give the card to the client.

22-2 Post-Service Procedure continued



Thank the client for the opportunity to work with her. Express an interest in working with her in the future. Invite her to contact you should she have any questions or concerns about the service provided. If the client seems apprehensive, offer to call her in a day or two in order to check in with her about any issues she may have. Genuinely wish her well, shake her hand, and wish her a great day.



Be sure to record service information, observations, and product recommendations on the service record card, and be sure you return it to the proper place for filing.

At the End of the Day

- Put on a fresh pair of gloves to protect yourself from contact with soiled linens and implements.
- Remove all dirty laundry from the hamper. Spray the hamper with a disinfectant aerosol spray or wipe it down with disinfectant. Mildew grows easily in hampers.
- Remove all dirty spatulas, used brushes, and other utensils. Most of these should have been removed between clients during the day.
- Thoroughly clean and disinfect all multiuse tools and implements.
- Clean then disinfect all counters, the facial chair, machines, and other furniture with disinfectant. The magnifying lamp should be cleaned and disinfected on both sides in the same manner.
- 6 Replenish the room with fresh linens, spatulas, utensils, and other supplies, so it is ready for the next day.
- 7 Change disinfection solution.
- 8 Maintain vaporizer as necessary.
- Check the room for dirt, smudges, or dust on the walls, on the baseboards, in corners, or on air vents. Vacuum and mop the room with a disinfectant.
- 10 Spray the air in the room with a disinfectant aerosol spray.
- Replenish any empty jars. If you are reusing jars for dispensing creams from a bulk container, always use up the entire content of the small jar and thoroughly clean and disinfect the jar before replenishing. Never add cream to a partially used jar. Rinse the empty jar well with hot water and then disinfect, rinsing thoroughly. Allow the jar to dry before refilling.

Eyebrow Tweezing

Implements and Materials

You will need all of the following implements, materials, and supplies:

- Antiseptic lotion
- Cotton balls
- Disposable gloves
- Emollient cream
- Eyebrow brush
- Gentle eye makeup remover
- Soothing toner
- Towels
- Tweezers

Preparation

• Perform PROCEDURE Pre-Service Procedure

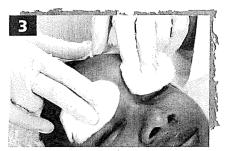
SEE PAGE 696

Procedure

Cleanse the eyelid area with cotton balls moistened with gentle eye makeup remover.



2 Brush the eyebrows with a small brush to remove any powder or scaliness.



3 Soften brows. Saturate two pledgets (tufts) of cotton, or a towel with warm water, and place over the brows. Allow them to remain on the brows one to two minutes to soften and relax the eyebrow tissue. You may soften the brows and surrounding skin by rubbing a small amount of emollient cream into them.

4 Apply a mild toner on a cotton ball prior to tweezing.

22-3 Eyebrow Tweezing continued



5 Remove the hairs between the brows. When tweezing, stretch the skin taut with the index finger and thumb (or index and middle fingers) of your nondominant hand. Grasp each hair individually with tweezers and pull with a guick motion, always in the direction of growth. Tweeze between the brows and above the brow line first, because the area under the brow line is much more sensitive.

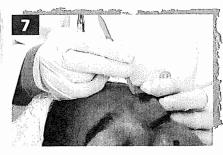
6 Sponge the tweezed area frequently with cotton moistened with an antiseptic lotion to avoid infection.



To determine the best shape for the brow, hold the base of a comb or spatula against the corner of the nose, with the other end of the comb or spatula extending straight upward toward the evebrow. This is where the brow should begin. Hold the comb or spatula so it extends from the corner of the nose to the outside corner of the eye and then across the eyebrow. This is where the brow should end.

The high point of the arch of the brow should be near the outside corner of the iris, if the client is looking straight ahead.

Just like a good haircut, the arch and shape of the eyebrows should be well blended and flow in a natural line. Remove the excess brow hair in an even fashion to avoid sharp angles or obvious thinner areas in the brow line. If the client has an uneven brow line, encourage her to allow the eyebrows in the thin area to grow back, so that you can help her achieve a smoother, well-blended, and more naturallooking line.



Brush the hair downward. Remove excessive hairs from above the eyebrow line, being careful to not create a hard line with top of the brow. Shape the upper section of one eyebrow, and then shape the other. Frequently sponge the area with toner.

- Brush the hairs upward. Remove hairs from under the eyebrow line. Shape the lower section of one evebrow, and then shape the other. Sponge the area with toner. Optional: Apply emollient cream and massage the brows. Remove cream with cool, wet cotton pads.
- 9 After tweezing is completed, sponge the eyebrows and surrounding skin with a toner to soothe the skin.
- **10** Brush the eyebrow hair to its normal position.

Post-Service

• Complete PROCEDURE Post-Service Procedure

SEE PAGE 699

Review Questions

- 1. What information should be entered on the health screening form 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 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

Brazilian bikini waxing	A waxing technique that requires the removal of all the hair from the front and the back of the bikini area.
depilatory	Substance, usually a caustic alkali preparation, used for the temporary removal of superfluous hair by dissolving it at the skin surface level.
electrolysis	Removal of hair by means of an electric current that destroys the root of the hair.
epilator	Substance used to remove hair by pulling it out of the follicle.
health screening form	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 that might affect treatment.
hirsuties	Also known as <i>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.
hirsutism	Condition pertaining to an excessive growth or cover of hair, especially in women.
laser hair removal	Permanent hair removal treatment in which a laser beam is pulsed on the skin, impairing the hair growth.
photoepilation	Also known as <i>Intense Pulsed Light</i> ; permanent hair removal treatment that uses intense light to destroy the growth cells of the hair follicles.
	traditional for the company of the c

Temporary hair removal method that involves the use of a thick, sugar-based paste.

Temporary hair removal method that involves twisting and rolling cotton thread all

surface of the skin, entwining the hair in the thread, and lifting it from the

Using tweezers to remove hairs.

sugaring

threading

tweezing

Hair Removal

Chapter Outline

- Why Study Hair Removal?
- Morphology of the Hair
- Hair Growth Cycle
- Characteristics and Differences in Hair Growth
- · Methods of Hair Removal
- Temporary Hair Removal Methods

- Waxing Techniques and Products
- Room Preparation and Supplies
- Contraindications for Hair Removal
- Client Consultations
- · General Waxing Procedures
- Procedures

Learning Objectives

After completing this chapter, you will be able to:

- M L01 Understand the morphology of hair.
- Z L02 Explain the hair growth cycle.
- M L03 Describe the methods of permanent and temporary hair removal.
- **ML04** Identify different hair removal equipment, tools, and accessories.
- M L05 Name the contraindications for hair removal.
- **ZI LO6** Provide a thorough client consultation before hair removal.
- M L07 Safely perform basic face and body waxing techniques.

Key Terms

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

anagen

pg. 477

catagen

pg. 477

depilation pg. 484

depilatory

pg. 484

electrolysis

pg. 481 epilation

pg. 484

hair bulb

pg. 476

hair follicle

pg. 475

hair papilla

pg. 477

hair root pg. 475

hair shaft

pg. 475

hirsutism

pg. 480

hypertrichosis

pg. 480

lanugo

pg. 474

laser hair removal

pg. 482

photoepilation

pg. 482

pilosebaceous unit

pg 476

sugaring

pg. 486

telogen pg. 478

threading (banding)

pg. 485

trichology

pg. 474

vellus hair

pg. 474

Part 4: Esthetics Hair Removal,

hroughout history, hair has been used for physical adornment and to enhance beauty. Different cultures have different views as to what is beautiful and attractive. Both social and personal preferences influence hair removal choices. Most women want smooth and hair-free bodies. Hair removal for cosmetic reasons has become very popular. Consumers in the U.S. spend millions of dollars per year on hair removal products and services.

Throughout the ages, unwanted hair has been removed by a variety of methods. Excavations of Egyptian tombs indicate that abrasive materials such as pumice stones were used to rub away hair. Ancient Greek and Roman women were known to remove their body hair by similar methods. Native Americans may have used sharpened stones and seashells to rub off and pluck out hair. The ancient Turks used a chemical method—a combination of yellow sulfide made of arsenic, quicklime, and rose water—as a crude hair removal agent. Today, of course, the methods are more benign.

Excessive or unwanted hair is a common problem that affects both men and women. Fortunately, a variety of hair removal methods are available, ranging from procedures such as shaving and tweezing to more advanced techniques that require special training. Face and body hair removal has become increasingly popular as evolving technology makes it easier to perform with more effective results.

Women comprise the vast majority of hair removal clients. Most often, they want hair removed from the eyebrows, upper lip, underarms, bikini line, and legs. Hair removal for men is also on the rise. Men may choose to have hair removed from their back and chest. If they compete in sports like bicycling and swimming, they may want hair removed from their legs and arms to facilitate faster competition times. Hair removal makes up a large part of a salon's business (Figure 18–1). Waxing is the most common method of hair removal in salons. In some cases, up to 50 percent of the salon services involve hair removal.

Understanding the benefits, risks, and how to perform various techniques is vital to an esthetician's success in this potentially profitable market. In this chapter, you will learn hair removal procedures, what methods are used, and what is involved in room preparation. Safety, decontamination procedures, and Universal Precautions are an important part of hair removal procedures. Conducting services in a safe environment and taking measures to prevent the spread of infectious and contagious diseases are always primary concerns. Thorough client consultations and a careful review of hair removal contraindications are necessary before providing any service.



▲ Figure 18–1 Hair removal is a large part of an esthetician's business.



Part 4: Esthetics

Why Study Hair Removal?

Estheticians should study and have a thorough understanding of hair removal because this is an essential service that estheticians must be able to perform effectively and safely.

- Learning how to safely perform face and body waxing techniques is vital to an esthetician's success as hair removal makes up a large part of a salon's business.
- Conducting services in a safe environment and taking measures to prevent the spread of infectious and contagious diseases protects clients and technicians.
- Providing thorough client consultations and reviewing hair removal contraindications is necessary before providing any hair removal service.
- Removing unwanted hair is a primary concern for many clients, and being able to advise them on the various types of hair removal services will enhance your professionalism.

Morphology of the Hair

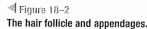
Trichology (tri-KAHL-uh-jee) is the scientific study of hair and its diseases. *Trichos* is the Greek word for "hair." How much hair you have is predetermined by genetics. Hair growth is also affected by age and hormones. Not all follicles contain hair. Some are singular sebaceous follicles that connect directly to the surface of the skin. No hair grows on the palms of the hands, the soles of the feet, the lips, or the eyelids.

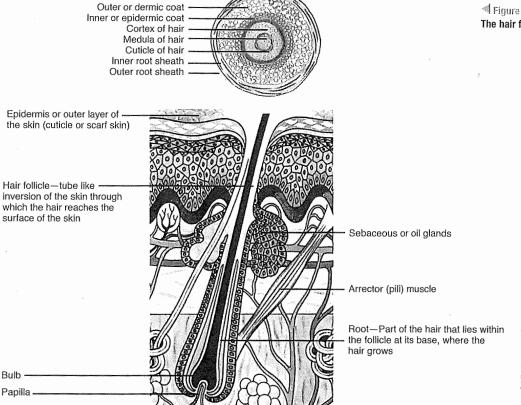
Hair formation actually begins before birth. The hair on a fetus is extremely soft and downy, known as lanugo (luh-NOO-goh) hair. The lanugo hair is lost and then replaced with either vellus or terminal hairs (stronger, pigmented hair) after birth. The shape, size, and normal function of the hair follicle is genetically determined, as is secretion activity and the depth of the hair shaft.

Vellus hair: Very fine, soft hair is referred to as vellus hair (VEL-lus) or lanugo hair. It is found in areas that are not covered by the larger, coarse terminal hairs. For example, vellus hair usually grows on women's cheeks (a.k.a. peach fuzz). Removing vellus hair can result in the follicles producing new terminal hairs, so it is not recommended to tweeze, shave, or wax these fine hairs.

Terminal hair: Terminal hair is the longer, courser hair found on the head, brows, lashes, genitals, arms, and legs. With hormone changes during puberty, follicles are naturally regulated to switch from producing vellus hairs to producing terminal hairs in these areas.







The Hair Follicle

Hair is made from a hard protein called *keratin*, which is produced from the hair follicle. A hair follicle is a mass of epidermal cells forming a small tube, or canal (Figure 18–2). Follicles extend deep into the dermis.

The face contains many follicles per square inch (2.5 square centimeters). Only some of these follicles have hair. It is estimated that we have millions of hair follicles covering our bodies. It is interesting to note that as our bodies grow the follicle density we are born with does not change, but as we age it decreases because there is more surface area to cover once we grow larger and become adults. Hair follicles are slanted. Sometimes more than one hair will grow from a single follicle, and hair can grow in many different directions in one area (for example, under the arm). This hair growth pattern is important to know when providing hair removal services.

Hair Components

A mature strand of hair is divided into two parts: the hair root and the hair shaft.

The root: The hair root anchors hair to the skin cells and is part of the hair located at the bottom of the follicle below the surface of the skin.

The shaft: The hair shaft is defined as the part of the hair located above the surface of the skin. The shaft actually starts forming about halfway up to the surface near the sebaceous gland in the hair follicle. As the cell division within the hair matrix continues, hair grows and gets longer.

Part 4: Esthetics Hair Removal 475

Keratinization is complete by the time these cells approach the skin's surface and the hair shaft starts. This is similar to skin-cell division and migration. Basal cells in the hair matrix divide and form the three main layers of the hair shaft: the cuticle, cortex, and medulla. The cuticle is the outermost layer, the cortex is the middle, and the medulla is the center or innermost layer of the hair shaft. The two outer layers of the shaft are hard keratin and the inner layer is soft keratin.

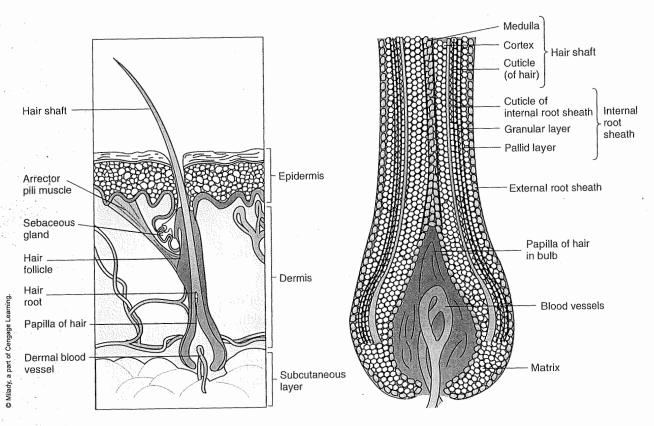
The Pilosebaceous Unit

The pilosebaceous unit contains the hair follicle and its appendages. The main structures of the hair unit (the area below the skin's surface) consist of the follicle, hair root, hair bulb, hair papilla, and the attached arrector pili muscle and sebaceous glands.

The main structures in the hair follicle are the root, bulb, and papilla. The arrector pili muscle and the sebaceous glands are appendages attached to the follicles (Figure 18–3). The follicle is lined with epidermal tissue. These epidermal cells produce the follicle and hair matrix. The matrix is where cell mitosis (division) happens.

The hair bulb is a thick, club-shaped structure made from epithelial cells that surround the papilla. This forms the lower part of the hair root. This is where hair grows from cell division. The lower part of the bulb fits over and covers the papilla. The hair bulb contains the dividing cells of the hair matrix that produces the hair and both the external root sheath (epidermal tissue) and internal root sheath lining the follicle. The external root sheath is the made of horny epidermal tissue. The

Figure 18-3 Hair morphology.



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internal sheath is the innermost layer of the follicle closest to the hair. The internal sheath is the thick layer of cells you see attached to the base of a hair when epilating it.

The hair papilla (plural: papillae), a cone-shaped elevation at the base of the follicle, fits into the bulb. This is the dermal papilla, the connective tissue that contains the capillaries and nerves. Hair papillae are necessary for hair growth and nourishment of the follicle. Vitamins, minerals, and nutrients are needed for strong, healthy hair. The blood vessels bring nutrients to the base of the bulb, causing it to grow and form new hair. Sensory nerves surround the base of the follicle.

The arrector pili muscle (ur-REK-tohr PY-li) attaches to the base of the hair follicle. This muscle extends from the papillary layer of the dermis and attaches to the follicle.

When cold or other stimuli cause the muscle to contract, it pulls on the follicle and forces the hair to stand erect. The hair stands straight up, causing goose bumps. This reaction is also thought to keep skin warmer by creating an air pocket under the upright hairs. The muscle contraction also helps disperse the protective lipids from the sebaceous gland to the skin and hair. Sebaceous glands attached to the follicle are responsible for lubricating the skin and hair. Moderate amounts of sebaceous oil are necessary for healthy skin and hair. 1201

Hair Growth Cycle

Hair growth is a result of the activity of cells found in the basal layer. These cells are found within the hair bulb. Hair growth occurs in three stages: anagen, catagen, and telogen (Figure 18–4, page 478). Use the acronym ACT to remember the growth stage sequence.

Anagen Phase

Anagen (AN-uh-jen) is the growth stage during which new hair is produced. New keratinized cells are manufactured in the hair follicle during the anagen stage. Activity is greater in the hair bulb, which pushes down into the dermis and swells with cell mitosis in the matrix. Stem cells at the junction between the arrector pili muscle and the follicle grow downward and stimulate cell mitosis in the matrix. New cells form hair and root sheaths while the older part of the hair is pushed upward. Once hair has reached its full length, it can remain there for weeks or years, depending on its location on the body. Hair on the scalp remains for years. Other areas have a growth cycle in weeks. The length of the anagen phase determines the length of the hair.

Catagen Phase

Catagen (KAT-uh-jen) is the transition stage of hair growth. In the catagen stage, mitosis ceases. The hair grows upward and detaches

Did You Know?

Pilus [PY-lus] means hair; *pili* [PY-lie] is the plural.

FOCUS

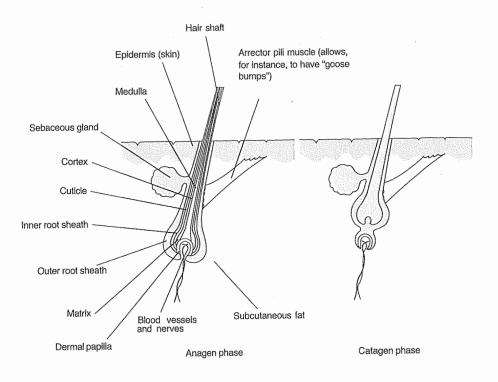


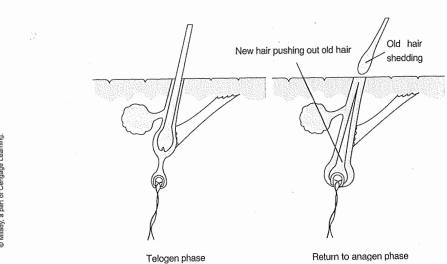
Hair

The hair unit consists of the follicle which includes the root, bulb, papilla, and the appendages: the arrector pill muscle and sebaceous gland. The hair shaft consists of the cuticle, cortex, and medulla.

Did You Know?

The average hair growth on the scalp is one-half inch (1.25 cm) per month.





▲ Figure 18-4 Hair growth encompasses three stages: anagen, catagen, and telogen.

itself from the dermal papilla. The follicle degenerates and collapses as epidermal tissue retracts upward. Hair loses its inner root sheath and becomes dryer. The mature hair is now referred to as a *club hair* (the base looks like a club). This is the shortest part of the hair growth cycle.

Telogen Phase

Telogen (TEL-uh-jen) is the final, or resting, stage of hair growth. During the telogen stage, the club hair moves up the follicle and is ready to shed. The hair is at its full size and is erect in the follicle. It shows above the skin's surface. The hair bulb is not active, and the hair is released and is only attached by epidermal cells. Hair may sit in the follicle or fall out.

18

Latent Phase

After the telogen stage, the follicle is empty and dormant. The old hair sheds and the cycle then begins again. The follicle can be void of hair in the telogen stage until it cycles back into the anagen stage. If the hair does not fall out and the anagen stage begins again, two hairs can occupy the same follicle.

It is important to understand the three stages of hair growth. Two hairs can be growing next to each other and be at different stages of growth. It takes 4 to 16 weeks for the hair to grow from the papilla to the surface of the skin, depending in part on the area of the body. Hair growth is affected by many factors including age, genetics, hormones, and a person's health. When offering services, the practitioner takes into consideration these stages and schedules appointments according to these cycles. Repeat visits are normally necessary. Remind clients that not all hair grows at the same rate and that hairs are at different growth stages in the follicle. Hairs removed in the anagen stage, while the hair bulb is more "active," will be more effective for long-term hair reduction. 202

Characteristics and Differences in Hair Growth

Hair protects the body from environmental elements and ultraviolet rays. It guards the nose, ears, and reproductive areas with fine hairs to filter out dust and other particles. Hair is a conduit of sensation for the skin and acts as a wick in the follicle, allowing for sebum to move up and out onto the skin's surface. Everyone has millions of hair follicles on their body. One-fifth of the hair follicles on the body are on the scalp. Some estimate that there are 500,000 hairs on the head, which helps protect the scalp. Hair on the scalp grows an average of .33 millimeters (1/60 of

an inch) per day.

As cultures moved from region to region, individuals acquired mixed traits of hair color and thickness (Figure 18–5). In northern regions of the world, fine hair and lighter skin tones are common. Blond hair is generally finer and easier to remove. Redheads can have coarse hair that can be more difficult to remove—these individuals generally have fair skin that tends to be sensitive, a very important point to remember when performing hair removal on them.

In warmer areas closer to the equator, the skin and hair are normally thicker and darker. These characteristics help protect the body from strong ultraviolet rays. Central and South American people, as well as those from Mediterranean regions and the Middle East, tend to have darker and more



A Figure 18–5
Genetic differences in hair growth and coloring.

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18:

noticeable hair as it is coarser and thicker in diameter. Individuals from Western Europe (France, Spain, and Portugal) generally have dark hair, with average thickness. With thicker hair, the root is quite deep in the follicle, and thus very difficult to remove. With repeated removal, hair regrowth tends to become thinner and easier to remove.

Individuals with olive and darker skin tones can have major pigmentation problems if hair removal is not performed carefully. Those originating from Africa and Australia tend to have black, coarse, curly hair which has a tendency to become ingrown. The method of hair removal for these individuals needs to be chosen carefully. Native Americans and many Asians have thinner facial hair, but the roots tend to be deep.

Aging creates changes in the hair. Gray hair is a result of physiological and hormonal changes, causing it to be coarse with a deep root system. Before hair grays, it is easier to remove. With the changes that take place during the aging process, the hair root system increases on the face, making hair removal difficult. This explains the increase in coarse hairs on women's chins and lips. For many people, however, hair on other areas of the body and scalp gets thinner as we age.

Indicator of Health

Hair and skin are good barometers of an individual's state of health. Dull, lifeless hair and sallow, listless skin tone may signal a health warning. Strong, healthy hair and good skin tone are signs of good health. Hair also responds to the outside elements. For instance, hair grows faster in a warm climate. Excessive cold can dry the hair and reduce its luster. The rate of oil secretions from the follicle determines whether the skin is oily or dry. Excessive heat or damaging products such as haircolor will dry the hair and scalp. Medical conditions, disease, drug use, and the aging process affect the hair's growth and overall appearance.

Excessive Hair Growth

Two medical terms are applied to excessive hair growth. The first is hirsutism (HUR-suh-tiz-um), which is excessive hair growth on the face, arms, and legs, especially in women (Figure 18–6). The second is hypertrichosis (hy-pur-trih-KOH-sis), an excessive growth of hair. It is characterized by the growth of terminal hair in areas of the body that normally grow only vellus hair. The amount of hair an individual has differs from person to person. What would be normal hair growth in one person might be extreme in another. Excessive abnormal hair growth on a female body suggests an imbalance of hormones.

Hirsutism can be caused by various factors. A normal pregnancy increases adrenocortical activity, which may cause moderate hirsutism. Vitamin deficiency, certain diseases, particular drugs, and emotional shock or stress can result in glandular disturbances that stimulate excessive hair growth.



▲ Figure 18–6 Hirsutism.

480 Hair Removal

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Excessive hair growth on a female face or body may be attributed to hormonal imbalances and excessive androgen production secreted from the ovaries or adrenal glands. One of the more notable and prevalent causes of this is Polycystic Ovarian Syndrome (PCOS). Menopause may also cause excess facial hair. The "menopause mustache," as it is often called, is a sign of menopause. These changes may dissipate with time. Other excessive androgen production conditions that affect hair growth are adrenogenital syndrome, Achard—Theirs syndrome, and Cushings syndrome. Client health and medical conditions are potential contraindications for hair removal.

Methods of Hair Removal

Methods of hair removal fall into two general categories: temporary and permanent. Temporary hair removal involves repeat treatments as hair grows. With permanent hair removal, the papilla is destroyed, making regrowth impossible. Salon techniques are generally limited to temporary methods such as waxing.

Permanent Hair Removal

Electrolysis

Electrolysis (ee-lek-TRAHL-ih-sis), the process of removing hair by means of electricity, is considered the only true method of permanent hair removal (versus permanent hair reduction with lasers). All electrolysis procedures are performed by inserting small needles into the hair follicles. Electrolysis should be performed by a certified and licensed (if the state requires it) electrologist. If the state does not license the profession, look for an electrologist who holds the designation "CPE" (Certified Professional Electrologist) from the American Electrology Association (AEA). Talk with your instructor for additional information about classes and licensing in electrolysis.

There are three methods of electrolysis: galvanic, thermolysis, and blend.

GALVANIC ELECTROLYSIS: This method uses direct current, which causes chemical decomposition of the hair follicle. The galvanic method decomposes the papilla, the source of nourishment for the hair. The needle is connected to the negative side of a direct current (DC) power source and is inserted into the follicle. The client holds the electrode connected to the positive side of the power source. When power is applied, the electrical charge begins transforming saline moisture inside the follicle into sodium hydroxide (lye) along with hydrogen and chlorine gas. Unstable sodium hydroxide destabilizes the follicle wall through a chemical action. It weakens the hold of the follicle wall on surrounding tissue. This allows the hair to be removed easily. In the case of galvanic electrolysis, the moisture content within the skin is important to conduct a proper current. This method is slower than thermolysis.



Part 4: Esthetics

THERMOLYSIS: This method of electrolysis utilizes a high-frequency current to produce heat, which coagulates and destroys the hair follicle. Thermolysis, also known as *electrocoagulation*, destroys the hair by coagulating the papilla through heat. An alternating current (AC) passes through a needle causing vibration in the water molecules surrounding the hair follicle. This action produces heat, which destroys the papilla.

BLEND: This method combines both systems, sending a current through a fine needle or probe. The blend method combines the benefits of the galvanic and thermolysis methods by passing AC and DC current through the needle at the same time. Results are reported to be quicker than with the galvanic method alone.

Did You Know?

The word *laser* is an acronym for "light amplification by stimulated emission of radiation." Lasers use intense pulses of electromagnetic radiation.

Photothermolysis comes from three Greek root words meaning light, heat, and destruction (photo: light; thermo: heat; and lysis: destruction). This method is the precise targeting of a structure using a specific wavelength of light that absorbs light into that target area alone, which damages it with heat.

Permanent Reduction and Semipermanent Hair Removal

Methods of permanent hair reduction include laser as well as photo light hair removal systems. Laser and photo light are normally performed in a medical setting. Food and Drug Administration (FDA) guidelines require that these procedures be defined as permanent hair reduction. While these methods are sometimes called "permanent," the hair bulb must be destroyed completely or there may be some regrowth. This has led to the confusing, interchangeable terms of permanent reduction and semipermanent removal (both of these terms mean that hair removal is not permanent).

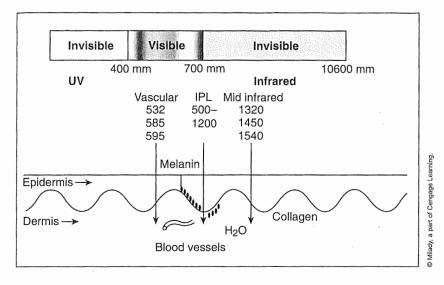
Laser and Pulse Light Technology

Photoepilation (FOH-toh-ep-uh-LAY-shun) uses intense light to destroy the growth cells of the hair bulb. Photoepilation includes both *laser hair removal* and *intense pulsed light* (IPL) to reduce hair growth.

Laser hair removal technology has been around since the early 1980s. A variety of lasers are available such as the diode, alexandrite, and Nd:YAG. The hair removal industry now has the ability to offer clients a choice of both treatments: epilation by traditional methods and photoepilation with intense pulse light and lasers. Clinical studies have shown that photoepilation can provide a 50 to 60 percent reduction of hair in 12 weeks.

LASERS: In laser hair removal, a laser beam is pulsed on the skin, impairing the hair follicles. It is most effective when used on follicles in the growth, or anagen, phase. As mentioned earlier, "permanent" laser hair reduction is defined as *semipermanent*. The laser will reduce the number of body hairs. It cannot be guaranteed that permanent hair removal will happen; however, in some clients the hair does not grow back and in other clients lasers slow hair regrowth. Regardless of these factors, laser hair removal is increasingly in demand by clients with excess hair problems.

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■ Figure 18–7

Lasers: light and the chromophores they target.

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. Some lasers work only if one's hair is darker than the surrounding skin. Coarse, dark hair responds better to laser treatments than light hair because the laser is designed to target the pigment in the hair.

Earlier-generation lasers restricted hair removal to Fitzpatrick Skin Types II; III, and sometimes Type IV. Darker skin ended up absorbing more energy, which often resulted in skin damage and postinflammatory hyperpigmentation (PIH). Individuals with a lack of contrast between hair and skin color are not good candidates for laser hair removal. Lasers are attracted to chromophores such as blood and dark hair color. *Chromophores* are defined as what lasers are attracted to. Laser hair removal uses what is called selective *photothermolysis* to target an area using a specific wavelength to absorb light only into that specific area (Figure 18–7). The pigment of the hair absorbs the light and thus destroys the dermal papilla.

INTENSE PULSED LIGHT: Different from a traditional laser, the first-generation lasers were a solid beam of light. Pulsed light (or photo light) produces a quick "flash" of light. These short, powerful pulses shatter their target without allowing heat to build up and burn the surrounding skin. IPL is used for hair reduction, as well as for vascular and pigmented lesions and skin treatments. The IPL used for skin tightening is referred to as *photorejuvenation*, or a photo facial. Improved since its introduction in the United States, it is widely used in the medical arena or in medi-spas. While there is always a risk of scarring with any laser procedure, this newer technology greatly reduces the risk of scarring, often to less than 1 percent.

All laser devices must have FDA approval. Most photoepilation hair removal machines must be used under the direct supervision of a physician. Each local regulatory agency regulates who can use these devices. Manufacturers of photoepilation equipment generally provide the specialized training for administering this procedure, but

REGULATORY AGENCY ALERT

Laws regarding photoepilation services vary by region and province. Be sure to check with your regulatory agency for guidelines.

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To protect the eyes from damage, laser use requires eye protection goggles for the client and the practitioner. Additionally, do not have mirrors in the room in order to avoid reflections from the laser's light.

certification through an advanced training program is recommended and in some cases required. Training should be above and beyond manufacturers' training programs. Some advanced schools offer 60 hours of clinical training. Lasers and other light treatments are advanced treatments also discussed in Chapter 19, Advanced Topics and Treatments.

Temporary Hair Removal Methods

Temporary methods of hair removal include depilation and epilation. Depilation (DEP-uh-lay-shun) is a process of removing hair at or near the level of the skin. Both shaving and chemical depilation are included in this category. Another temporary method of hair removal is epilation (ep-uh-LAY-shun), the process of removing hair from the bottom of the follicle by breaking contact between the bulb and the papilla (Figure 18–8). The hair is pulled out of the follicle. Tweezing, wax depilatories, and sugaring are all methods of epilation. Waxing is the most common epilation procedure estheticians perform and is the focus of this chapter.

Depilation

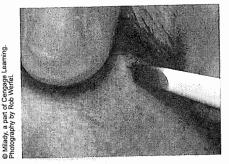
The main method of depilation is shaving. How long it takes for hair to grow back after removal depends on a person's hair growth pattern. After removal by any method, hair can take from days to weeks to reappear.

Shaving

Shaving is a daily ritual for most men and women. Many women shave the underarms, legs, and bikini area. As in any depilation method, the hair is removed down to the skin's surface. Shaving is a temporary method of hair removal that can also irritate the skin. Ingrown hairs are an additional problem with shaving. *Folliculitis* (fah-lik-yuh-LY-tis) is a term for infected follicles or ingrown hairs from shaving or other hair removal methods such as waxing. This problem can be corrected by changing the direction of shaving. Contrary to popular belief, shaving does not cause hair to grow back thicker or stronger. It only seems that way because the razor blunts the hair ends and makes them feel stiff. *Pseudofolliculitis* refers to razor bumps or ingrown hairs without pus or infection.

Depilatories

A depilatory (dih-PIL-uh-tohr-ee) is a substance, usually a caustic alkali preparation, used for temporarily removing superfluous hair by dissolving it at the skin level. During the application time, the hair expands and the disulfide bonds of the hair (protein and cystine) break as a result of using such chemicals as sodium hydroxide, potassium hydroxide, thioglycolic acid, or calcium thioglycolate. Although depilatories are not commonly used, you should be familiar with them in case your clients have used them.



▲ Figure 18–8 Epilation removes hairs from the follicles.

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Chemical depilatories are applied in a thin coating on the surface of the skin. Any chemical depilation cream should be patch tested first on the inside of the arm to make sure there are no allergic or sensitivity reactions. Normally, if there is no reaction—swelling, itching, or redness—within the first 10 minutes, the substance can then be applied to a larger area. A chemical depilatory causes skin irritation and is generally not recommended for use on the upper lip or other sensitive areas.

Methods of Epilation

Epilation methods and products continue to improve and become more effective.

Tweezing

The method of using tweezers to pull hair out by the root one at a time is called *tweezing*. Eyebrows can be shaped and contoured by tweezing (Figure 18–9). Tweezing is also used on remaining hairs after waxing. If clients are sensitive to waxing, tweezing is a slower, but effective, alternative for removing the dark, coarse hair on the face.



Electronic Tweezers

Another tweezing method used in the past was the electronically charged tweezers. This method transmits radio-frequency energy down the hair shaft into the follicle area. The papilla is thus dehydrated and eventually destroyed. The tweezers are used to grasp a single strand of hair. Electronic tweezers are not a method of permanent hair removal and the process is slow. Certain licensing is usually required to perform electronic tweezing.

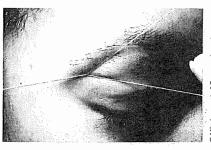
Threading

An ancient method of hair removal is threading (Figure 18–10), which is still common practice in many Middle Eastern cultures today. Threading, also known as **banding**, works by using cotton thread that is twisted and rolled along the surface of the skin, entwining the hair in the thread and lifting it out of the follicle. There are two main threading techniques: *hand and mouth threading*, using both hands and the mouth to hold the thread; and *two-handed threading*, using just the hands (Figure 18–11). A third technique uses the neck instead of the mouth to hold and

Threading is a fast, inexpensive method of hair removal and requires minimal products and supplies. The thread is discarded after use, so it is more sanitary than waxing.

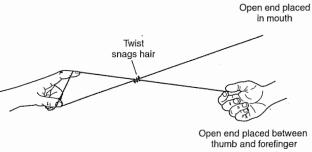


▲ Figure 18–9
Tweezing hair from the eyebrows.



▲ Figure 18–10
An example of threading.

▼ Figure 18-11
Threading techniques.



Milady, a part of Cengage Learning.

maneuver the piece of thread.

PROCEDURE

IMPLEMENTS AND MATERIALS

- Station and cleaning supplies
- EPA-registered disinfectant
- Hand sanitizer
- Towels
- Tweezers
- Small hair scissors
- Small hand-held mirror
- Cotton pads
- Eyebrow brush or comb
- Emollient cream
- Antiseptic lotion
- Gentle eye makeup remover
- Astringent
- Single-use gloves
- Client release form and chart
- Client headband
- Plastic bag for disposables

Eyebrow Tweezing

Preparation

Perform



PROCEDURE / Pre-Service Procedure

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1 Discuss with the client the type of eyebrow arch suitable for her facial characteristics.



2 Seat the client in a facial chair in a reclining position, as for a facial massage. Or, if you prefer, seat the client in a half-upright position and work from the side if it is comfortable for both you and the client. The head needs to be supported and held steady to get a firm grip and hold the skin taut. The brows should be easy to reach and visible under adequate lighting, preferably with a magnifying light.

Drape a towel over the client's clothing.



Wash and dry your hands. and put on single-use gloves. Washing your hands thoroughly with soap and warm water is critical before and after every client procedure you perform. The importance of proper cleaning in these procedures cannot be overemphasized.

Procedure

The eyebrow tweezing procedure involves the following steps:



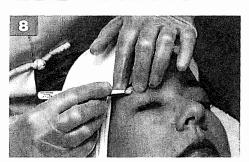
Prepare the skin: use a mild antiseptic on a cotton pad before tweezing to clean and prepare the area.



Measure the brows to check the shape (in-between the brows, the arch, and the end of the brow). Brush the eyebrows with a small brush. Carefully trim long hairs outside the brow line now or after tweezing. Brush the hair upward and into place to see the natural line of the brow. Observe the stray hairs and what needs to be removed.



Stretch the skin taut next to the hair with the index finger and thumb (or index and middle fingers) of your other hand while tweezing. Hold each area taut next to the hair being removed.



Bemove hairs from under the eyebrow line. Shape the lower section of one eyebrow, then shape the other. Grasp each hair individually with tweezers and pull with a quick, smooth motion in the direction of the hair growth. Carefully grasp the hair at the base as close to the skin as possible without pinching the skin and pull in the direction of the hair growth, not straight up or out.



Brush the hair downward. Remove hairs from above the eyebrow line if the predetermined shape deems it neccessary. Shape the upper section of one eyebrow; then shape the other.



Remove hair from between the brows.



Wipe the tweezed areas with a cotton pad, moistened with a nonirritating antiseptic lotion, to contract the skin and avoid infection.



Brush the eyebrow hair in its normal position.



Optional: Apply a soothing cream. Gently remove excess cream with a cotton pad.



If eyebrow tweezing is part of a makeup or facial service, continue the procedure. If not, complete the next step.

Post-Service

• Complete PROCEDURE Post-Service PAGE 375

Review Questions

- 1. What structures are part of the pilosebaceous unit?
- 2. What are the main structures of the hair follicle?
- 3. Explain the three stages of the hair-growth cycle.
- 4. Define the terms hirsutism and hypertrichosis.
- 5. Define electrolysis.
- 6. Define threading and sugaring.
- 7. What is photoepilation?
- 8. What is the difference between depilation and epilation?
- 9. What are the two main types of waxing products?
- 10. What are six of the conditions, treatments, and medications that contraindicate hair removal?
- 11. List four of the safety precautions that must be followed for waxing.
- **12.** What are the three most important points in safe wax removal techniques?
- 13. When should you use a biohazard container for waste disposal?
- 14. Why is hard wax better than soft wax for sensitive areas?

Glossary

anagen	First stage of hair growth during which new hair is produced.
catagen	Second transition stage of hair growth; in the catagen stage, the hair shaft grows upward and detaches itself from the bulb.
depilation	Process of removing hair at skin level.
depilatory	Substance, usually a caustic alkali preparation, used for temporarily removing superfluous hair by dissolving it at the skin level.
electrolysis	Removal of hair by means of an electric current that destroys the hair root.
epilation	Removes hairs from the follicles; waxing or tweezing.
hair bulb	Swelling at the base of the follicle that provides the hair with nourishment; it is a thick, club-shaped structure that forms the lower part of the hair root.
hair follicle	Mass of epidermal cells forming a small tube, or canal; the tube-like depression or pocket in the skin or scalp that contains the hair root.
hair papilla (plural: papillae)	Cone-shaped elevations at the base of the follicle that fit into the hair bulb. The papillae are filled with tissue that contains the blood vessels and cells necessary for hair growth and follicle nourishment.

Part 4: Esthetics Hair Removal 525

Glossary

Anchors hair to the skin cells and is part of the hair located at the bottom of the follicle hair root below the surface of the skin; part of the hair that lies within the follicle at its base, where

the hair grows.

Portion of the hair that extends or projects beyond the skin, consisting of the outer layer hair shaft

(cuticle), inner layer (medulla), and middle layer (cortex). Color changes happen in the cortex.

Growth of an unusual amount of hair on parts of the body normally bearing only downy hair, hirsutism

such as the face, arms, and legs of women or the backs of men.

Also known as hirsuties; condition of abnormal growth of hair, characterized by the growth of hypertrichosis

terminal hair in areas of the body that normally grow only vellus hair.

The hair on a fetus; soft and downy hair. lanugo

Photoepilation hair reduction treatment in which a laser beam is pulsed on the skin using one laser hair removal

wavelength at a time, impairing hair growth; an intense pulse of electromagnetic radiation.

Also known as Intense Pulsed Light (IPL); permanent hair removal treatment that uses intense photoepilation

light to destroy the growth cells of the hair follicles.

The hair unit that contains the hair follicle and appendages: the hair root, bulb, dermal papilla, pilosebaceous unit

sebaceous appendage, and arrector pili muscle.

Ancient method of hair removal. The original recipe is a mixture of sugar, lemon juice, and sugaring

water that is heated to form a syrup, molded into a ball, and pressed onto the skin and then

quickly stripped away.

Also known as resting phase; the final phase in the hair cycle that lasts until the fully grown telogen

hair is shed.

Also known as banding; method of hair removal; cotton thread is twisted and rolled along the threading

surface of the skin, entwining hair in the thread and lifting it out of the follicle.

Scientific study of hair and its diseases and care. trichology

Also know as lanugo hair; short, fine, unpigmented downy hair that appears on the body, vellus hair

with the exception of the palms of the hands and the soles of the feet.

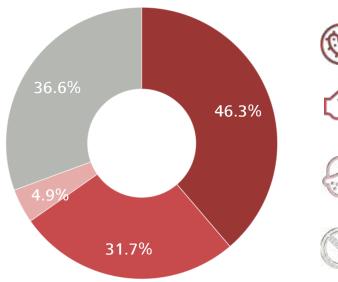


IDENTIFYING RISKS

IN BEAUTY SERVICES

HAIR REMOVAL SERVICE

The chart represents the percentage of the service steps that pose a consumer risk





Infection Risks Identified



Malpractice/Safety Risks Identified



Product Reaction Risks Identified



Risk Not Identified

The chart does not equal 100%, some service steps have 2+ risks identified

CONSUMER SAFETY RISKS

63.4 % of the steps needed to perform this service, if improperly performed, could adversely impact the consumer



Infection Risks risk caused by improper infection prevention practice

- Cross-Contamination of Tools, Implements, & Equipment
- Impaired Skin Integrity Could Increase Infection Risk
- Increase Spread of Existing Infection
- Service Specific Infection Risk(s): <u>Conjunctivitis</u>, <u>Folliculitis</u>, <u>HPV</u>, <u>Impetigo</u>, <u>Molluscum</u> Contagiosum, MRSA, Coronavirus



Malpractice/Safety Risks risk caused by a professional's practical or theoretical error

- Impaired Skin Integrity Could Increase Injury Risk
- Lack of Medical History Could Increase Risks of Existing Injury
- o Service Specific Injury Risk(s): Cut Injury, Follicle Damage, Skin Abrasion, Skin Irritation, Skin Tear, Skin Puncture Thermal Burn



Product Reaction Risks risk caused by a consumer's reaction to a product ingredient

- Lack of Disclosure of Allergies or Irritants Could Cause Product Reaction
- Lack of Medical History Could Cause Product Reaction
- Service Specific Reaction Risk(s): Allergic Reaction, Skin Irritation

TOOLS & IMPLEMENTS

PRODUCTS & SUPPLIES



Infection Control & Safety Supplies

- **Disinfectant Concentrate**
- Disinfectant Container Disinfectant Spray/Wipes
- Gloves
- Hand Sanitizer
- Liquid Soap
- Mask Protective Eyewear
- Spray Bottle
- Storage Container (products/tools)
- Towels (cloth/paper) Waste Container
- Water



Service Tools & Implements *as necessary

- Brow Trimmer
- Cotton
- **Cotton Rounds**
- Disposable Brow Brush • Disposable Wax Applicator
- Disposable Wax Applicator
- Magnifying Light
- Scissors
- Towel
- Tweezers
- Wax Pot
- Wax Removal Strips



Service Products *as necessary

- Moisturizer
- Pre-Epilation Product
- Post-Epilation Product
- Toner
- Wax

















IDENTIFYING RISKS

Risk Type Indicators

Infection Risk

Malpractice/Safety Risk

Product Reaction Risk

IN BEAUTY SERVICES

HAIR REMOVAL SERVICE

Service Description: The removal of unwanted hair from the body to make the skin smoother and to reduce hair regrowth.

SERVICE STEPS & SUB-STEPS

Steps that present a risk are in red font and the icons represent the risk type.

Pre-Service Procedure (\$\)



- Ensure workstation and service area is clean and disinfected with an EPA disinfectant
- Ensure service product is new or an unused disposable product applicator is used to apply the product
- Ensure all porous (single-use) items are new and unused
- Ensure all non-porous tools, implements, and items are clean and disinfected
- Ensure electrical instruments are clean, disinfected, and in good working order

Hand Cleaning Procedure (Before/After Service)



*An equally effective hand sanitizer may be used.

- 6. Wet hands with water
- Apply liquid soap to hands
- Lather soap in hands for 20 seconds
- Rinse hands thoroughly with water

Client Consultation Procedure



- 11. Complete/review consultation
- 12. Determine the client's needs and preferences
- 13. Assess the client's skin and hair
- 14. Recommend treatment/service options







- 15. Drape client
- 16. Assess hair growth direction
 17. Trim or prepare the hair
- 18. Apply pre-epilation product/antiseptic to area to be waxed

Wax Temperature Assessment (%)





- 19. Dip a new, never been used, wax applicator into heated wax
- 20. Test wax temperature

Wax Application (🕲 👍 승







- 21. Dip a new, never been used, wax applicator into heated wax
- 22. Hold skin taut
- 23. Apply wax in direction of hair growth
- 24. Discard wax applicator after each single dip

Wax Removal Procedure



- 25. Apply removal strip or leave tab to pull
- 26. Hold skin taut
- 27. Quickly remove the wax before cooling in one continuous pull
- 28. Apply pressure to the waxed area
- 29. Remove excess wax
- 30. Apply post-epilation product





- 31. Hold skin taut
- 32. Tweeze hair in the direction of hair growth
- 33. Apply toner and soothing cream

Service Conclusion

34. Remove drape

Post-Service Procedure (%)



- 35. Discuss maintenance and aftercare
- 36. Discard any cross-contaminated products
- 37. Discard any porous (single-use) items used during the service
- 38. Clean and disinfect all non-porous tools, implements, and items or set aside tools, implements, and items in a disinfectant container to be cleaned and disinfected later
- 39. Store clean and disinfected tools, implements, and items in a clean closed storage container
- 40. Clean and disinfect electrical instruments that may have come in contact with the client, then place on a clean towel, hook, or in a clean closed container
- 41. Clean and disinfect workstation and service area with EPA disinfectant