## dermalogica professional skin treatment for the oncology client

### when performing a dermalogica skin treatment on an oncology client:

- 1. Review the Consultation Card to provide an in-depth consultation of your patient/client's skin ensuring they are a candidate for treatment.
- 2. Never leave your client unattended.
- 3. Check that lymph nodes have not been compromised or removed by way of biopsy, radiation, or surgery, as this will change the application of the treatment.
- 4. Use Dermalogica professional products that are suitable for the patient/client's current skin condition.
- 5. Clients still in active cancer treatment or recent recovery may be overly sensitive to the use of:
  - a. Aromatherapies: scents both mild and strong can sometimes cause nausea for these clients. The sense of smell is a very personal experience though and many clients may respond positively to the additive blends. Check in with them about this during every visit. Caution is advised with the use of single essences as these could create unpleasant future memory-associations.
  - b. Steam/heat: Minimal use of steam is suggested. Choose to utilise steam either during cleanse, exfoliation or masque phase, you can also opt to move steam further away and/or position at Hara.
- 6. Continued use of an SPF of 30 or greater is recommended.

# There are several key Dermalogica products and techniques that can be adapted into the core skin treatment for an oncology client. Below is the step-by-step:

- 1. Client completes the **Face Mapping® skin analysis Consultation Card**. Review and check for history of sensitivity, allergies, medications, lymph node removal, claustrophobia, devices in place, surgical history and current treatment regimen.
- 2. Begin the treatment by cleansing hands and feet with a warm steam towel. Wrap your client to ensure warmth. Start by pressing feet down towards the bed 3 times and then with palm to sole, pressing feet towards the head.
- 3. Encourage client to take 3 deep inhalations to aid in relaxation.
- 4. Cleanse eyes and lips with **Soothing Eye Make-Up Remover** on damp cotton wool pads.
- 5. Cleansing options:
  - a. For skin that is intact with no irritation, cleanse face once with **PreCleanse** followed by a second cleanse with **Special Cleansing Gel**.
  - b. If skin is slightly sensitised, cleanse face once with **PreCleanse** followed by a second cleanse using **UltraCalming™ Cleanser**
  - c. If skin is <u>highly sensitised</u>, omit **PreCleanse** and perform one cleanse only with **UltraCalming™ Cleanser**.
  - d. For skin that is intact with no irritation and the skin would benefit (congested, oily, rough texture) from a very gentle exfoliation, cleanse face once with ½ scoop **Clinical Colloidal Oatmeal** mixed with **PreCleanse**, emulsify and remove.

In all cases, use light stroking movements and little pressure. Take care not to over stimulate the skin. Omit sponges and use **The Sponge Cloth** or disposable wipes.

6. Perform **Face Mapping® skin analysis.** Look for areas of sensitised skin and redness. Check for couperose skin, dilated capillaries and evidence of impaired barrier function such as dry, damaged, flaky skin. Inquire about any itching, stinging or burning sensations that may be experienced and if present identify in what areas this occurs.

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- 7. Massage options:
  - a. Specialty training is strongly recommended before proceeding with standard face / chest and / or arm massage for oncology clients due to the lifetime risk of lymphoedema if cervical and / or axillary lymph node removal has occurred.
  - b. Clients with axillary lymph nodes compromised through biopsy, whether results were positive or negative for cancer, surgery or radiation should not have their hands placed in heat mitts due to the lifetime risk of lymphoedema. Hands can we wrapped in towels but direct heat applications should be omitted.
  - c. A short mini massage using a pressure point style is generally safe if performed around the eyes. Additionally scalp movements may be relaxing. Hand and foot pressure points may be indicated if neuropathy does not cause discomfort.
  - d. If a little slip and glide is needed **Colloidal Masque Base** may be used.
- 8. Apply 10 drops of **UltraCalming™ Complex**. Dispense onto fingertips and press into the skin gently.
- 9. Masque options:
  - a. If skin is intact with no irritation but showing signs of dehydration, **Colloidal Masque Base** is an option. **Contour Masque** could then be layered on top. Not recommended for claustrophobic clients.
  - b. If skin is minimally irritated, use a wooden spatula to mix 1 scoop Clinical Colloidal Oatmeal with tepid water until you have a creamy spreadable consistency. Then add ½ tablespoon Colloidal Masque Base for extra hydration and to prevent friction when removing the masque.
  - c. If skin is <u>highly sensitised</u>, combine 2 scoops Clinical Colloidal Oatmeal with 1/4 1/3 bag of Contour Masque. Mix with water until a thick consistency is achieved. Apply over gauze and allow to set for at least 20 minutes. Not recommended for claustrophobic clients.
- 10. Spray skin with **UltraCalming™ Mist** and press into skin.
- Finish the treatment with an application of either Gentle Soothing Booster or Skin Hydrating Booster – if indicated, followed by Barrier Repair. If during daytime hours follow with Super Sensitive Shield SPF30. If client is oily during daytime hours you may choose to omit Barrier Repair.

#### This treatment should be approximately 40 - 50 minutes.

#### Notes:

- 1. Monitor for excessive redness or irritation and remove products immediately as directed if reaction occurs.
- 2. Although there is no documented research indicating soy protein or soy derivatives used in skin care products directly influencing the proliferation of cells that respond to oestrogenic properties, clients with oestrogen dependent cancers may choose to avoid personal care products that contain soy isoflavones, soy lecithin, genistein, glycine soja, etc. It is the form of soy that matters here. Soy protein is what contains the isoflavones, soy lecithin has minimal to zero amount and soybean oil has none. Many soy ingredients in skin products have no isoflavone content therefore no hormone implications.

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