

PRINCIPLES OF ONCOLOGY PATIENT CARE

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Anderson Cancer Center at the University of Texas, reveals this unsettling news about skin cancer: "Forty-one percent of Americans will develop cancer, which means—with very few exceptions—that every family will be touched by this disease. The need is urgent."

Chemotherapy drugs combined with radiation is a crucial component to all cancer management, and with this rising cancer burden, doctors and patients alike will see an increasing incidence of chemotherapy-related skin toxicity. If significant skin reactions are not managed quickly, dose interruptions, reductions, or discontinuation of chemotherapy and/or radiation can occur, thus impacting clinical outcomes for the patient. Estheticians may play a key role in a skin therapy treatment plan, however it is important to be familiar with underlying skin care principles that impact the care of oncology patients.

Principles

During the past five years, I have interviewed several major medical institutions that are expanding their facilities to offer some form of collaborative care, which includes massage, yoga, meditation and aromatherapy. The well-established "look good/feel good" program is still an important part of patient support, however with drug therapies becoming more aggressive and a patient's physical vitality at an all-time low, the need for skin therapies that move beyond self-esteem and making people "feel good" is on the rise.

Though medical and radiation oncology nurses are faced daily with managing treatment-related skin issues, collaborative care programs are not inclusive of skin care services. Oncologists and their nursing staff view skin care as the new frontier of patient care, and yet are unfamiliar with these non-medical therapies and protocols. Estheticians have a unique opportunity to participate in the development of these programs, which begins by learning oncology skin care principles.

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The principles of oncology skin care describes what the public and medical institutions can expect from an esthetician who specializes in oncology skin treatments. They are intended as guidelines for good and ethical practices, which hold the care of the patient at the forefront.

Skin care practitioners should begin by understanding potential problems, management recommendations, skin conditions that can be treated with therapeutic skin care, what the treatments entail and how they would be administered. In addition, sanitation and infection control is paramount when caring for oncology patients.

Skin management

Chronic skin inflammation undermines all levels of healing and is a precursor to oxidative stress on the body. In addition, inflammation inhibits recovery, feeds cancers and affects other barrier functions, like the intestines and lungs. Numerous topical drugs and pharmaceutical-grade solutions are used in wound care and recovery, but most exhibit cell toxicity and can induce carcinogenic effects in non-tumor cells. These side effects limit the use of these drugs. This would include using synthetic skin care preparations. An ever-growing body of evidence is pointing to and validating that the assessment of risk factors, prevention of free radical damage, support of skin's natural defenses and topical supplementation through phytotherapy reduces these risk factors and aids in preventing secondary cancers, which manifest in the skin.

Treatment assessment

All treatments should begin with a comprehensive assessment of the skin. Estheticians may administer skin therapies as long as the dermis is not exposed. If the skin shows extreme erythema, but is not broken or oozing fluid, the patient can benefit tremendously from oncology skin therapies. Learning to identify the following is the core of skin principles.

DRY COLD	DRY HEAT	MOIST COLD	MOIST HEAT
Pallid color	Flushed color to redness	Pallid color	Flushed color to redness
Deflated or wrinkled	Capillary dilation and fragility	Pitting edema	Non-pitting edema
Dry desquamation	Peeling of surface skin	Damp surface	Induration
		Vesicular weeping of watery fluid	Vesicular weeping of sticky fluid or pus

Treatment application

Implementation of products with non-carcinogenic ingredients is a top priority. Patients experience low immune response, and let's face it—if they are trying to eradicate cancer from the body, it only makes sense not to apply cancer-causing ingredients to the skin. Look for key products that are vegan, green and organic—but be aware of key ingredients that should not be used during treatment or for at-home use. The following are only a few of the isolated ingredients that should be avoided.

- Mineral oil may also go by the names liquid paraffin, paraffin wax and petrolatum on the product label. Mineral oil, once applied, prevents the skin from "breathing." As such, it

clogs pores, interferes with the skin's natural ability to eliminate toxins, and can lead to acne flare-ups. Also, it is an irritant—and if used for any length of time, skin can become dependent on it, bringing about chapping and dryness.

- Propylene glycol may cause dermatitis, kidney or liver abnormalities, inhibit skin cell growth or cause skin irritation.
- Phenol carbolic acid can cause circulatory collapse, paralysis, convulsions, coma and even death from respiratory failure.
- Acrylamide is linked to mammary tumors in lab research.
- Sodium laurel, lauryl sulfate (SLS), and sodium laureth sulfate (SLES) are substances that break down the skin's moisture barrier, allow other chemicals to easily penetrate the skin and become a "nitrosamine," a potent cause of cancer.
- Toluene, butylated hydroxytoluene (BHT), benzoic and benzyl are linked to anemia, lowered blood cell count, liver or kidney damage, and may affect a developing fetus.

Precautions

Skin therapy treatments should not be administered two hours before or after an oncology treatment. During skin therapy, it is important to monitor the skin's response to all aspects of treatment. This includes skin activation, tolerance to products and ability to absorb product. Skin becomes thin, dry and fragile during an oncology treatment, and therefore the technique for removing products should be done by bathing skin through compression. Avoid rubbing or wiping the skin. Traditional methods for skin activation should be avoided, and this includes effleurage, tappage and petrissage.

Gentle skin activation like pressure point or lymphatic manipulation is the most appropriate application. The oncology patient may have a hard time retaining information, so ending every treatment with home care instructions ensures compliance while the patient is not under your direct care.

Sanitation and infection

Sanitation and infectious disease control is paramount, and a strict distinction between the healthy spa client and the oncology patient should be made. Sheets and towels should be laundered with a biodegradable detergent like Seventh Generation or Ecos. For sanitization and whitening add 1/4 cup of vinegar and 1/4 cup of hydrogen peroxide to the wash. This also makes your laundry soap more concentrated, so you use less. Do not use dryer sheets, fabric softeners or any product that has synthetic fragrances. These types of products will make the patient feel nauseous, and they are established skin irritants.

Disposable sponges and cotton rounds are preferable for removing products. Steamers are a breeding ground for colonization of many types of bacterium, so they should be avoided. Brushes should also be avoided, unless an autoclave is used for sterilization. Estheticians should keep nails clipped to the wick, so that hair and cuticle fibers from clients

continues

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do not accumulate under the nails. The practitioner should not wear nail polish. Gloves and mask are not mandatory, unless you have a patient who is extremely ill. Keep floors swept and clean, and the workstation sanitized and immaculate. Something that is always over looked is product containers, which should be wiped down, especially the neck. Product spills onto these areas during use and is rarely cleaned, leaving excess on the neck where colonization of bacterium can take place. After each client, seal the trash bags and remove them from the room.

Patient support

As patients begin to navigate through the dos and don'ts, the priority for beauty and grooming never waivers. Men and women still have to work, take care of kids, attend meetings and above all, have a social life. Most oncology offices focus on what to expect medically; however answering basic questions about daily grooming and beauty tips are left unanswered. The one feeling you do not want an oncology patient to experience is isolation. They should never feel excommunicated from life because they have a cancerous condition. Patients

do not know if they can still enjoy the simple indulgences they are used to. Services should not focus on what to avoid, but on supporting the patient's desire for treatments that provide safe and effective results.

Oncology skin care is not just for estheticians who want to work with medical institutions. As cancer continues to infiltrate our lives, adjustments to our spas and individual practices ensure that we meet the needs of this growing population. Learning the principles behind these therapies is the first step to being of service to those with challenging health issues. It is a rewarding time to be an esthetician and provide a valuable service to individuals who need our help. ■



Anne C. Willis, a licensed esthetician and massage therapist, is a world-wide leader in holistic and medical skin therapies and founder of De la Terre Skincare. She is an accredited skin care instructor and the director of Oncology Skin Therapeutics™, bringing more than 30 years of experience and knowledge to the new generation of skin therapists. Willis co-authored *The Esthetician's Guide to Working with Physicians* and has been featured in multiple publications. For more information, contact her at info@delaterreskincare.com or visit www.delaterreskincare.com.




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