



Facials

Facial Treatment Manual

Introduction, Reception, Consultation and Ventilation

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Introduction, Reception, Consultation & Ventilation

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Introduction

Take a look at almost any treatment menu, and somewhere you are bound to find a reference to a facial. This is a staple treatment, and a regular feature in most salons.

Benefits Of A Facial

A facial is both relaxing and beneficial for all skin types and ages. Not only will it help to reduce minor skin imperfections, it will also improve the general appearance and texture of the skin, identify the client's individual needs, and identify their skin type and possible conditions.

Reception Duties

Reception is the first aspect of your business that a client will encounter. Whether this is face to face or over the phone it is essential that it is handled professionally.

Your receptionist represents your business, so it is important that they are always professional, polite and well presented. The receptionist should take bookings, answer enquiries, greet clients and take payments. They should be trustworthy, able to talk to clients with confidence and able to listen. If you cannot afford the luxury of a receptionist it is down to you to manage the bookings.

Reception Duties

You should always ensure that anyone working on reception or taking your bookings knows as much as possible about the treatment. It may be worthwhile letting them experience the treatment for themselves. This way, when talking to clients, they will be able to let them know what to expect and answer any questions.

Receptionist Knowledge

Some enquiries may include whether the client has to do anything themselves before treatment, such as removing make-up, how long the treatment lasts or whether there are any extra costs. They may also be asked about the benefits of treatments, the aftercare and whether there are any restrictions for treatment. Some treatments or products may require a patch test to be carried out 24-48 hours prior to the treatment.



Any receptionist should be aware of the recommended service times and prices. The time taken over a facial will vary according to what the client's requirements are, and many salons choose to list several different facial treatments which incorporate various elements. A basic facial can be as short as 30 minutes, whilst more advanced treatments will take over an hour.

Special Needs And Disabilities

The receptionist should also be aware of any clients with special needs or disabilities, as they may require help getting to the treatment room or hearing instructions.

Confidential Information

Your receptionist may have to deal with sensitive or confidential information about clients. You should therefore ensure that your receptionist deals with this professionally and does not reveal it to any other parties (in accordance with the Data Protection Act 1998).

Working Conditions

Ventilation

It is important to ensure that the working area is properly ventilated to minimise the spread of substances that are hazardous to health. Fresh air must be allowed to circulate, using as much natural ventilation as possible, such as open windows and doors. This will reduce any stale odours and help disperse airborne germs.

Equipment

It is always best to buy the best quality equipment that you can afford. Remember that if you are working mobile you will be carrying this equipment around on a daily basis and if it is heavy you could injure yourself or risk repetitive strain injuries. Buy the lightest but sturdiest equipment available and never compromise your own health.

Room Temperature And Lighting

Ensure that the temperature of the treatment room is comfortable for both you and the client. You may choose to have some towels and blankets on the couch to cover your client and keep them comfortable. In colder months, some therapists put an electric blanket on the couch to help keep clients warm.

You may wish to dim the lighting in the treatment room once the client is on the couch to help with their relaxation. However, you should ensure that there is sufficient light to perform the treatment effectively. Clients may also appreciate the playing of soft background music to add to the ambience.

Consultation

Before carrying out any treatment, you should always carry out a thorough consultation.



The most important aspect of this is to ensure that it is safe to carry out the treatment. You should gather personal and medical information about your client, including whether they have any allergies or are taking medication. This should help you establish whether there are any contra-indications or contra-actions to treatment.

GP Consent

Important Note

Remember that as a beauty therapist, you are not qualified to diagnose a medical condition and therefore, if you have any doubt about whether to offer your client a facial treatment, you must refer them to their GP to obtain written consent prior to the treatment going ahead.

Consultation Content

At the consultation stage you must establish the client's suitability for treatment by discussing their needs, medical history and lifestyle. The consultation will also allow you the opportunity to explain the whole treatment process and allow the client time to ask any questions they may have.

Treatment Expectations

You should also find out what the clients expectations are for the treatment. Do they have a problem they are looking to address, or are they simply looking for some pampering or relaxation? It may be for a special occasion or as part of an ongoing maintenance regime. This information will help you to tailor the treatment accordingly.

Patch Test

You should make sure that you discuss the condition of the client's skin and whether they have any particular concerns. If the client indicates that they have sensitive skin or are prone to reactions, you should offer a patch test of your products to ensure they are suitable. This must be carried out at least 24 hours prior to their first appointment. Apply a small amount of all the products that you would normally use during the course of a treatment to a small area of the client's skin. If there is a positive reaction then the treatment must not go ahead. You must advise the client how to recognise a positive reaction to the patch test. A positive patch test will result in redness, possible swelling, irritation and/or itching. The date that the patch test was carried out and the outcome must be noted on the client record card.

Client Record Card

You will then be able to explain the treatment thoroughly, so that the client does not get any surprises. It will also help them to understand what benefits they will get. The client will then have the opportunity to ask any questions that they may still have.



The contents of the consultation should then be recorded on a record card which the client should be asked to sign. This card can then be used for the client's visit, when you can check whether any of their circumstances have changed. This information should be updated with each visit and kept confidential at all times to comply with the Data Protection Act 1998.

Therapist Allergies

As well as taking care of the client, you should also make sure that you think about yourself. You should be aware that as a therapist you may also suffer from contact dermatitis or allergies. If this is the case, follow the procedure as you would with a client, and take precautions during further treatments.

Treating Minors

In England, Wales and Northern Ireland, a minor is anyone under the age of 18. Sometimes you will get requests for appointments from clients who are younger. If the client is under 18, you should always obtain written permission from their parent or guardian for the treatment to go ahead and they should accompany the minor to the salon for the appointment. It is also recommended that you check your insurance policy wording to see if there are any age restrictions detailed in it.

Salons should insist that appointments for under-16s are booked out of school hours. You will be sent a template example of a consultation form upon completion of this course

GP's Written Consent

Please be aware that some GP's refuse to write letters for their patients, and others will write a letter but they charge a fee for this service. If you cannot get a GP's letter then you would not be insured to carry out the treatment and this must be made clear to the client. Some salons ask their clients to sign a disclaimer to say they are willing to go ahead with the treatment without the GP's letter or without having taken a sensitivity patch test. However, disclaimers are not guaranteed to stand up in court if a personal injury claim is pursued.

GP's Written Consent

If you are not certain whether to treat a client then you should always refer them to their GP for a letter prior to offering them treatment. Therapists are not qualified to diagnose medical conditions or understand about different medication that a client is taking, and so if in doubt, do not treat. If you explain to the client why you require a letter, for example, you do not want to offer them a treatment that could have an impact on their health, they are usually happy to go to their GP.

An example of doctors referral letter will be available to download upon completion of this course



Anatomy and Physiology

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The Skin

The skin is one of the largest organs in the body and consists of tissues which are joined together to perform specific functions. It is an epithelial tissue that can be used by therapists to assess their client's condition, as it can show signs of stress, dehydration or poor health.

Integumentary System

The skin has a number of appendages including hair and nails, which together are known as the integumentary system. The nail is a modification of the stratum corneum (horny) and stratum lucidum (clear) layers of the epidermis. Nails are non-living tissue which protect the fingers and are used as tools for the manipulation of objects. Hair grows from a sac-like depression in the epidermis called a hair follicle.

The primary function of hair is also protection.

Functions Of The Skin

The skin offers protection, temperature regulation and waste removal as well as providing a sense of touch. The sensitivity of the skin comes from the many sensory nerve endings found just under the skin which detect heat, cold, pain, pressure and touch. Heat regulation is achieved through a number of mechanisms. Sweating and vasodilation cools the skin whilst vasoconstriction warms it up. The skin also retains heat through the contraction of the erector pili muscle, causing the appearance of goose bumps. The body is protected as the skin is a waterproof layer which can also defend against physical damage, bacteria, dehydration and UV radiation.

Functions Of The Skin

Providing that the molecular structure is small enough, the skin is able to absorb substances such as essential oils or drugs, for example, hormones or nicotine, both used in transdermal patches, and fat soluble vitamins A, D, E and K. Sweating also helps to excrete waste products from the body. Urea, water and salt are removed via the sweat glands through the surface of the skin. Another function of the skin is to act as a warning system. The skin offers visible signs such as redness and irritation to show that it is intolerant to something, whether that be internal or external.



Functions Of The Skin

The skin also provides a form of storage for fat, an energy reserve. On top of this, it also produces significant amounts of vitamin D. This is created when sunlight comes in contact with the skin and produces a chemical reaction. Sebaceous glands secrete sebum, a fatty substance that helps to keep the skin supple and moisturised. Production generally reduces to varying degrees with age.

The skin begins the ageing process as soon as the body stops growing. This is usually around the age of 17 in women and 19 in men.

Layers Of The Skin

There are two main layers of the skin: the epidermis and the dermis.

The epidermis is the outer, thinner layer. Whilst the dermis is the inner, thicker layer. Beneath this, the subcutaneous layer attaches to underlying organs and tissues. It chiefly contains nerves, fat cells (adipocytes) blood and lymphatic vessels and has both insulatory and shock absorbing properties.

The epidermis is made up of five layers of epithelial tissue and has no blood vessels. The dermis consists of areolar connective tissue supported by collagen and elastin. Throughout there are a variety of different cells, each with their own specific functions. The dermis contains blood and lymphatic vessels, nerve endings, sweat glands, hair, hair follicles and sebaceous glands

Layers Of The Epidermis

The epidermis offers a waterproof, protective covering, consisting of five layers. The three outer layers, stratum corneum (horny), stratum lucidum (clear) and stratum granulosum (granular), consist of dead cells as a result of keratinisation, where the nucleus is replaced with a hard fibrous protein called keratin. The cells in these layers are dead and scaly and are constantly being rubbed away by friction. The inner two layers, stratum spinosum (prickle-cell) and stratum germinativum (basal cell) are composed of living cells.

The Stratum Corneum And Stratum Lucidum

The stratum corneum is the top layer which forms a barrier. It is made up of dead, flat, keratinised cells, which are hardened cells which have lost their nucleus. These cells continually shed from the surface in a process called desquamation.

The clear cell layer, or stratum lucidum, consists of dead cells which have no nucleus. These cells are transparent to allow light to penetrate to deeper layers. This can only be found in areas of friction, such as the soles of the feet and palms of the hands.

The Stratum Granulosum, Stratum Spinosum And Stratum Basale

The stratum granulosum contains a mixture of living and dead cells as the cells are beginning to die. The cells become flatter and contain granules of keratin, starting the process of keratinisation. Living cells are contained in the stratum spinosum.

These cells have moved up from the stratum basale and interlock with fine threads. It is this area of the skin where melanin is found. The deepest layer of the epidermis is the stratum basale, in which living cells are continually dividing in a process called mitosis.

Functions Of The Dermis

All nutrients pass to the cells in the epidermis from blood vessels in the dermis. The main functions of the dermis are to provide support, strength and elasticity. It is made up of dense connective tissue that is tough, extensible and elastic. It has a higher water content and therefore helps to provide nourishment to the skin.

The dermis forms the bulk of the skin having a superficial papillary layer and a deep reticular layer. The dermis has an abundant supply of blood vessels.

Arteries carry oxygenated blood to the skin via arterioles and these enter the dermis from below and branch into a network of capillaries. These networks form to provide the basal cell layer or the epidermis with food and oxygen.

Functions Of The Dermis

The capillary networks drain into small veins called venules which carry the deoxygenated blood away from the skin and remove waste products.

The lymphatic vessels form a network in the dermis, allowing the removal of waste from the skin's tissues. Lymph vessels are found around the dermal papillae, glands and hair follicles. Nerves are also widely distributed throughout the dermis. These sensory nerves send messages to the brain and are sensitive to heat, cold, pain, pressure and touch.

Skin Types

There are a variety of different skin types, which all have their own visible characteristics. The basic skin types are normal, dry, oily and combination.



Skin Type	Skin Structure	Characteristics
Normal	Water and oil content is constant. Neither too oily or too dry.	Pore size is small or medium. Moisture content is good. Texture is smooth and even. Colour is healthy. Elasticity is good and skin is firm. Usually free from blemishes. Often found in the young.
Dry	Lacking in sebum, moisture or both.	Pores are small and tight. Moisture content is poor. Texture is coarse and thin, possibly flaking, it can feel papery. Tendency towards sensitivity. Possible premature ageing, particularly around the eyes. Skin pigmentation can be uneven. Little elasticity. Milia are often found around the cheek and eye.
Oily	Increased levels of sebum.	Pores are enlarged. High moisture content. Texture is coarse and thick. Sallow in colour. Skin tone is good. Prone to shininess. Elasticity is good. Uneven pigmentation. Susceptible to skin disorders such as comedones, pustules, papules, or sebaceous cysts. Most common during puberty. This skin type tends to age less quickly than most.
Combination	Typically oily around the chin, nose and forehead (T-zone). Rest of the face and neck is usually dry.	Typically pores in the T-zone are enlarged, and small to medium in the cheek. Moisture content is high in oily areas, and poor in dry areas. Texture is
	However this skin type can be a mixture of any two or more skin types.	coarse and thick in the T-zone and thin in dry areas. Oily skin is sallow, whilst the dry area may be sensitive, with high colour. Skin tone is good in oily areas, and poor in dry areas. Pigmentation is uneven, and there may be blemishes in the oily areas. The most common skin type.

Sensitive Skin

Any skin type may also be sensitive, but it is often more associated with a dry skin type. This can be recognised by high colouring, and broken capillaries in the cheek area. The skin is usually warm and there can be some flaking. In black skin, the irritation shows as a darker patch, rather than redness. Sensitive skins will often redden with heat and alcohol, blushing and/or flushing more easily. They may also react to products, allergens and creams more readily causing break-outs.

Allergic skin is irritated by external allergens. It may initially become sensitised, and this can develop into a full blown allergic reaction when the skin is exposed to those ingredients or chemicals as and when they are applied.



Dehydrated Skin

Dehydrated skin has lost, or is lacking water, and is usually associated with dry or combination skin types, but can affect any skin. This could be due to a change in diet, or illness, in which case the client may be taking medication. It can also be caused by low humidity or air-conditioning, or the skincare regime used. The skin has a slight orange-peel effect and some flaking. There are some signs of ageing and broken capillaries.

Mature Skin

Mature skin can take on different skin characteristics, particularly in women due to the hormonal changes within the body. Sebaceous secretions reduce, meaning that it may become dry and lose elasticity. Some lines and wrinkles will appear, and skin is thinner. Its ability to help regulate body temperature lessens and a decrease in nerve endings results in less sensitivity to external stimuli. Broken capillaries will appear, muscle tone is reduced and blood circulation becomes poor. There can be some puffiness due to a decrease in excretion efficiency, and irregular pigmentation can occur.

Male Skin

Male skin can be quite different to female skin as it has a more acidic surface due to higher levels of sebum produced from more sebaceous glands. However, the process of shaving can sensitise and dry the skin. The ageing process appears to be slower in male skin, due to a thicker dermis and epidermis and it may feel firmer.

Fitzpatrick Scale

As well as these skin types, there are also differences in skin according to where in the world a person originates.

The Fitzpatrick Classification Scale is a system which assesses the amount of melanin pigment in your skin. This not only provides your skin colour, but also determines how your skin will react to sun without protection (photo-sensitivity). The Classification Scale begins with Caucasian, which is skin type I, through to skin type VI of Afro-Caribbean skin. The lower skin types have a lesser risk for problems such as hyper- and hypopigmentation following certain treatments. However, skin types IV and over are higher risk. An additional factor is the colour of the eyes and hair – the lighter the colour, the lower the Fitzpatrick classification.



Skin Type	Fitzpatrick Classification	Skin Characteristics	Skin Problems
Caucasian	I and II	Pink skin colour, with small amounts of melanin and so less defence against UV light.	Sun damage can result in burning and premature ageing. Freckles can appear as a result of uneven melanin distribution. Can be prone to dehydration and irritation. Ageing can be quicker than in darker skin tones.
Skin Type	Fitzpatrick Classification	Skin Characteristics	Skin Problems
Oriental/Light Asian	III	Creamy tone. More melanin is present, and the skin is usually oily.	Sensitive to sun, sometimes burns, tans slowly to light brown colour. Blemishes are rare. Can be prone to hyperpigmentation, and scarring can occur after blemishes. Female skin has little facial hair.

Skin Type	Fitzpatrick Classification	Skin Characteristics	Skin Problems
Asian	IV	Light to dark colour due to increased melanin.	Not particularly sensitive to sun, rarely burns, tans to moderate brown. Some hyperpigmentation
			and scarring can take place after inflammation. Women can have superfluous facial hair.

Skin Type	Fitzpatrick Classification	Skin Characteristics	Skin Problems
Dark Asian	V	Dark colour. Deeply pigmented with melanin.	Not sensitive to sun, rarely burns. Minimal signs of ageing. Larger sweat glands. Does not reveal capillaries.

Skin Type	Fitzpatrick Classification	Skin Characteristics	Skin Problems
African-Caribbean	VI	Dark skin colour, with more melanin. Black skin will become darker when exposed to UV light.	Insensitive to sun, never burns, deeply pigmented. Scars can occur as the skin heals after a blemish. Hyperpigmentation can come about when exposed to UV light after inflammation.



Skin Conditions

Many skin types suffer from a variety of conditions or disorders which should be identified.

Skin Condition	Cause	Appearance
Pustules	Can occur from a papule.	Raised elevation containing pus.
Papules		Raised elevation which may be red in colour.
Skin Tags		Growth of fibrous tissue. Sometimes pigmented.
Milia	Dead skin cells and sebaceous matter becomes trapped near the skin surface rather than exfoliating naturally.	Sebum trapped in a blind duct with no surface opening. White nodules around the eye.

Comedones Cause – same as for milia, but when the excess sebum becomes exposed to air it oxidises, turning it black. Appearance Commonly known as blackheads. Small, round, black, blocked pores containing sebum.

Open pores Cause – Due to oily skin or in a mature client with dry skin due to loss of elasticity. Appearance – Enlarged pores often associated with an oily skin.

Dermatosis papulosa nigra Cause- Unknown, but thought that it could be hereditary.

Appearance – Brown or black hyper pigmentation marks resembling moles frequently occurring on black skin.

In growing hair Cause – Hair that curls up inside the follicle, doubling over rather than coming out of the skin. Appearance – Inflammation with a red bump on the surface of the skin.

Pseudo folliculitis Cause – Inflammatory skin disorder often found in black male skin. Appearance – In growing hair making the skin inflamed and irritated. Hyperpigmentation may also occur.

Keloids Cause – Increased production of skin cells (hyperplasia).

Appearance – Scarring, or skin that has over-healed making it project from the surface. Common in black skin.



Skin Condition	Cause	Appearance
Scarring	A healed wound.	A mark left on the skin after a wound has healed. Scar may be raised, or smooth and shiny.
Erythema	Dilation of blood capillaries in the dermis.	Red skin.
Vitiligo	Basal cell layer no longer produces melanin.	Areas of the skin lack pigmentation.
Broken Capillaries	The capillary walls narrow and widen too quickly causing the muscles in the walls to tear and blood to seep out.	Small red threads under the skin's surface.

Skin Condition	Cause	Appearance
Melasma	Often associated with the estrogen and progesterone hormones or sun damage.	Dark skin discoloration that appears on sun-exposed areas of the face.
Age Spots	As the skin ages, its natural ability to fend off UV rays	Brown spots often <u>appearing</u> on the face.
	from the sun begins to deteriorate.	
Stretch Marks	Often a result of weight gain or pregnancy. The collagen becomes thin and broken when the skin is over stretched.	Thin, stretched tissue. <u>Appear</u> red initially, later becoming silvery.

Skin Protection

Melanin is the pigment which determines the colour of the skin, eyes and hair and helps protect the skin from the effects of ultraviolet radiation. It is automatically produced in the basal cell layer by melanocytes which have long, slender protrusions on exposure to ultra violet light.

These inject melanin into the neighbouring cells of the epidermis and determine the depth of tan a person's skin will achieve. The higher the Fitzpatrick classification, the more quickly a tan will develop to protect the underlying structures.



Environmental and Lifestyle Factors

There are a number of environmental and lifestyle factors which affect the condition of the skin. These can include lack of sleep, stress levels, general health, alcohol, exercise, diet, pollution, smoking, sun exposure and the care you take of your skin.

A lack of moisture can dehydrate the skin, contributing to premature ageing, whilst pollution can clog the pores and increase bacteria. Using harsh chemicals on your skin will strip it of vital oils, compromising the skin's ability to retain moisture. Nicotine from smoking constricts the small blood vessels and decreases the flow of oxygen to the epidermis.

Repair And Protect

The skin is one part of your body which is capable of repairing itself. Wounds and damage to the skin heal through white blood cells fighting off invading micro-organisms to prevent infection. A scab is formed to prevent further invasions, before the stratum basale cells divide through the process of mitosis and new skin is formed.

Sun Damage

The ultraviolet radiation emitted by the sun is broken into three bands, with UVA and UVB being of greatest concern to human health. When the skin is exposed to the sun for any period of time, the molecules which make up the living cells are damaged and altered. In extreme cases DNA can be damaged by ultra violet radiation, causing cells to die. If there is a permanent alteration to the nuclear DNA then certain types of skin cancer may ensue.

Sunburn

Sunburn is brought about when the UVB dose causes changes to take place within the skin. A few hours after exposure the burnt areas begin to feel hot, prickly and tense, with a slight pink hue to the skin, becoming increasingly uncomfortable over time. After a few days the redness and soreness dies away and the peeling process, which can last up to five days, begins.

Sunburn

Damaged cells release chemical substances which are responsible for the widening of the small blood vessels in the skin and the redness it causes. This increased blood supply to the burnt area also allows greater tissue fluid and white cells to accumulate, causing swelling. Repeated damage by the sun will increase the signs of ageing in most skin types.

UVC radiation does not affect the skin as it is absorbed by the ozone layer, however it can be found in artificial sources of ultra violet light.



The Cellular system

Cells

The human body is made up of billions of microscopic cells, which are the most basic living unit in the body. Few cells work independently, as they are designed to function collectively. All cells have varying shapes and structures, which are determined by their roles. However, they are all made up of the same component parts, including the cell membrane, nucleus, cytoplasm, cilia and microvilli.

Component Parts Of A Cell

The nucleus controls the actions of the cells. It contains chromosomes carrying DNA which directs the cells actions. The cytoplasm refers to all of the contents of the cell except the nucleus. It contains a cytosol gel which is largely made up of water and some nutrients. This is where many of the chemical reactions take place. The cytoplasm also contains ribosomes, which produce protein, and the Golgi body is a large organelle which produces proteins and lipids. Cytoplasm also contains mitochondria, which are double membraned organelles which produce energy and are responsible for cellular respiration (chemical reactions occurring within the cell). There are also single membraned organelles called lysosomes which collect and break down the waste products of the cell.

Cell Functions

Cells have a number of functions, including respiration, cellular respiration, growth, reproduction, excretion, filtration, movement, irritability, diffusion, osmosis, and active transport. The role of the cell will depend upon where in the body it is found.

Component Parts Of The Cellular System

Cell growth takes place until it reaches a state of maturity where it is able to reproduce. This is when cells divide through the process of mitosis. One parent cell divides to form two identical daughter cells. This is how the cells in the skin reproduce, so that each new cell is exactly the same as the previous one, otherwise the skin would be constantly changing. The cell excretes waste products through the cell membrane whilst the process of filtration allows the movement of fluid across the membrane due to the differences in pressure inside and outside the cell. Most cells are capable of movement either as a whole, or a single part of the cell. The cell is also subject to irritability, which allows it to respond to stimuli.

Each cell has a different life span according to its type and function. In order to maintain the correct cellular level, each cell must reproduce in order to continue life. This reproduction takes place through the division of the cell, where identical daughter cells are created.



There are two types of cellular division: mitosis and meiosis. During mitosis, two identical daughter cells are produced to allow for growth and repair. This division is achieved through the four phases of prophase, metaphase, anaphase and telophase. When a cell reaches maturity, it is able to divide and reproduce again, thus continuing the cycle.

In meiosis, four daughter cells are produced, each with half the number of chromosomes of the original cell. This is the process by which a new organism is formed by the fusion of a sperm and egg, as in human reproduction, producing a unique individual person.

Tissue Types

When similar cells act together to perform a specific function they become a tissue. In this tissue, the cells are able to divide to repair any damage that occurs to the tissue.

The body is made up of four basic types of tissue: epithelial, connective, muscular and nervous. The epithelial tissue is used for protection, absorption and filtration by providing surfaces and linings to areas of the body, particularly hollow organs, ducts and glands. The epithelial tissue (found in the skin) includes many different types of cell, all of which are packed tightly together and arranged in continuous sheets. These tissues receive all their nutrients and remove their waste through a process called diffusion as they have no blood supply of their own.

Tissue

Connective tissue supports and connects different parts of the body. It has a number of different functions including storing energy reserves and helping to provide immunity. With the exception of cartilage and tendons, connective tissue generally has a rich blood supply and nerve supply. Its cells are separated by protein fibres and fluid.

Muscular tissue is paramount in the production of movement as it is capable of contracting and shortening. The fibres of the muscle tissue are made up of elongated cells that provide the facility for contraction. There are three types of muscular tissue. The skeletal muscle tissue helps to maintain posture whilst the smooth muscle tissue moves substances around the body. Cardiac muscular tissue forms the walls of the heart and is not under conscious control.

Nervous Tissue

Nervous tissue is the communication system of the body, and is responsible for controlling and directing most of the processes of the body. It is primarily made up of neurons (nerve cells) and neuroglia (supporting nerve cells).

Adipose tissue is made up of adipocytes, which are specialised fat storage cells.

These are present within connective tissue and provide protection for nearby organs. It also helps to reduce heat loss and supply energy if a shortage occurs. It is found under the skin, supporting the organs, within yellow bone marrow and between bundles of muscle fibres.



The Muscular System

Functions Of The Muscle

There are almost 700 muscles in the body, which can make up almost half of your body weight. Muscles have three main functions: movement, maintaining posture and the production of heat. Each movement requires the co-ordinated action of several muscles. The muscular system is also involved in the movement of fluids such as blood, lymph and urine.

Components Of The Muscle

In order to stand upright, the fibres of some muscles create tension and rigidity.

Heat is created by the movement generated by the muscles.

Each muscle is approximately 75% water, 20% protein and 5% mineral salts, glycogen and fat. Skeletal muscles are composed of bundles of muscle fibres called fasciculi. These bundles and muscles are surrounded by connective tissue sheaths. The epimysium is the outer layer which encircles the entire muscle.

Connective Muscle Tissue

The perimysium surrounds collective bundles of muscles, whilst the endomysium surrounds the individual muscle fibre. This layer contains blood capillaries that supply blood containing oxygen and nutrients, and remove waste products. These layers extend beyond the muscle fibres and become tendons or aponeuroses and attach the muscle to bone.

Types Of Muscle

The three main types of muscle are voluntary, which is mainly attached to the bone, involuntary, which is found inside the digestive and urinary tracts, as well as the walls of blood vessels, and cardiac, which is only found in the walls of the heart.

Voluntary (skeletal) muscles consist mainly of muscle fibres, each of which is enclosed in connective tissue called the endomysium. Most voluntary muscles are made up of fast-twitch fibres which react quickly but also tire easily, and slow-twitch fibres which have greater endurance. Voluntary muscles only contract if a stimulus is received from a motor nerve and are all attached to the skeleton.

Involuntary Muscle

Involuntary (smooth) muscles are not under the control of a conscious part of the brain and are found in the walls of hollow organs such as the stomach. These muscles are controlled by the autonomic nervous system and therefore work below the level of consciousness. The muscle cells are spindle shaped and tapered at one end, with each cell containing a central nucleus. These muscles are controlled by neurotransmitters, hormones and some by autorhythmic cells (self excitable).



Muscle Contraction

Muscle attachments are known as origins and insertions. The end of the muscle closest to the centre of the body is the origin and is fixed, whilst the insertion is further away and moveable. Origins are shorter and broader, whilst insertions are longer and denser. On contraction the insertion generally moves toward the origin.

Muscle contraction is the ability to shorten and thicken. The speed at which they do this can vary depending on the type of muscle it is. Voluntary muscles move by a stimulus from the brain. Each muscle fibre is connected to a fibre of a nerve cell which ends in a motor point where the stimulus is given, like a tiny electrical current. When an impulse is received, the motor nerve fibre secretes a substance called acetylcholine which stimulates the muscle to contract.

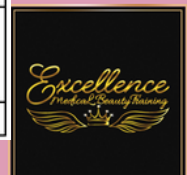
The energy required to perform a muscle contraction comes from carbohydrates. Glucose, the smallest form of carbohydrate, is converted into glycogen which is broken down in the presence of oxygen during a contraction and energy is released enabling the muscle to move. An adequate blood supply is essential if the muscles are to carry out their movements. A lack of oxygen and nutrients will result in muscle cramp (a painful spasm) or with the face, a gradual reduction in muscle tone and elasticity, which is why facial massage is such an important aspect of any facial routine.

Position And Actions Of The Facial Muscles

Muscle Name	Location	Action
Frontalis	Forehead	Raises the eyebrows and wrinkles the forehead (surprise)
Corrugator	Between the eyebrows	Draws the eyebrows down and together into a frown
Orbicularis oculi	A circular muscle around the eyes	Closes the eye (blinking)
Risorius	A triangular muscle that extends diagonally from the masseter muscle to the corner of the mouth	Draws the corners of the mouth out and up into a smile (grin)

Position And Actions Of The Facial Muscles

Muscle Name	Location	Action
Buccinator	Inside the cheeks. It is attached to the upper and lower jaws	Compresses the cheeks (blowing)
Zygomaticus (major and minor)	Extends diagonally from the zygomatic to the corners of the mouth	Lifts the corners of the mouth up and back into a smile
Procerus	Between the eyebrows on the bridge of the nose	Draws the eyebrows inwards and wrinkles the bridge of the nose



Position And Actions Of The Facial Muscles

Nasalis	Front of the nose and around the nostrils	Opens and closes the nostrils
Levator labii superioris	Around Down the cheek at the side of the nose and into the upper lip	Raises and draws back the upper lips and nostrils (snarling)
Levator anguli oris	Extends from the upper jaw to the corner of the mouth	Elevates the angle of the mouth (lip curl)
Depressor labii inferioris	Around Side of the chin into the lower lip	Pulls down the lower lip making it jut out to one side
Depressor anguli oris (Triangularis)	Extends from the lower jaw to the corner of the mouth	Depresses the angle of the mouth (sadness)

Position And Actions Of The Facial Muscles

Muscle Name	Location	Action
Orbicularis oris	A circular muscle around the mouth	Closes the mouth (kissing)
Temporalis	temples	closes the jaw as in chewing
Masseter	A flattened muscle which extends from the zygomatic arch (cheek bone) to the mandible	Raises the jaw to exert pressure when chewing (biting)
Mentalis	Front of the chin	Raises the lower lip and wrinkles the chin (pouting)

Position And Actions Of The Neck Muscles

Muscle Name	Location	Action
Platysma	-	Lowers the jaw wrinkling the neck Draws the corners of the mouth down and back

Position And Actions Of The Neck Muscles

Muscle Name	Location	Action
Sterno-cleido-mastoid	Lies across each side of the neck. Runs from the sternum to the clavicle and temporal bone mastoid process	Rotates the head side to side individually and flexes the neck bowing the head when used together
Occipitalis	The back of the head	Draws the scalp backwards



Position And Actions Of The Neck Muscles

Muscle Name	Location	Action
Splenius capitis	A posterior muscle that extends from the spine to the temporal bone and occipital bone	Extends the head and neck

Position And Actions Of The Shoulder Girdle Muscles

Muscle Name	Location	Action
Pectoralis major	Front of the chest	Moves the arm towards the upper body - elbows to middle.
Deltoid	Covers the shoulder	Takes the arm away from the body in a sideways, front ways and backward motion

Position And Actions Of The Shoulder Girdle Muscles

Muscle Name	Location	Action
Trapezius	Triangular muscle covering the back of the neck and upper back	Extends the neck, raises and braces the shoulders
Levator scapula	Runs vertically through the neck	Elevates the scapula

Position And Actions Of The Shoulder Girdle Muscles

Muscle Name	Location	Action
Rhomboids	Lies between the scapulae	Adducts the scapula
Infraspinatus	Attaches to the middle of the scapula	Rotates the humerus outwardly

Position And Actions Of The Shoulder Girdle Muscles

Muscle Name	Location	Action
Teres major	Attaches to the bottom end of the scapula and the back of the humerus	Adducts and inwardly rotates the humerus
Teres minor	Attaches to the lateral edge of the scapula	Rotates the humerus outwardly



The Nervous System

The nervous system is the main communication system for the body, as it transmits messages between the brain and the body. It works with the endocrine system, which is the hormonal system dealing with the slower body processes such as puberty, pregnancy, menopause, to help regulate body processes, and interprets the information it receives. The nervous system is made up of a network of nerve cells known as neurones, which transmit messages in the form of impulses. It analyses sensory information and decides how to respond. The brain is the control centre for the nervous system, as it is a complex mass of nerve tissue. It receives stimuli through the nerves and co-ordinates the required responses.

The cerebrum is the largest part of the brain and is divided into hemispheres, bridged by nerve fibres called corpus callosum. The area in which the main functions of the cerebrum are carried out is the cerebral cortex, which deals with conscious activity, voluntary movements, emotion and memory. The cortex of each hemisphere has a variety of functional areas including sensory areas which receive impulses from the sensory organs, motor areas which have motor connections with voluntary muscles and association areas where information from the sensory areas meets with the memory, allowing conscious decisions to be made.

The Cerebellum

The cerebellum is found at the posterior of the cranium and is also divided into hemispheres. Its job is to work on muscle tone and co-ordination and balance.

One other core element is the brain stem, which contains the midbrain, pons and medulla oblongata. The midbrain contains the nerves connecting the cerebrum and lower nervous system, whilst the pons relays messages from the cerebral cortex to the spinal cord. The medulla oblongata connects the brain and the spinal cord, and carries control centres for the heart, lungs and intestines.

Sensory And Motor Nerves

A nerve transmits impulses between the brain and the body. Nerves are made up of neurones, which are long, narrow cells. They have a large central nucleus and fibres which transmit messages to other neurones. There are two types of nerve, known as the sensory and motor nerves. Sensory nerves receive information from receptors in the sense organs such as the eyes, and relay it to the brain. They are usually found near the surface of the skin, and are responsive to stimuli such as touch, temperature and pain. Motor nerves carry impulses to and are found in the muscle tissue. They respond to information from the brain sent to a muscle or gland. The typical response is muscle movement. The point where a nerve enters the muscle is known as the motor point and it is this electrical impulse which causes the fibres of the muscle to contract bringing about movement.



Component Parts Of The Nervous System

A nerve impulse is effectively a tiny electrical signal. Nerve impulses carry instructions from the central nervous system to the relevant area of the body to bring about a change in an organ or cause movement in a muscle.

The activity of a neurone can be brought about by a number of different stimuli.

These can include mechanical stimuli such as touch, the thermal stimuli of temperature or a chemical stimuli.

The Nervous System

The nervous system itself can be broken down into three smaller systems: the central, peripheral and autonomic systems. The central nervous system is primarily made up of the brain and spinal cord, and co-ordinates the actions of the body. Impulses are transmitted throughout the body by the brain, causing other organs to act. The brain is protected by the bones of the skull, whilst the spinal cord is protected by the vertebrae. A connective tissue made up of three layers collectively called the meninges surrounds the central nervous system, helping to protect it.

The Nervous System

Not only does the central nervous system contain neurones, it also has another type of nervous tissue known as neuroglia. Neuroglia cells are a type of connective tissue that supports and nourishes the neurones. They are smaller cells than the neurones and are found in large numbers.

The peripheral nervous system contains all of the nerves which are found outside of the central nervous system, and link it to the rest of the body. There are 31 pairs of spinal nerves and 12 pairs of cranial nerves which govern the impulses from the central nervous system to the skeletal muscles.

The Nervous System

The spinal nerves pass out of the spinal cord, and link to the autonomic nervous system. They receive sensory impulses and transmit motor signals throughout the body. The cranial nerves connect directly to the brain and provide a nerve supply to some of the sensory organs as well as the muscles and the skin of the head and neck. The main cranial nerves of interest to the facial therapist are the fifth trigeminal, seventh facial and the eleventh accessory nerves. The motor function of the fifth trigeminal nerves are chewing and the sensory functions are touch, pain and temperature. The motor functions of the seventh facial nerves are facial expression, secretion of saliva and tears, the sensory function is taste. The motor function of the eleventh accessory nerves are head movement and swallowing and the sensory function is body position.



The autonomic nervous system controls the activities of the smooth and cardiac muscles, as well as the glands. Primarily, its role is to maintain homeostasis within the body. The autonomic system deals with the involuntary activities of the body over which there is no conscious control. This includes regulating the functions of vital organs such as the heart, stomach and lungs, as well as the secretion processes of most glands.

The autonomic nervous system has sympathetic and parasympathetic divisions.

The sympathetic nervous system is stimulated in times of stress or danger, known as fight or flight. It causes the heart to beat faster and so increases blood flow, preparing the body for physical activity. Any non-essential activities at this point are inhibited. The parasympathetic system is associated with resting and digesting and blood flow is slowed. This system also stimulates the processes of digestion and the absorption of food.

The Skeletal System

Flexibility And Movement

The average skeleton contains 206 bones, each one attached and held together connected by the connective tissue of a ligament, which supports and links different parts of the body. The skeletal system provides a strong framework for the body, whilst the joints hold the bones together and offer flexibility and movement. Bones are required by the human body for structure and movement, and provide sites of attachment for the muscles which pull on the bones to generate movement when they contract.

Physical Structure

The skeleton needs to be strong, as it bears the weight of all the other tissues of the body. By supporting the weight of the body, it enables us to stand. There are two types of bone, compact and cancellous, which help to give shape to our body, and protect vital organs and tissues. As well as providing a physical structure for the body, the bones develop platelets, which are blood clotting cells, and red and white blood cells in the bone marrow of the cancellous bone tissue, and store important minerals such as calcium and phosphorous.

Depending on the levels of calcium in the blood, the bones release or absorb it to maintain stable levels. This process is known as mineral homeostasis and it is controlled by the hormones.



When fully developed, the bone consists of water, calcium salts and organic matter. The tissue of the bone is made from cells called osteoblasts. There are two main types of bone tissue, both of which are found in every bone.

Compact bone tissue is the hard section of the bone that forms the main shaft of long bones. It is known as dense bone and provides the firm framework for the body. The osteocytes, which are mature bone cells derived from osteoblasts, are living bone cells that are located in rings around a central haversian canal. It is through here that nerves, blood and lymphatic vessels pass to nourish the bone and take away waste.

The spongy bone tissue is called cancellous bone, which is lighter, with an open air-bubble type appearance. It is found at the ends of long bones, and the centre of other bones. It is made up of a web of thin processes of bone, with the spaces filled by red bone marrow. The blood vessels run through every layer of cancellous bone, transporting nutrients and oxygen.

Each bone is made up of two types of marrow: red and yellow. The red marrow creates red blood cells, whilst the yellow marrow is found in central cavities of long bones. The yellow marrow is a store for fat.

One of the connective tissues is called cartilage. It consists of collagen and elastin fibres and is a flexible and durable tissue. It cushions and absorbs shock and throughout the body there are three types: hyaline, fibrous and elastic. The hyaline cartilage covers the articular bones surfaces, fibrous cartilage is strong and rigid and found between the spinal discs, and elastic cartilage is flexible and found in the auditory canal and pinna of the ear.

Ligaments are a white fibrous connective tissue that links bones together at the joint. It is dense and inelastic but is flexible enough to allow the joint to move freely within a safe range.

Tendons attach muscles to the periosteum of a bone. They enable bones to move when skeletal muscles contract, and are tough fibrous cords of tissue. insert fig 5.2 connective tissue wrappings of skeletal muscle - relevant labels

Long, short, flat, irregular and sesamoid are all classifications of bone.

Long bones are the bones of the limbs, except for the wrist and ankles. They have a long shaft called the diaphysis, with ends called the epiphysis. Smooth cartilage covers the articular surfaces of the shaft endings, and a flat plate of hyaline cartilage, called the epiphyseal cartilage, grows between the diaphysis and epiphysis. As this cartilage grows, it turns into bone in order for the bone to grow in length.

Short bones are cube-shaped and commonly found in the wrist or ankle. Flat bones tend to resemble plates, with broad surfaces, such as the sternum and scapulae. Irregular bones vary in shape and include the vertebrae and some facial bones. Sesamoid bones are small and rounded and are embedded in a tendon.

An example of this is the patella (knee cap) which is found in the quadriceps femoris tendon.



Bone Shape	Examples	Consistency
Long Bones	Arms and legs	Mainly made up of compact bone
Short Bones	Wrists and ankles	Mainly made up of spongy cancellous bone
Flat Bones	Sternum and skull bones	Made of a layer of spongy bone, sandwiched between two thin layers of compact bone
Irregular Bones	The butterfly-shaped vertebrae	Unusual shaped bones, and do not fit into other groups

The skull is divided into the face and the cranium, which in total are made up of 22 bones, 14 in the face and eight cranial bones. The facial bones form our features and support structures such as the eyes.

The mandible, or jawbone, is the only moveable, largest and strongest bone in our face. It holds your lower teeth in place and it moves to allow you to chew your food.

All our facial bones are arranged in pairs, apart from the mandible and vomer. This is what makes our face symmetrical. For example, we have two zygomatic bones that form our cheekbones and the outside of our eye sockets on either side of our face.

The septum is found below the nasal bones and is made from cartilage. The cranium protects the brain with thin, flat, curved bones. These are joined together by connective tissue which becomes immovable after childhood.

Bones Of The Cranium

Bone	Function
Occipital	Contains the foramen magnum, a large hole which the spinal cord, nerves and blood vessels pass through.
Parietal	Forms the top and sides of the head.
Frontal	Forms the anterior part of the roof of the skull, forehead and upper walls of the eye sockets. The frontal bones contain a sinus above each eye.

Bone	Function
Temporal	Form the sides of the skull and part of the cheekbone. Provides two muscle attachment points: the mastoid process and the zygomatic process.
Ethmoid	Forms the nasal cavity, part of the wall of the orbit and part of the nasal septum.
Sphenoid	Joins together all of the bones of the cranium. It articulates with frontal, temporal, occipital and ethmoid bones.



Bones Of The Face

Bone	Function
Nasal	Forms the bridge of the nose.
Vomer	Forms of the dividing wall of the nose.
Palatine	Forms the floor and wall of the nose and the roof of the mouth.
Turbinate	Forms the outer walls of the nose.

Bone	Function
Lacrimal	Forms the inner walls of the eye sockets, including a small groove for the tear ducts. These are the smallest of the facial bones and are located close to the medial part of the orbital cavity.
Malar (Zygomatic)	Forms the cheekbones.
Maxillae	Forms the upper jaw. These are the largest bones of the face.
Mandible	Holds the lower teeth, and is the only moveable bone of the skull. This is the largest and heaviest bone of the skull.

The Neck, Chest & Shoulder

The bones of the neck, chest and shoulder serve multiple purposes. They must protect the vital organs enclosed within the thoracic cavity, whilst also providing movement for the head and upper limbs.

Bone	Function
Cervical Vertebrae	Forms the top of the spinal column. The first vertebra, which supports the skull, is the atlas; the axis is the second, which allows the rotation of the head. These are the smallest vertebrae in the vertebral column and there are seven altogether.
Hyoid (officially cartilage)	Supports and is the point of attachment for the tongue.

Bone	Function
Clavicle (collar bone)	Forms a joint with the sternum and the scapula bones (collectively known as the shoulder girdle) allowing movement of the shoulder. This is a long slender bone with a double curve.
Scapula (shoulder blade)	Provides attachment for muscles which move the arms. It is a large flat bone, triangular in outline.
Humerus	The long bone of the upper arm. Forms a ball-and-socket joint with the scapula. It allows movement in any direction.
Sternum (breast plate)	Protects the inner organs, provides a surface for muscle attachment and supports muscle movement. It is a flat bone lying in the centre of the chest.



Cardiovascular System and The Lymphatic System

The cardiovascular system is made up of the blood and its relevant vessels and the heart. These elements form the body's main transport system for gases, blood and nutrients. One of the main elements of the cardiovascular system is the blood, which is a type of fluid connective tissue. The blood contains a variety of materials which are then transported around the body.

Transportation And Protection

One of the main roles of the blood is transportation, as it moves oxygen, carbon dioxide, nutrients, enzymes, heat, waste products and hormones to or from cells throughout the body. The blood also assists in the regulation of both temperature, and the pH (potential hydrogen) alkalinity/acidity levels of the body. The blood also protects the body through white blood cells, known as leucocytes. These engulf micro-organisms which invade the body carrying disease or infection. Clotting is another form of protection offered by the blood. When blood vessels are damaged, thrombocytes, a type of blood cell, form a clot around the area. These help to prevent the entry of bacteria, and stop the body losing blood.

Components Of Blood

The blood itself is made up of 45% solids such as thrombocytes, red (erythrocytes) and white cells, as well as plasma. This plasma is made up predominantly of water and comprises around 55% of the blood. It contains a number of other substances including proteins, electrolytes, nutrients, waste, hormones and gases. The remaining blood content consists of large numbers of red blood cells, also known as erythrocytes. These are produced in the bone marrow of long bones and carry oxygen and carbon dioxide using haemoglobin. Being bi-concave discs, the red blood cells have a large surface area to maximise their gas carrying capacity. They have no nucleus which allows them to squeeze through tiny capillaries, but means that they only have a life span of approximately 120 days.

Blood also contains several different types of white blood cells which are in place to protect the body from invading microbes and provide immunity. They use a process called phagocytosis to fight infection and disease, or produce antibodies to fight invading antigens (germs).

Thrombocytes, otherwise known as platelets, are also contained within the blood, and are like small fragments of red blood cells. They are formed in the bone marrow, and begin the chemical reaction which forms a clot. These platelets gather at the site of an injury to a blood vessel and plug the opening.

They form a mesh over the wound which then creates an insoluble clot.



Arteries

Arteries are large triple-walled vessels with a hollow centre (lumen) through which blood flows. The artery walls consist of an outer layer of fibrous tissue called the tunica adventitia, a middle layer of smooth muscle and elastic tissue called tunica media and an inner layer of squamous epithelium known as the tunica intima. They carry blood away from the heart to provide tissues and organs with oxygen and nutrients. Elastic arteries such as the aorta have thin walls, and their tunica media has more elastic fibres than muscle fibres, so that they can stretch and recoil as the blood flows from the heart to smaller arteries known as arterioles and finally to capillaries.

Muscular Arteries

Another type of artery is the muscular artery; the brachial artery is an example of a muscular artery. Muscular arteries are medium sized and their tunica media has more smooth muscle fibres making the walls thick and capable of greater vasodilation and vasoconstriction (expansion and contraction).

Capillaries

These are the smallest of the blood vessels and the only ones to have semi-permeable walls (gaps in them). It is here where oxygen and nutrients can pass into the tissues surrounding them in exchange for carbon dioxide and waste. The distribution of this capillary network depends upon the needs of the tissues and organs being supplied. The skin has an abundant supply of capillaries which help in controlling body temperature and maintaining a healthy skin. However, they can be easily damaged, causing thread veins to appear on the surface of the skin. Capillaries unite to form venules which are small veins and transport blood now high in carbon dioxide and waste back to the heart and organs of excretion.

Veins

Veins are similar in structure to arteries, but have thinner walls due to the tunica media having less muscle and elastic tissue. The lumen is larger than that of an artery and many have valves for example, in the limbs, to prevent the back flow of blood. Veins carry blood toward the heart.

The skin and muscular condition of the face can be vastly improved with regular facials. The increased blood and lymphatic supply stimulated by massage, feeds and nourishes the tissues and takes away waste more readily, helping it is thought, to produce a more toned, less congested, clearer, brighter complexion.



The lymphatic system acts as a drainage system for the tissues of the body. It works in tandem with the circulatory system, and provides a means of transporting tissue fluids such as lymph from the tissue spaces into the venous system.

At this point it becomes part of the circulation of the blood. Lymphatic capillary vessels are more permeable than their blood counterparts and deal with waste particles which would be otherwise too big to enter the tiny capillaries, helping to prevent fluid retention or oedema.

The lymphatic system also plays a significant role in protecting the body and providing immunity from disease and infection, by attacking invading micro-organisms and then releasing chemicals and antibodies to fight invading infections. Several types of white blood cell are made, each with a different method of fighting bacteria.

The lymphatic system also plays a role in the transportation of digested fat as well as draining away excess lactic acid formed from general fatigue when muscles are over exercised.

Lymph itself is a watery straw coloured liquid which is contained within the lymphatic vessels. Its composition is similar to that of blood plasma, however, lymph has a much lower concentration of plasma proteins, no red blood cells and a lot more waste.

The only cells contained within lymph are lymphocytes, which are a type of white blood cell. They are formed in the lymph nodes, thymus, lymphoid tissue sites found throughout the body, for example, the tonsils and spleen. These lymphocytes are responsible for fighting infections. Lymph is also used to transport substances around the body such as fat molecules, and put them back into the blood stream.

Contra-Indications & Contra-Actions

A contra-indication is a factor which will prevent you from carrying out your treatment, whilst contra-actions are things which may occur as a result of the treatment.

Impetigo

This is recognisable by the reddening of skin, but soon becomes a cluster of blisters or pustules which have a crusty 'stuck on' appearance. It is a highly contagious bacterial infection which spreads very easily, and treatment may cause cross infection. The therapist should recommend that the client goes to see their GP for medication. The treatment can be carried out once the condition has cleared completely.



Herpes Simplex

The herpes simplex virus, or 'cold sore virus', is highly contagious and can be easily spread across the face or passed from person to person by close direct contact. Once someone has been exposed to the virus it remains dormant (inactive) most of the time. However, every so often the virus is activated by certain triggers, causing an outbreak of cold sores. The triggers that cause cold sores vary from person to person. Some people frequently suffer from recurring cold sores, two to three times a year for example, while others have one cold sore and never have another. Some people never get cold sores because the virus never becomes active. The client should be recommended to go to a local pharmacy for advice. The treatment can be carried out once the condition has cleared completely.

Tinea Corporis

Tinea corporis, also known as body ringworm, is a fungal infection of the skin. It produces small, scaly patches of skin which can spread outwards and heal from the centre, leaving an easily identifiable ring. Any area of the body may be affected and treatment could cause cross infection spreading it over the client, to the therapist and indirectly to potential new clients. You should not treat a client who is suffering from Tinea Corporis, and should refer them to their GP.

Systemic Medical Conditions

A systemic medical condition is one that affects a number of organs or tissues and can therefore be spread throughout the body. You should not treat clients with such a condition until it is completely cleared.

Conjunctivitis And Other Eye Infections

Infective conjunctivitis is caused by a virus or bacteria. The most common symptoms include:

- reddening and watering of the eyes
 - a sticky coating on the eyelashes, particularly when waking up in the morning
- You should recommend that the client goes to see their GP for medication. The treatment can be carried out once the condition has cleared completely. Other common eye infections that would be contra-indicated are styes and blepharitis which make the eyes look red and sore.

Severe Skin Conditions

If the client has a severe skin condition, you should not offer treatment. It may be contagious and so the client should be referred to their GP and should not be treated until the condition has completely cleared.



Acne Vulgaris

This occurs mainly on the face, chest, shoulders and back. Symptoms often include comedones, papules, pustules, cysts and a shiny sallow appearance to the skin. It is an inflammatory disorder of the sebaceous glands, linked with hormone imbalances, sebum and bacteria and commonly occurs in teenagers. It is not contagious, but symptoms can range from mild to severe. Pitting and scarring of the skin may often be its legacy.

Acne Rosacea

Often referred to as 'adult acne' this bacterial condition can affect both men and typically, menopausal women. Characterised by redness, this flushed appearance often affects the centre of the face where noticeable blood vessels and pimples can be seen. Again the cause is unknown, but hormone levels are thought to play a major part in its development. Symptoms are aggravated by heat, sunshine, alcohol, spicy foods and stress.

Boils (Furuncles)

These pus filled, bacterial, skin infections often occur around the hair follicle and are otherwise known as skin abscesses. They often form beneath the skin in people with poor hygiene or weakened immune systems.

Herpes Zoster (Shingles)

This viral infection is often a re-emergence of the chicken pox virus when a person's immune system is weakened. It usually affects spinal nerves and a painful eruption of blisters occurs along the nerve pathways. Being highly contagious, the person may feel feverish and unwell and should not be treated.

Warts (Verrucae)

These small, rough growths are caused by a virus and can grow both individually or in clusters. They are painless, but highly contagious and are often found on fingers, the face, knees and areas that are frequently injured. Plantar warts or verrucae is the name given to those found on the feet and treatment should not be carried out.

Parasitic Infections

Any 'infestation' type condition such as scabies will be highly contagious and should not be treated. They can be passed on by direct contact, or less commonly through indirect contact with clothes and bed linen. The scabies itch mite burrows into the skin and within a few days the eggs laid there will hatch, causing intensely itchy, tiny red bumps and blotches which feel worse at night.



Skin Cancers

There are three main types, all of which are caused by excessive long term exposure to the sun. As therapists, it is important to be able to recognise these disorders so that referrals may be made to the client's GP for checking and diagnosis.

Basal cell carcinoma (rodent ulcers)

This is the most common form of skin cancer which rarely spreads to other parts of the body, but may invade surrounding tissues, which can be dangerous if located close to the brain, eyes or mouth. It can appear in many forms, such as raised bumps that break open and form scabs, flat pale or red patches, or enlarged papules with thickened pearly borders. They can often be mistaken for sores which continually bleed, scab and heal, but do not always originate in the basal cells of the epidermis.

Squamous cell (prickle-cell cancer)

This type of carcinoma originates in the stratum spinosum of the epidermis. It can sometimes develop in areas not exposed to the sun, for example, the mouth. It has a thick, warty, scaly appearance which can rapidly develop into an open sore that grows into underlying tissue. These cancers can spread and may also be caused by chemicals and physical irritants.

Malignant melanoma

This malignant tumour originates in the melanocytes or in previously benign moles. The moles may become larger, darker and change shape, or bleed. They are thought to be the most dangerous of the carcinomas and will spread to other organs and/or tissues.

Recent Scar Tissue

Do not work over scar tissue that is less than six months old for smaller scars and only then if there is no sign of redness and the scar looks healed. A period of two years may be necessary for larger scars and major operations. If in doubt, refer the client to their GP for advice before treating. This also applies to fractures, sprains and broken bones. Do not carry out a treatment over the affected area until it is completely healed. You can treat areas that remain unaffected.

Eczema

This appears on the skin as a red rash that sometimes is raised or itchy and there may be blisters. The skin can weep and crack and scaling of skin can occur. It is commonly found on the insides of joints and backs of the knees. Do not treat any area that is affected by eczema. If the client has very severe eczema it is best for them to obtain GP's consent prior to treating as certain products may irritate the condition further.



Psoriasis

Dull red papules appear on the skins that are covered in silvery scales that can become infected. This disorder often affects the hair line and outsides of joints such as the elbows and knees. You can work on areas that are not affected. However, if there is any sign of infection or weeping you must not offer treatment and the client should take advice from their GP.

Hyperkeratosis

Hyperkeratosis occurs when the outer layer of the skin becomes thicker. This often forms as some sort of protection against irritation or pressure. This is usually painless and may be worked upon.

Skin Allergies

If the client indicates they have had a previous reaction to a facial treatment or product then treatment must not go ahead. Some clients may have allergies to the ingredients found in certain skincare products. If this is the case, you should not treat the client.

Cuts, Abrasions And Bruising

Do not offer treatment over the affected area until completely healed. You can treat unaffected areas where it is possible to do so.

Stye (hordeolum)

This is the inflammation of the eyelid, often the upper lid. This is caused by an infection in the hair follicle. There is swelling and redness, and pain is felt in the eyelid. Scratching or rubbing the infected area could cause the infection to spread. You should recommend that the client goes to the doctors for medication. Treatment can then be carried out once the condition has been treated and cleared completely.

Recent Semi-Permanent Make-Up, Facial Piercings Or Tattoos

You should wait until the pierced or tattooed area has completely healed before offering a treatment. Recent Plastic Surgery, Skin Peels Or Cosmetic Microdermabrasion Treatments The client should take advice from their medical practitioner about how long they should wait before treatment can be carried out.

Recent Botox Treatments Or Lip Or Facial Fillers

The client should take advice from their medical practitioner about how long they should wait before treatment can be carried out.



Topical And Oral Retinoids And Steroid Creams

Caution needs to be exercised in people using oral retinoids. Treatment should not be performed until these medications have been stopped for at least six months to a year. Individuals using products including ingredients such as Retin A should stop the medication three to four weeks prior to their facial treatment to avoid skin injury and soreness. Prolonged use of steroid creams can also thin the skin. Refer the client to their GP for written consent prior to treating.

Contact Dermatitis

As well as taking care of the client, you should also make sure that you think about yourself. You should be aware that as a therapist you may also suffer from contact dermatitis or allergies. If this is the case, follow the procedure as you would with a client, and take precautions during further treatments.

Epilepsy

When discussing this illness with your client you do have to be very careful not to offend the client and be accused of discrimination on the grounds of disability. We recommend that you ask the client if they know what brings on a seizure and how often they experience them. If they have anymore concerns about whether they should go ahead with the treatment, you should recommend that they seek advice from their GP.

If the client decides to go ahead with treatment you should ensure that you have a contact number for their next of kin recorded on their consultation card and you should discuss with the client what action you should be required to take in the event that they have a seizure whilst with you. It is for this reason that we strongly recommend that all therapists undertake a first aid training course to ensure they are able to know how to help someone that may have an epileptic seizure whilst visiting the salon.

Treating Diabetic Clients

It is acceptable to offer some manual facial treatments to diabetic clients whose condition is controlled by diet or medication. This removes the need for the therapist having to obtain written consent from the client's GP. However, therapists must always ensure that there are no other medical complications present in the area to be treated that may be related to the diabetes, such as neuropathy, as this can cause reduced sensation that restricts the client's ability to feel heat or pain in a specific area. If any loss of sensation is present in the area to be treated then you should always refer their client back to their GP for advice and consent prior to offering massage treatments.



Contra-Actions

The most common contra-action associated with facials is an allergic reaction.

Skincare products can contain ingredients which may cause an adverse reaction. Before your treatment, check whether the client is aware of any allergies, or has suffered any reactions in the past. A contra-action is something that happens as a result of having had a treatment. It may be caused by the treatment itself or, by the client not following the correct after care advice, as instructed by the therapist.

Symptoms of an Allergic Reaction

The skin may suffer from sensitivities which could appear on the face or neck.

Symptoms of an allergic reaction include itching, swelling, inflammation, blistering at the site of contact followed by weeping, dryness and flaking of the skin. Symptoms of an allergy are not always immediate, and may take up to 48 hours to surface.

What to do if your client has an allergic reaction

If a client does react to any products during treatment, remove the substance immediately with water and apply a cooling lotion. Make a note of the reaction and your response on the client's record card, and advise them to seek medical advice.

Skin Conditions

Sensitive

Sensitive skin can be recognised by high colouring, and broken capillaries in the cheek area. The skin is usually warm and there can be some flaking. In black skin, the irritation shows as a darker patch, rather than redness.

Dehydrated

Dehydrated skin has lost water, and is usually associated with dry or combination skin types. This could be due to a change in diet, or illness, in which case the client may be taking medication. It can also be caused by low humidity or air-conditioning. The skin has a slight orange-peel effect and some flaking. There are some signs of ageing and broken capillaries.

Mature Skin

Mature skin can take on different skin characteristics, particularly in women due to the hormonal changes within the body. It can become dry and lose elasticity.

Some lines and wrinkles will appear, and skin is thinner. Broken capillaries will appear, muscle tone is reduced and blood circulation becomes poor. There can be some puffiness due to a decrease in excretion efficiency, and irregular pigmentation can occur.



Male Skin

Male skin can be quite different to female skin as it has a more acidic surface. The process of shaving can sensitise and dry the skin. The ageing process appears to be slower in male skin, and feels firmer.

Pustules And Papules

Papules are a raised elevation which may be red in colour. These can go on to contain pus, at which point they become pustules.

Milia

Milia is sebum which is trapped in a blind duct with no surface opening and appear to be white nodules usually found around the eye. They are created when dead skin cells and sebaceous matter become trapped near the surface of the skin rather than exfoliating naturally.

Broken Capillaries

Broken capillaries are small red threads found under the skins surface. This occurs when the capillary walls narrow and widen too quickly, causing the muscles in the walls to tear and blood to seep out.

Ingrowing Hair

The ingrown hair occurs when the hair cannot grow above the surface of the entrance to the hair follicle as it is blocked. The hair then grows under the surface of the skin. Infection can occur and the client may have to seek advice from their GP prior to treatment, which can then be carried out once the condition has cleared completely.

Clients who have very dry skin, very curly or strong hair are prone to ingrown hairs. They can be prevented by regular use of a body brush, exfoliating and moisturising products.

Comedones

Comedones, otherwise known as blackheads, are enlarged sebaceous glands in which sebum gathers, creating a blockage. The sebum darkens when it oxidises and then dries.

Keloids

Keloids are an overgrowth of scar tissue which are not painful but can be sensitive. They can form over any scar and appear as smooth growths of tissue.



Pseudo Folliculitis

Folliculitis is the infection of a hair follicle caused by the staphylococcus aureus bacteri. This causes acute inflammation and pus formation. Pseudo folliculitis is more commonly known as razor bumps and looks like folliculitis without the pus.

Dermatosis Nigra

Common in black skin, dermatosis nigra is a collection of small, dark bumps on the skin. These papules are harmless and are not infectious.

Hyperpigmentation

Hyperpigmentation is an excess of skin pigment. This means that areas of brown discolouration appear on the skin caused by melanocytes producing a larger amount of melanin. This is usually the result of sun or environmental damage, but can also occur during pregnancy.

Hypopigmentation is an area of lower melanin production which appears to be white or colourless. This is often due to continued sun exposure or irritation. It can also be congenital, meaning the person was born that way.

Open Pores

The pores are the holes on the surface of the skin which contain the hair follicle and sebaceous gland. These can become blocked and therefore become more visible.

There are a number of environmental and lifestyle factors which affect the condition of the skin. These can include diet, pollution, smoking, sun exposure and the care you take of your skin.

A lack of moisture can dehydrate the skin, whilst pollution can clog the pores and increase bacteria. Using harsh chemicals on your skin will strip it of vital oils, compromising the skins ability to retain moisture. Nicotine from smoking constricts the small blood vessels and decreases the flow of oxygen to the epidermis.

Preparation

Equipment

It is always best to buy the best quality equipment that you can afford. Remember that if you are working mobile you will be carrying this equipment around on a daily basis and if it is heavy you could injure yourself or risk repetitive strain injuries. Buy the lightest but sturdiest equipment available and never compromise your own health. If you visit your local wholesaler to purchase your equipment you will need to show them copies of your Guild membership insurance cover documentation to prove that you are qualified before they will issue you with a trade card.



Before commencing treatment, you will need to have the following pieces of equipment:

- Client record card – to document treatment and record skin analysis
- Couch – this can be static or collapsible if you are mobile. Always ask the supplier if you can try to put up and dismantle the couch before you buy it and check that you are able to lift it. The couch must have an adjustable head rest and be covered in a washable material. Some of the more expensive couches are electric but these are more suited to salon based therapists as they are not transportable.
- Couch cover - ensure that the couch cover is made of a material that can be washed at a high temperature.
- Disposable bed roll - this is placed over the couch cover and is replaced after each use.
- Equipment trolley - a sturdy trolley is required that is large enough to hold all your equipment safely.
- Stool - this will need to be easy to clean and should be adjustable in height.
- Clean towels - must be used for every client. These can be used to drape over the client, and for use during the treatment.
- Mirror - a small hand mirror should be available for the client to use before and after their treatment.
- Headband - this will protect the clients hair from any of the products and will prevent it getting in the way during treatment. It should be either disposable or be able to be washed at high temperatures.
- Cotton wool - this can be used to apply or remove products and should be disposed of immediately after use.
- Tissues - these may dry off areas of skin or help to remove excess products. They should be disposed of immediately after use.
- Spatulas - you need a selection of different sizes of spatula, preferably disposable. These can be used to extract products from their containers.
- Facial sponges or mitts - these are used to remove products from the skin.
- Magnifying lamp - This can be mounted on the floor, wall or trolley and will assist in closer examination of the clients skin.
- Warm towel heater - this will prepare hot steam towels to soften the skin and remove products from the skin's surface.
- Cleansers - you will need a range of cleansers for different skin types. These will remove make-up, dirt and secretions from the surface of the skin.
- Eye make-up removers - this will sometimes be needed in addition to a cleanser to remove more stubborn make-up such as eyeliner and mascara.



- Toners - you will need a range of toners for different skin types. These remove grease and any remaining cleanser. They will also freshen the skin and restore its acid balance.
- Exfoliators - you will need a range of exfoliators for different skin types. These remove skin cells from the outer layer of the skin.
- Moisturisers - you will need a range of moisturisers for different skin types. These rehydrate the upper layers of the skin.
- Face masks - you will need a range of face masks for different skin types. These are specialised intensive skin treatment for a range of conditions.
- Specialist skin products - these include serums, eye creams, lip balms and treatment creams.
- Skin warming devices - these are used after deep cleansing to soften the pores and remove blockages. These include steamers and hot towels.
- Waste bin - for any non-contaminated waste products.
- Written aftercare advice - an aftercare advice leaflet should be given to the client after their first appointment and you should record on the record card that this has been discussed and the client has taken it away with them.

Preparing The Room

You should make sure that you are fully prepared for the treatment before the client arrives. This will make your treatment more efficient and prevents you from keeping your client waiting. Make sure all the products and equipment you need are close to hand, and your couch, music and lighting are all set up as you require.

Whatever brand of facial products you use, you should always ensure that you use them correctly and follow the manufacturer's instructions.

Product

A facial treatment should involve a range of skincare products. As a trained beauty therapist you are in the best position to assess what products are suitable for each client and what benefits they are likely to have. Professional skincare products have been specifically designed to treat certain skin types and will be of great benefit to the clients skin. They will treat any particular problems the client has, and leave them with balanced, well cared for skin.



Skin Types & Product Selection

This module re-caps how to identify which skin type your client has through structure and characteristics, and moves on to identify which type of product to use on a particular skin type.

However, it is essential that you read the manufacturers instructions for all the products included within the skincare range you have chosen to use.

Skin Type: Normal

Skin Structure

Water and oil content is constant. Neither too oily nor too dry.

Characteristics

Pore size is small or medium. Moisture content is good. Texture is smooth and even. Colour is healthy. Elasticity is good and skin is firm. Usually free from blemishes. Often found in the young.

Cleansing

Cleansing milks are more suitable for this skin type. They generally contain a higher proportion of water to oil. They feel lighter than a cleansing cream.

Eye make-up must be removed using either a non-oily or oily eye make-up remover.

Oily eye make-up remover is used for removing waterproof mascara. Non-oily make-up remover is used around sensitive eyes or on clients who wear contact lenses or semi-permanent individual lashes.

Toning

After cleansing the skin, a toner is applied to cool and tighten the skin. The toner can assist in restoring the acidic PH of the skin.

Exfoliation

An exfoliating product is used after toning to remove dead skin cells and other debris from the surface of the epidermis. The shedding of dead skin cells occurs naturally and is known as desquamation. The use of an exfoliating product speeds up this process. The skin is left feeling smoother and looking brighter. Some exfoliating products contain man-made spheres of plastic in a cream or lotion, whilst others are made up of natural ingredients, such as finely crushed nut shells or grains. The product is massaged over the face and neck area before being removed with sponges and warm water.



Mask

A mask is applied after the facial massage. Masks are usually categorised into setting or non-setting types. The action of the mask is dependant on the ingredients; they can cleanse, hydrate, soothe and refine the skin. Cream, gel or clay masks can be applied to normal skin types.

Moisturiser

Moisturisers are applied at the end of the facial routine. They form a barrier that maintains the skin's hydration levels. A good moisturiser will also protect the skin from nature's elements, shielding the skin from the wind, cold and rain as well as other environmental factors such as central heating. It will also slow down the appearance of lines and wrinkles as we age.

A moisturising cream is recommended for use on normal skin types as there is a higher proportion of oil contained in it than a milk or lotion.

Skin Type: Dry

Skin Structure

Lacking in sebum, moisture or both.

Characteristics

Pores are small and tight. Moisture content is poor. Texture is coarse and thin, possibly flaking, it can feel papery. Tendency towards sensitivity. Possible premature ageing, particularly around the eyes. Skin pigmentation can be uneven. Little elasticity. Milia are often found around the cheek and eye.

Cleansing

Cleansing creams are more suitable for this skin type. They generally contain a higher proportion of oil to water. The oil content removes make-up and dirt from the skin.

Eye make-up must be removed using either a non-oily or oily eye make-up remover. Oily eye make-up remover is used for removing waterproof mascara. Non-oily make-up remover is used around sensitive eyes or on clients who wear contact lenses or semi-permanent individual lashes.

Toning

Skin fresheners are very mild toners that are more suited to dry skins. They contain very little or no alcohol.



Exfoliation

An exfoliating product is used after toning to remove dead skin cells and other debris from the surface of the epidermis. The shedding of dead skin cells occurs naturally and is known as desquamation. The use of an exfoliating product speeds up this process. The skin is left feeling smoother and looking brighter. Some exfoliating products contain man-made spheres of plastic in a cream or lotion, whilst others are made up of natural ingredients, such as finely crushed nut shells or grains. The product is massaged over the face and neck area before being removed with sponges and warm water.

Mask

A mask is applied after the facial massage. Masks are usually categorised into setting or non-setting types. The action of the mask is dependant on the ingredients; they can cleanse, hydrate, soothe and refine the skin. Paraffin wax, cream, gel or warm oil masks are suitable for use on dry skin types.

Moisturiser

Moisturisers are applied at the end of the facial routine. They form a barrier that maintains the skin's hydration levels. A good moisturiser will also protect the skin from nature's elements, shielding the skin from the wind, cold and rain as well as other environmental factors such as central heating. It will also slow down the appearance of lines and wrinkles as we age.

A moisturising cream is recommended for use on dry skin types as there is a higher proportion of oil contained in it than a milk or lotion.

Skin Type: Oily

Skin Structure

Increased levels of sebum that can cause skin blemishes.

Characteristics

Pores are enlarged. High moisture content. Texture is coarse and thick. Sallow in colour. Skin tone is good. Prone to shininess. Elasticity is good. Uneven pigmentation. Susceptible to skin disorders such as comedones, pustules, papules, sebaceous cysts. Most common during puberty. This skin type tends to age less quickly than most.



Cleansing

Cleansing milks that contain a small amount of detergent are suitable to use to remove light make-up. They are light and do not leave the skin feeling overly greasy. However, if the skin is very congested a cleansing lotion may be preferred. Cleansing lotions contain detergents in a water base and some have an antibacterial action, making them more suitable for oily skins. Cleansing wash is also another option for this type of skin but must be used after the milk or lotion as it will not remove make-up.

Eye make-up must be removed using either a non-oily or oily eye make-up remover. Oily eye make-up remover is used for removing waterproof mascara. Non-oily make-up remover is used around sensitive eyes or on clients who wear contact lenses or semi-permanent individual lashes.

Toning

Astringents usually contain a high proportion of alcohol which has a drying effect on the skin. Witch hazel is a common ingredient in astringents along with other antibacterial agents.

Exfoliation

An exfoliating product is used after toning to remove dead skin cells and other debris from the surface of the epidermis. The shedding of dead skin cells occurs naturally and is known as desquamation. The use of an exfoliating product speeds up this process. The skin is left feeling smoother and looking brighter. Some exfoliating products contain man-made spheres of plastic in a cream or lotion, whilst others are made up of natural ingredients, such as finely crushed nut shells or grains. The product is massaged over the face and neck area before being removed with sponges and warm water.

Mask

A mask is applied after the facial massage. Masks are usually categorised into setting or non-setting types. The action of the mask is dependant on the ingredients; they can cleanse, hydrate, soothe and refine the skin. Clay masks are suitable for use on oily skin types as they deep cleanse the skin and assist in removing impurities.

Moisturiser

Moisturisers are applied at the end of the facial routine. They form a barrier that maintains the skin's hydration levels. A good moisturiser will also protect the skin from nature's elements, shielding the skin from the wind, cold and rain as well as other environmental factors such as central heating. It will also slow down the appearance of lines and wrinkles as we age.

A moisturising milk or lotion is recommended for use on oily skin types as there is a higher proportion of water contained in it than a cream



Skin Type: Combination

Skin Structure

Typically oily around the chin, nose and forehead (T-zone). Rest of the face and neck is usually dry. However, this skin type can be a mixture of any two or more skin types.

Characteristics

Typically pores in the T-zone are enlarged, and small to medium in the cheek. Moisture content is high in oily areas, and poor in dry areas. Texture is coarse and thick in the T-zone and thin in dry areas. Oily skin is sallow, whilst the dry area may be sensitive, with high colour. Skin tone is good in oily areas, and poor in dry areas. Pigmentation is uneven, and there may be blemishes in the oily areas. The most common skin type.

Cleansing

The choice of cleansing product must be appropriate to the combination of the different skin types present.

Eye make-up must be removed using either a non-oily or oily eye make-up remover. Oily eye make-up remover is used for removing waterproof mascara. Non-oily make-up remover is used around sensitive eyes or on clients who wear contact lenses or semi-permanent individual lashes.

Toning

The choice of toning product must be appropriate to the combination of the different skin types present.

Exfoliation

An exfoliating product is used after toning to remove dead skin cells and other debris from the surface of the epidermis. The shedding of dead skin cells occurs naturally and is known as desquamation. The use of an exfoliating product speeds up this process. The skin is left feeling smoother and looking brighter. Some exfoliating products contain man-made spheres of plastic in a cream or lotion, whilst others are made up of natural ingredients, such as crushed nut shells or grains. The product is massaged over the face and neck area before being removed with sponges and warm water.

Note: It is fine to apply an exfoliating product to normal, oily or dry areas of the face and neck. However, it should not be used on areas of the skin that show signs of sensitivity or vascular lesions.



Mask

The choice of masks applied to a combination skin must be appropriate to the combination of the different skin types present.

Moisturiser

The choice of moisturiser applied to a combination skin must be appropriate to the combination of the different skin types present.

Skin Type: Sensitive

Skin Structure

Sensitive skin reacts more quickly to external factors such as the wind, sun and cold. The skin can be flaky and often appears red and blotchy.

Characteristics

The pores can be tight and the skin itself may feel warm.

Cleansing

It is important to choose a cleanser that is specifically formulated for sensitive skins. It should be hypoallergenic, meaning one that does not contain any known allergens such as lanolin, mineral oil or perfumes. If the skin is very sensitive the client should be patch tested with all products used during the facial treatment prior to the first appointment.

Eye make-up must be removed using either a non-oily or oily eye make-up remover. Oily eye make-up remover is used for removing waterproof mascara. Non-oily make-up remover is used around sensitive eyes or on clients who wear contact lenses or semi-permanent individual lashes.

Toning

Skin fresheners can also be used on sensitive skins.

Exfoliation

You should not carry out exfoliation treatments on very sensitive or vascular skins.

Mask

A mask is applied after the facial massage. Masks are usually categorised into setting or non-setting types. The action of the mask is dependant on the ingredients; they can cleanse, hydrate, soothe and refine the skin. Cream or gel masks can be applied to sensitive skin types.



Moisturiser

Moisturisers are applied at the end of the facial routine. They form a barrier that maintains the skin's hydration levels. A good moisturiser will also protect the skin from nature's elements, shielding the skin from the wind, cold and rain as well as other environmental factors such as central heating. It will also slow down the appearance of lines and wrinkles as we age.

It is important to choose a moisturiser that is specifically formulated for sensitive skins. It should be hypoallergenic, meaning one that does not contain any known allergens such as lanolin, mineral oil or perfumes.

Skin Type: Acne

Skin Structure

Acne occurs during puberty and normally improves between the ages of 20-25. Increased sebum production can result in blemishes.

Characteristics

The pores are enlarged, skin appears thickened and pustules, comedones, sebaceous cysts, papules can be present. Scarring may also occur. If the problem is very severe the client should be referred to their GP for advice prior to treatment commencing. You should not massage over outbreaks of pustules or painful, inflamed skin.

Cleansing

Medicated cleansing lotions or gels that do not contain oil are most suitable for acne sufferers.

Eye make-up must be removed using either a non-oily or oily eye make-up remover. Oily eye make-up remover is used for removing waterproof mascara. Non-oily make-up remover is used around sensitive eyes or on clients who wear contact lenses or semi-permanent individual lashes.

Toning

Astringents usually contain a high proportion of alcohol which has a drying effect on the skin. Witch hazel is a common ingredient in astringents along with other antibacterial agents.



Exfoliation

An exfoliating product is used after toning to remove dead skin cells and other debris from the surface of the epidermis. The shedding of dead skin cells occurs naturally and is known as desquamation. The use of an exfoliating product speeds up this process. The skin is left feeling smoother and looking brighter. Some exfoliating products contain man-made spheres of plastic in a cream or lotion, whilst others are made up of natural ingredients, such as finely crushed nut shells or grains. The product is massaged over the face and neck area before being removed with sponges and warm water.

Mask

A mask is applied after the facial massage. Masks are usually categorised into setting or non-setting types. The action of the mask is dependant on the ingredients; they can cleanse, hydrate, soothe and refine the skin. Clay masks are suitable for use on clients who suffer from acne as they deep cleanse and tighten the pores of the skin and assist in removing impurities.

Moisturiser

Hydrating lotions may sometimes need to be applied to acne skin types in order to rehydrate certain areas of the face and neck. Acne sufferers do tend to use harsh products on a regular basis to combat greasiness and these can strip the skin and result in dehydration. Some hydrating products may have medicating properties to combat outbreaks.

Treatment

When the client enters the treatment room you should advise them to remove any clothing and accessories that your products may come into contact with during the treatment, as this will prevent them from being damaged. You should provide the client with a safe place to leave these.

Advise the client how to position themselves on your couch and make sure there are towels or blankets available to protect their modesty. This will ensure that the client feels confident and comfortable. You should then leave the room while the client undresses and covers themselves on the couch.

Ready For Treatment

When you return to the treatment room, ensure the client is comfortable and covered. You should try to make sure that the clients hair is protected with a headband or towel. Once the client is on the couch and your lighting is correct, you will be able to complete a double cleanse and tone of the skin before beginning a detailed analysis of the client's skin.



The Routine

There are certain processes that should be included in most facial routines.

These are:

Cleansing

Cleansing is one of the first things you should do in a facial treatment as it prepares the skin for further services. It removes grease, make-up and other pollutants, allowing you to assess the skin properly. Perform an initial cleanse to remove superficial dirt and make-up. At this point it would be wise to review the cleansing product chosen to ensure it really does match and is most suited to the look of the client's skin type. If not, it should be exchanged for a different cleanser which is more appropriate, for example, a lotion-based product designed for an oily skin may be substituted for that of a cream-based one if the skin actually appears to be more dry, as make-up may hide a true skin type.

Cleansing promotes and maintains healthy skin, and removes substances such as sweat and sebum which could cause blemishes, congestion and irritation. Your cleanser should be oil and water soluble and could be either a milk, cream, lotion or foam. You should also make sure that it is easy to remove. As the skin is slightly acidic, any alkali will strip the skin of sebum, and so the cleanser should be pH balanced to prevent this. The pH scale stands for potential hydrogen and is used as a measure of the acidity or alkalinity of a product. A scale from 1, being extremely acidic, to 14, being extremely alkali, is used. Substances with a pH of 7 are neutral. To avoid skin irritation a product should ideally have a pH of between 5.5 to 6, to match the acid mantle of the skin. In this way the products will not dry out the skin. A separate product designed specifically for the eyes and lips should be used to cleanse these areas, as the skin is thinner and more delicate.

The process of toning removes any remaining cleanser, grease or skincare preparations from the skin's surface. Toner is usually an astringent and so creates a tightening effect on the skin as the pores close, reducing the flow of sebum. It also cools the skin as it evaporates from the skin's surface.

Toning will help to restore the correct pH balance to the skin.

Skin Analysis

You will need to have thoroughly cleansed the skin before you do this to remove any make-up, pollutants or other skincare products. This will enable you to determine their skin type and the condition of their skin, which should be written onto their record card. You will then be able to select the most suitable for the client and the techniques you will be using. You should then to your client so they understand what you will be doing during the treatment and do not get any surprises.



Exfoliation

Exfoliation is the process of actively removing dead skin cells, grease and debris, leaving new skin cells exposed and improving the appearance of the skin. This procedure will mean that other skincare products are then more easily absorbed.

Conditions such as hyperpigmentation are improved by exfoliation as the pigmented surface skin cells are removed.

Types Of Exfoliants

There are three main types of exfoliants: pore grain, clay and mechanics. Pore grain exfoliants have a base of cream or liquid containing tiny particles of polished plastics, crushed nuts or particles which can be gently massaged over the skin's surface having an abrasive effect in removing dead skin cells.

Alternatively, enzyme based products may break down the intercellular cement of the skin cells effectively digesting the dead cells and allowing the debris to be wiped away. Clay exfoliants have a clay base which can be applied like a mask and gently stroked away, whilst mechanical exfoliation brushes the skin's surface with soft, rotating bristles.

It should be remembered that exfoliation is not suitable for clients with sensitive skin, those suffering with vascular skin disorders or those with pustular and blemished skin. However, exfoliation is excellent for mature skin in need of rejuvenation.

Massage

Massage is the manipulation of the soft tissues using the hands and is often a popular element of a facial treatment. It will not only stimulate or relax the client, it can also improve the appearance of the skin as further dead skin cells are shed.

During a massage, the muscles receive an improved supply of oxygenated blood which warms the tissues and brings about a feeling of relaxation. Lymphatic circulation and venous blood circulation both increase and therefore perform their tasks more efficiently. A relaxing effect is generally achieved.

Massage Techniques

The types of massage techniques used will have varied effects, and the speed and depth of pressure can be altered to meet the clients requirements. There are four main types of massage movement known as effleurage, petrissage, tapotement and vibrations.



Effleurage

Effleurage movements are light strokes with even pressure which induce relaxation by being applied in a continuous manner. All pressure is performed toward the heart or nearest lymph node, with a reduction in pressure as the movement is brought back to the start.

Petrissage

Petrissage is performed with a deeper range of movements on areas which have been previously 'warmed' by effleurage. Using fingers and thumbs the tissues are lifted away from the underlying structures. This level of pressure is intermittent and the movements include picking up, rolling, kneading, knuckling, pinching, frictions and scissoring.

Tapotement

Tapotement is made up of brisk tapping or clapping movements, but these should only be performed lightly in facial massage. They are the most stimulating of all the massage movements and are designed to achieve an erythema, bringing an increased surge of blood and lymph to an area; it is thought to help to tighten and firm slack muscle and facial contours.

Vibrations

Vibrations are typically applied to nerve pathways and nerve path endings and are produced by the rapid contraction and relaxation of the muscles of the therapists arm, which results in a fine, trembling movement. Vibrational movements include static vibrations when the pads of the fingers are placed on the nerve and the vibratory effect is applied in one area. Running vibrations apply the vibratory effect along the nerve path.

Oil And Cream

You may wish to use an oil or cream as a medium during massage to make the movements easier and the routine flow. When selecting the product you should make sure it is suitable for the clients skin type, for example, adding oil to an already oily skin will only make the condition worse. You should also ensure that the product is easily absorbed or removed from the skin before you move on to the next stage of your treatment. Client preference should also be a factor in your choice of product.



Masks

Once the remnants of the massage medium have been removed a mask is applied. Masks are often used during facial treatments as they contain ingredients for deep cleansing, toning, nourishing or refreshing. There are a variety of setting and non-setting masks available. Clay, peel-off and thermal masks are all setting masks which should be applied in a thin layer and allowed to dry. Clay masks absorb sebum and leave the skin cleansed whilst peel-off masks can be made from gel, latex or paraffin wax and insulate the skin. Thermal masks consist of various minerals and warm when they make contact with the skin, causing the pores to enlarge. Thermal masks help to cleanse the skin and are most suitable for normal skin, or congested, oily skin with open pores.

Non-setting masks are warm oil, gauze, natural or cream masks. They may become firm but do not tighten in the way that setting masks do. Warm oil masks soften the skin and restore the natural water balance, which is particularly suitable for mature, dry or dehydrated skin.

Gauze masks are cut to cover the face and neck, leaving holes for the eyes, nose and mouth. They are soaked in warm oil before being applied to the skin. Natural masks are made from natural ingredients which are rich in vitamins and minerals and are chosen to meet the requirements of the skin type being treated. Cream masks have a softening and moisturising effect on the skin and tend to contain biological extracts or chemical substances which will treat various skin types.

Applying A Mask

Facial masks should be applied evenly and neatly with a sterilised brush or spatula, and they should be kept clear of the nostrils, lips, eyebrows and hairline. When applying a mask, start with the neck before moving up to the chin, cheeks, nose and forehead. Unless specifically designed for the eye area, masks should only be applied up to the orbital bone of the eye socket, as the ingredients will be too strong for this delicate skin.

How effective the mask is can sometimes be determined by the amount of time it is left on the skin, but usually they are left for between 10 and 20 minutes. You should always follow the manufacturers instructions when applying any kind of mask, and it should be removed with damp sponges or warm towels.



Moisturising

The skin requires moisture to stay soft and supple, but the natural levels may become disturbed. A moisturiser will help to maintain the natural balance of the skin by locking sebum moisture into the tissue, whilst its oil content prevents water moisture loss and dehydration. Moisturisers have a number of different functions including protecting the skin from environmental damage, softening the skin, plumping the skin tissue to reduce the appearance of wrinkles and providing a barrier between the skin and cosmetics.

Moisturisers

Many moisturisers will also contain additional ingredients which will improve the condition of the skin, so you may need several different examples to cater for different skin needs. Most moisturisers also now include ultra-violet filters to protect the skin from sun damage.

Benefits Of A Steam Vapour Unit

A warming effect on the skin helps in cleansing and stimulating and is often incorporated into a treatment after the cleansing process to make it more receptive to the subsequent treatments. Steam is an ideal method of warming the skin and is usually provided by an electric vapour unit. This unit heats distilled water and the subsequent steam is applied as a fine mist over the face. During warming, the pores are opened, the blood and lymphatic circulation is stimulated, the surface cells of the epidermis soften and the skin colour is improved.

This equipment is ideal to use prior to comedone or milia extractions and in conjunction with some exfoliating products. Most units have the ability to combine ozone with the steam. Ozone has a distinctive but not unpleasant smell and is beneficial to oily, congested or blemished skins, as ozone has germicidal, drying and healing properties. It also helps to normalise the pH of the skin.

Steam Vapour Unit - When Is It Not Safe?

Steam vapour units can be an expensive purchase but they making controlling the intensity of the warming effects much easier. The units are not suitable for clients suffering with respiratory problems, vascular skin disorders, claustrophobia, excessively dilated capillaries, reduced sensitivity, diabetes, rosacea or dilated capillaries. You should always ensure that you follow the manufacturers instructions and use the machine safely.



In addition, steaming with ozone is not advisable for expectant mothers, asthmatic clients as it may affect their breathing or epileptics as it could trigger a convulsion. It should also be used in well ventilated rooms, as it is thought to have carcinogenic properties, but is safe providing that manufacturer's instructions have been followed.

Towel steaming has the same benefits as a steam vapour unit, but can be more suitable for mobile therapists or those with restricted space. Several clean towels should be heated in a bowl of hot, clean water or specialised unit. These towels should then be gently applied to the face after you have checked that the temperature is suitable and the client is not claustrophobic.

Comedone Extraction

The process of comedone extraction may not be necessary for every treatment, but requires a special extractor tool. The loop end of the tool should be used to apply gentle pressure around the comedone, causing it to leave the skin. You may need to apply additional gentle pressure using your fingers at the sides of the comedone to ensure its full removal. In this situation, protective gloves should be worn, ideally nitrile to avoid latex allergies or intolerances, and tissue should be wrapped around the pads of the index fingers. A squeeze and roll movement should be utilised to encourage the release of the sebum.

Specialist Products

There are also a number of specialist products which you may wish to incorporate into your facial treatment, depending on your clients needs. These include:

Eye Creams

Eye creams are used in addition to your other products as they are specially designed to treat the delicate area of skin around the eye. They can help to soften and prevent lines and wrinkles, and also prevent the stretching or damaging of the skin. They can be used to lighten dark patches or tone and tighten the area respectively.

Specialist Products

Eye Gels

Eye gels can also help to reduce the appearance of lines as the decongest puffiness. They are generally used to soothe and cool the skin, revitalising the eyes.



Lip Balms

Lip balms soften and moisturise the lips, whilst also preventing chapping. They can help to reduce the appearance of fine lines around the mouth and are a good base for lipstick.

Acne Products

As a skin specialist, you are likely to have a number of clients with difficult skin conditions, including acne. Many skincare manufacturers now make their own range of products designed to combat this problem which often contain agents that help to control oil levels and remove excess sebum. They can also help to reduce the redness and irritation commonly caused by acne. Talk to your skincare supplier and see what products they can offer you.

Neck Creams

Neck creams are usually very rich and contain skin conditioning supplements such as collagen to help maintain moisture levels. You should apply these creams in an upward and outward direction with your fingertips never allowing the skin to be dragged down wards.

Facial Technique - Cleanse, Tone, Steam and Extract

Superficial Cleanse

Eyes

Use an eye make-up remover suitable for the client's skin to cleanse one eye at a time. With one hand, support and lift the eye tissue at the eyebrow while the other hand uses the ring finger to gently apply the eye make-up remover. Wipe over the eye with a clean damp cotton wool pad, using a clean side each time you wipe. Fold a circular damp cotton wool pad in half and place under the lower lashes. Apply a small amount of eye make-up cleanser to a damp cotton bud and stroke downwards over the lashes in order to remove any mascara. Wipe the cotton bud gently underneath the lashes to remove any last traces of make-up whilst supporting the tissue at the outer corner of the eye.

Using clean damp cotton wool, remove the product. Remember to use a fresh piece of cotton wool and a fresh cotton bud when treating the second eye.

Repeat the process on both eyes until the eye area is clean and free from make-up.

Lips

Apply a small amount of the product onto the back of your hand. Using the same hand, support the left side of the client's mouth. With the other hand, apply the product using small circular movements from left to right across the upper lip and then in the opposite way along the lower lip.



Supporting the corner of the mouth, use a clean damp cotton pad to remove the cleanser by wiping across the lips. Use a clean side of cotton wool each time that you wipe until the lips are totally clean.

Repeat the cleanse as often as necessary until both the lips and the cotton wool pad shows clean.

Face

Using a cleansing product appropriate for your client's skin type, place enough of the product to cover the face and neck into one hand. Massage the hands together to warm the product.

Clasp the fingers together at the bottom of the chin and unlink them as you move up the jaw. Stroke inwards over the upper lip and then outwards towards the cheekbones, bringing the hands together either side of the nose and then up onto the forehead, pointing your fingertips downwards and keeping your palms in contact with the skin. Repeat this action once more.

Massage the product into the skin using your fingertips to perform light circular movements. Begin at the base of the neck and finish at the forehead.

Remove the cleanser thoroughly using clean damp cotton wool, stroking upwards and outwards over the surface of the skin. Repeat removal as often as necessary using clean damp cotton wool each time. You can also use facial sponges, facial mitts or hot towels to remove the product.

Deep Cleanse

Apply a suitable cleansing product for your client's skin type in the same way as for a superficial cleanse.

Starting at the clavicle, use your fingertips to stroke up both sides of the neck then draw your fingers outwards to the top of the jaw bone. From here, stroke back down the neck to the position that you started in. Repeat this four times.

Stroke the skin of the neck using small circular movements, taking care to avoid putting pressure on the throat area.

Move your fingertips outwards again towards the angle of the jaw. Rest your index fingers one either side of the jawbone and place your middle fingers beneath it. Move the right hand over the chin and then back to the starting position and repeat this with the left hand. Repeat this five times.



Use small circular movements with the pads of your fingers on the chin and then move upwards from the corners of the mouth to the corners of the nose, across the cheeks and back down again. Work over both sides of the nose, being careful not to apply too much pressure.

Using the pads of the fingers, begin at the inner corner of the brow bone and then slide to the outer corner and around and under the eyes in a circle before returning to the starting position. Repeat this five times.

Use both of your hands to perform small circular movements across the forehead. Repeat this five times.

With the index and middle fingers of each hand separated stroke over the forehead using a crisscross movement.

Slide the index finger up to the inner corner of the eyebrow and lift it slightly before lifting the centre of the eyebrow with the middle finger. Then lift the outer corner of the eyebrow using the ring finger before sliding the ring fingers down and beneath the eye. Repeat this five times.

Apply slight pressure at the temples with both palms to indicate that the deep cleansing sequence is complete.

Tone

Warn the client that you are now going to remove the product and that the toner may be cold. Apply toner to two pieces of clean damp cotton wool and then wipe these gently up and outwards over the whole of the neck and face until all traces of the cleanser have been removed.

After application of the toning lotion, immediately blot the skin dry with a soft facial tissue in order to prevent the toner evaporating from the skin's surface.

Skin Analysis

After the toning procedure, analyse the client's skin using a magnifying lamp in order to identify the client's skin type and any skin conditions, congestions or problems requiring attention. Findings from the skin diagnosis should be recorded on the client's record card. This will enable you to determine what the correct form of treatment should be and also the best products to use on the client's skin.



Skin Analysis

The client should be semi-reclined and not lying flat in order for the face to fall naturally. The skin diagnosis should incorporate not only what the skin looks like but also what it feels like. Look at all areas of the face, starting with the neck before moving on to the chin, the cheeks, the nose and the forehead.

Exfoliate

Apply the exfoliant and warn the client that they may experience a mild stinging sensation which will disappear quickly upon removal. The exfoliating product should be massaged onto the neck and face using the pads of the fingers in circular movements. Once the product has been worked into the skin, it can be left for a few minutes and then removed using damp cotton wool pads.

Skin Warming (Hot Towels And Steaming)

Hot Towels

A clean damp towel can be heated in a hot towel cabinet. The cabinet is usually set at a pre-set temperature of 72 Degrees Celsius. When removing the towels from the cabinet ensure that you use the tongs provided. Always open out the hot towel fully prior to applying to the client's face. Always warn the client when you are about to place the towel on their skin, explaining that it will feel warm.

This treatment is not suitable for clients who suffer from claustrophobia. Reassure the client that you will stay with them whilst the towel is in place and that the towel can be removed at any time.

Prior to applying the hot towel, you must cover the client's eyes with clean damp cotton wool pads. Place the towel under the chin and up over the cheeks and forehead, bringing it together at the top but leaving the mouth and nose uncovered to permit the client to breathe. Leave in place until the heat from the towel has dissipated.

Steaming

Steaming is an optional part of the facial routine and is an alternative to hot towels. Steaming takes place directly after the deep cleanse or exfoliating treatment. Depending upon the product used it may be used in conjunction with the exfoliant.

Again, protect the eyes with clean damp cotton wool pads and any other areas of the face and neck that you want to protect from the steam treatment.



Always turn on the steamer away from the client and then, keeping it at a safe distance, place it so that the steam falls up the face. Check with the client to make sure it is at a comfortable temperature. You can carry out steaming for as little as five minutes or as long as 15 minutes depending on how much the skin needs to be softened prior to the removal of skin blockages.

Remove Skin Blockages

Removing skin blockages should be carried out after the skin has been softened by the deep cleanse or after any skin warming treatments, if these have been included.

Wearing gloves cover your two index fingers with clean facial tissues. Roll and squeeze the area around the blockage between the two fingers in order to gently force the contents out of the pores without breaking the surrounding skin. Following the extraction, wipe over the area with a soothing antibacterial product in order to prevent infection through the pore.

Comedone Removal

Use the loop end of the comedone extractor tool to apply gentle pressure around the comedone. This should cause the comedone to leave the skin. Protect the client's hair using a towel. Always turn the steamer on away from the client. If it does not come away easily you may apply pressure with the fingers at the sides of the comedone. Wrap a tissue around the pads of the index fingers in order to do this.

Milium Extraction

Hold the point of the extractor tool on the surface of the skin and superficially pierce the epidermis. This creates an opening for the sebaceous substance to pass to the surface of the skin. Use either the comedone extractor or your gloved index fingers with tissue wrapped around them to apply gentle pressure. You may wish to apply a mild antiseptic soothing lotion afterwards to help the skin to heal.

Facial Technique - Massage

Facial Technique

The massage should usually take 15-20 minutes and is made up of four different massage movements. Effleurage – A light stroking movement applying even pressure in a rhythmical, continuous way which encourages relaxation. These movements are used to begin, link and complete the massage sequence.



Petrissage – Kneading movements which apply firm yet gentle pressure.

Percussion (tapotement) – Brisk, stimulating, light tapping movements are performed at a consistent rhythm.

Vibrations – Rapid contraction and relaxation of muscles in the therapist's arm produce a fine trembling movement which stimulate the skin in order to improve its functioning.

Apply the chosen massage medium to the chest, around the shoulders, and upwards over the neck and face using effleurage movements.

Once the medium has been applied, commence the massage of the neck using alternate hands to perform effleurage movements up each side of the neck towards the jaw. Then roll the hands alternately over the chin, across the side of the face and up on to the cheek. Do this on one side of the face and then repeat on the other side. Using the middle finger, perform alternate strokes across the upper lip and then up either side of the nose before stroking up the bridge of the nose and up onto the forehead. Sweep down with a superficial stroke back to the starting position. Repeat this sequence five times.

Ensure the effleurage movement is continuous and that contact with the client's skin is not broken. Check that the pressure is comfortable for the client throughout.

Starting from underneath the clavicle, use a firm effleurage movement to sweep across the pectoral muscles, round the cap of the shoulders, across the deltoid and the trapezius muscles. Sweep both hands up the back of the neck to the base of the skull. Lighten the pressure and allow your hands to travel down each side of the neck back to the starting position. Repeat this sequence six times.

Gently turn your client's head to the right. Support the client's right side of the head with your right hand whilst the left hand is placed beneath the left clavicle. Sweep your hand across the left side of the chest and around the cap of the shoulder and up the back of the neck to the base of the skull. Repeat this sequence four times.

Using the pads of the fingers, press firmly into the muscles in the back of the left side of the neck. Using a fine trembling vibration movement, work from the bottom of the neck up to the base of the skull.

Repeat this movement twice before repeating both sequences on the right shoulder and neck.



Return the client's head to the centre. Place both hands in the start position under the clavicle and apply digital kneading across the décolleté, starting from the centre and moving outwards on both sides simultaneously. Repeat this sequence twice.

Starting with your hands behind the shoulders, knead the deltoid, stroking around the back of the deltoid round to the front. Repeat this movement six times. Place both your hands on to the trapezius muscle at the back of the shoulders. Use the pads of the fingers to knead the upper fibres of the trapezius muscle four times. Place the fingertips on the front of the shoulders and the thumbs on the upper fibres of the trapezius muscle. Knead the area using the thumbs.

Return to the start position underneath the clavicle. Using the knuckles of both hands, gently knead in a circular motion across the pectorals, moving outwards, around the deltoid and then round the back of the shoulders, working over the trapezius. Repeat this sequence twice.

Working up the face, use alternate hands to effleurage up the left side of the neck, lifting the cheek upwards and then moving onto the right side, repeating the movements.

Using the thumbs, knead around the chin, with the fingers lightly supporting the underneath of the jaw. From the chin, use your thumb and fingers to knead across the jaw, outwards towards the ears and back to the chin. Repeat this sequence four times.

Use the fingertips to massage from the corners of the nose up, over the cheeks, towards the temples. Repeat this sequence twice. Using the knuckles, gently massage from the corners of the mouth, across the cheek and the jaw in a circular movement. Repeat this sequence four times. Using the index finger, knead either side of the nose, starting at the outer corners and travelling up to the bridge of the nose.

Slide up the sides of the nose to the inner corners of the eyes. Using the index finger, lift the inner corner of the brow upwards, sweeping out across the brow bone to the outer corner of the eye and back underneath the eye to the inner corner. Repeat this circular movement twice.

Working underneath the brow line, use the index and middle finger of each hand to apply gentle intermittent pressure along the brow at intervals towards the temple before sliding underneath the eye and back to the inner corner of the brow. Repeat this action four times.



Move the hands to the outer edges of the forehead and massage the temples using the index and middle finger to perform circular movements. Repeat this movement six times. Use the fingertips to knead in a circular motion from one side of the forehead to the other and back. Repeat this action twice. With alternate hands, use effleurage movements from the top of the bridge of the nose up the forehead. Repeat this four times.

Massage the sides of the temples using the heels of the hands in a circular motion. Repeat this action four times.

Returning to the start position underneath the clavicle, use a firm effleurage movement to sweep across the pectoral muscles, round the cap of the shoulders, across the deltoid and the trapezius muscles. Sweep both hands up the back of the neck to the base of the skull. Lighten the pressure and allow your hands to travel down each side of the neck back to the starting position. Repeat this sequence five times.

Draw the hands up to the forehead and place the palm of one hand over the other. Apply slight pressure before moving slightly further up the forehead and applying pressure again.

Move the hands to the sides of the face and hold them there for a few seconds to indicate the facial massage is complete. Remove one hand and then the other.

Facial Technique - Mask, Moisturise And Eye Care

Facial Technique

A face mask is an intensive treatment which is incorporated into the facial routine after the massage. There are a wide variety of masks available that have a range of different purposes. These may be setting, which turn hard whilst on the face, or non-setting, which remain soft.

Protect the client's hair using a towel before applying the mask using a sterilized mask brush or a spatula. Apply to the neck first followed by the chin, cheeks, nose and forehead. If you wish to use more than one mask in order to treat different skin conditions, you can layer them, taking care to apply the one that will need to be left on the longest first. Apply it evenly so that it can work to its full effect on the whole of the face. Do not apply too thickly as this will make removing it very difficult as well as wasting some of the product, only the product in direct contact with the skin has any effect. Keep nostrils, lips, eyebrows and the hairline clear and free of the mask and protect the eyes using clean damp cotton wool. Wash your hands after application.



Move the hands to the outer edges of the forehead and massage the temples using the index and middle finger to perform circular movements. Repeat this movement six times. Use the fingertips to knead in a circular motion from one side of the forehead to the other and back. Repeat this action twice. With alternate hands, use effleurage movements from the top of the bridge of the nose up the forehead. Repeat this four times.

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Leave the mask on for the recommended time outlined in the manufacturer's instructions or the time needed for the effect required. Take into account the sensitivity of the skin and the comfort of the client. Whilst the mask is on, you could use the time to massage the client's hands or feet.

When the mask has been on for the allocated time, remove the eye pads first before removing the mask using damp make-up sponges or damp cotton pads. After the mask has been removed, ensure there are no traces of it left on the skin before applying toner using clean damp cotton wool. Use a facial tissue to blot the skin dry.

Moisturise

Moisturising is usually the final stage of a facial routine. Remove moisturiser from its container using a disposable spatula and place it on the back of your hand.

Take it on to the fingertips of the other hand.

Apply using strokes outwards along the jaw, in over the upper lip and out and up over the nose to the forehead. Blot any excess moisturiser from the skin using a facial tissue.

Eye And Lip Care

Eye Gel

Support the eye tissue at the eyebrow using the ring finger of one hand whilst you use the ring finger of the other hand to tap the product around the eye, using a large circular motion.

Lip Balm

Stroke over first the top lip and then the bottom lip using the ring finger.

Treatment Adaptation and Aftercare

Treatment Adaptation

The facial is not a treatment which should be left to stagnate on your treatment menu. It can be modified and updated in many different ways to offer a more relaxing or remedying treatment which many clients will enjoy. You should not be afraid to try new things as part of your facials, as giving the client more choice will mean that you can cater for all. If you are still stuck for ideas, contact your skincare suppliers as many will have specialist lines.



Male Clients

As male skin can be quite different to female skin it should be treated differently during a facial treatment. Male skin tends to have a more acidic surface, and so the products that you use need to compliment this. It may be worth contacting your skincare supplier to see if they have a specialist range that caters for male skin. You should remember that the process of shaving can sensitise and dry the skin, so ensure that you use products which will help to deal with this. As the ageing process can appear to be slower in male skin you will not need to concentrate on anti-ageing products and techniques as much, unless this is of concern to the client.

Luxury Facial

It is possible to list a number of different facials on your treatment menu which accommodate different time scales and price points. As your standard facial may last anywhere between 30 minutes and an hour, try putting together a luxury facial which lasts for longer. This may involve a longer concentration on each section of the facial, or include elements that you would not normally offer. You could consider offering extra massage as part of the treatment, focusing on areas such as the scalp, shoulders, arms, hands or feet.

Targeted Facials

A targeted facial could be put together to treat specific conditions. This could include anti-ageing, acne or dehydrated skin. You should modify your routine and products according to the client, and try and ensure that you have specialist product lines that deal with the problems you treat.

Aftercare

You should always ensure that you give clear and thorough aftercare advice to your client at the end of every treatment, and where possible this should be given in writing. This can include advising the client about any retail products which may be beneficial to them. It also ensures that the client achieves maximum benefit from the treatment and helps to maintain the effects for longer.

Written Aftercare Advice

Aftercare is very important in order to prevent sensitivity or problems such as contra-actions after the client has left your treatment room. You should make sure you give any advice and recommendations accurately and constructively. Make sure the client understands the aftercare advice, and always provide a written explanation for extra clarity. You should make sure that the aftercare advice you offer is specific to your clients needs, based on the treatment they have just had. Always ensure that the client has plenty of opportunity to ask any questions about their treatment, skin, or aftercare.



Recommend Products

After the treatment has been completed you should explain to your client what products you have used and why. You can then go on to recommend products that would be suitable for them to use at home and advise them what their full home-care routine should be. This could involve giving them samples if your skincare supplier provides them, but be sure to clearly explain how and when to use each product.

You should also provide advice on contra-actions that may occur after the treatment, or when using home-care products. You should outline what they may be, how to prevent them and what to do if they occur.

You should also advise your client on what products they can and cannot use immediately after the treatment. You should explain that it is not recommended to apply make-up for up to eight hours as the cosmetics may cause congestion.

You should also inform your client how long they should leave in between appointments. This will largely depend on the condition of their skin, and their reason for booking the treatment.

