

PEDICURING THE CANCER CLIENT by Mórág Currin, Founder of Touch For Cancer Online

Cancer diagnosis has a profound effect on most people diagnosed with this disease. Many people want to continue their lives as normal, and to continue visiting the spa and to continue having pedicures, especially during the summer months.

If you are currently undergoing cancer treatment, you would need to ensure that a few issues are in place before you can have a pedicure. ***The most important thing to remember, is your safety and to ensure that you will have no negative effects from having a pedicure.***

If you are undergoing chemotherapy, or immune suppression for bone/stem cell transplant, it is not advisable to have a pedicure, unless you have permission from your medical professional.

If you have just had surgery or radiation to a localized area of your body (and not in the lower leg/foot area), then you can proceed with a pedicure, but still be aware of some of the points being made below for those having chemotherapy, or who may be immune suppressed.

SANITATION AND INFECTION CONTROL

Ensure the spa or salon you are going to has very strict protocols on their sanitation and infection control. Many salons and spas that offer cheap prices and aim on drawing a high volume of clients are places to be avoided at all costs as they are very possibly not complying with sanitation procedures to ensure your safety.

- Do the salon or spa staff ask pertinent questions about your health issues or have you fill in an Intake Form? Questions such as the following should be asked of you prior to treatment?
 - Are you currently undergoing cancer treatment?
 - What side effects are you currently experiencing in your legs and feet from cancer treatment?
 - Do you have any other information that I need to know about?
 - Am I able to contact your medical doctor to get permission to perform this treatment?
- Do they sanitize the equipment and foot bath after each client, or do they just sanitize at the end of each day?
- Is the sanitation and sterilization equipment visible to you?
- Are you able to see that the implements are in fact, washed with soap and hot water, and then sterilized before use?
- Are the implements sitting out in the open for dust and other debris to settle on them?
- Are the pedicurists wearing gloves while working on your legs and feet?
- Are they new gloves directly from the box and are they disposing of the gloves directly into the trash?

Sanitation procedures for many spas and salons fall short of the requirements for immune suppressed or 'at risk' clients so there is a risk for infection during chemotherapy or while immune suppressed and this can be detrimental. Any equipment or implements used need to be cleaned properly and sterilized and used with extreme caution. Ideally, salons and spas should use EPA-registered hospital disinfectants, and our sanitation procedures meet or exceed OSHA (Occupational Safety and Health Administration) standards for maintaining a clean environment and preventing the spread of germs and disease. All implements should be sterilized using the same techniques a hospital uses to sterilize surgical instruments.

Some medical professionals will advise patients to take their own implements to a spa and only have their own equipment used on them. Some spas that will refuse to work with the patient's implements, as the patient's implements may not be clean and sterilized, so this situation is going to require some discussion between the parties.

Sharp edged implements or tools that are a possible risk for breaking the skin are not advised, and neither is a Credo Safety Callus Planer that uses blades. Some Credo Planers comes with a rasp attachment which, if used incorrectly can break the skin. Battery or electric operated files or sanders are not recommended.

BENEFITS OF PEDICURES DURING CANCER TREATMENT

While your pedicurist is working on your feet, they are providing many benefits such as:

- They are able to detect any suspicious or unusual looking lesions or moles on the legs and feet
- Removing dead skin and calluses
- Improve their appearance and to hydrate and moisturize them
- Stimulate the blood flow to the feet and legs
- Provide relaxation through massage
- Can provide good listening skills
- Spa fragrances can provide additional euphoric benefits which can affect focus, memory and mood

If you are currently undergoing cancer treatment, you may not have the energy to work with your own feet, therefore having a pedicure with a professional pedicurist will be rewarding. In addition, this can help improve your mood and quality of life.

PRODUCTS TO USE ON THE FEET AT HOME

A basic few products for home care that are recommended for homecare during cancer treatment would be:

Moisturizing balm which is to be used as often as possible to keep the skin moisturized.

Exfoliant a few times a month to removed dead skin buildup (mild scrub or keratolytic based exfoliant with a safe pH of around 3.5-3).

Foot bath to help alleviate aching, tired or sore feet and to revitalize and refresh them.

If you are experiencing HFS, you may find that a cooling balm or moisturizer or cooling foot bath may help soothe the feet and lower legs as they may be feeling hot from this syndrome. Any additional specialty items would be:

Nail softener to help prevent ingrown toenails.

Anti-fungal cream if you are prone to fungal infections.

To avoid any additional dryness or irritating, try and find formulas that do not contain drying ingredients as mentioned earlier in this article.

IMPORTANT CONSIDERATIONS

Chemotherapy does present many more side effects on the hands and feet such as:

- Chemo-induced peripheral neuropathy (CIPN)
- Hand/foot syndrome (HFS)
- Bacterial, viral or fungal infections
- Dryness and sensitivity of the skin
- Nail changes

Chemo-induced peripheral neuropathy (CIPN)

If you are experiencing CIPN it is absolutely necessary to tell your pedicurist about your condition. If you feel burning, numbness and tingling in the feet there is a risk of possible burns, wounds, pain that you cannot feel. Peripheral neuropathy results from some type of damage to the peripheral nerves from some chemotherapy drugs such as vincristine, cisplatin, paclitaxel, etoposide and tenoposide. If you are known to have diabetes, previous chemotherapy, alcoholism or severe malnutrition you may be at risk for CIPN.

Hand/Foot Syndrome (HFS)

Inform your pedicurist if you are encountering HFS, also known as Palmar-Plantar Erythrodysesthesia. HFS can occur with several types of chemotherapy or biologic therapy drugs used to treat cancer. Capecitabine, 5-fluorouracil, doxorubicin and high-dose Interleukin-2 can cause this skin reaction for some people. You need to know that exposure of heat and friction to the soles of the feet result in redness, tenderness, and possible peeling of the soles. This redness can resemble sunburn, in some cases, can be pretty severe. The skin on the feet can become dry and peel, and numbness or tingling can also develop in the area. This condition can be very uncomfortable for you and therefore your pedicurist needs to be informed that vigorous massaging (causing friction and heat) is contraindicated to this condition, however, your legs and feet will need moisturizing. If you are able to tolerate someone touching your feet, the moisturizer will need to be gently patted onto your skin to avoid any friction and heat.

Bacterial, Viral and Fungal Infections

Infections, both bacterial and fungal are more prone to any person with an immune compromised system and who may be undergoing chemotherapy. These infections can occur under the cuticles and in the nail bed. Cuticle nipping or cutting is not acceptable. Removal of hand nails with nail scissors can be done provided it is done with caution. Gloving is imperative for the pedicurist. Just a few of the diseases that can be spread are the wart virus, bacterial skin infections from pedicure baths, methicillin-resistant *Staphylococcus aureus* (MRSA) from surfaces, fungal infections from tools that have been improperly cleaned and athlete's foot from reusing slippers that haven't been properly sanitized. Most common nail infection is onychomycosis which is caused by a fungus. and most frequently affects the nail of the big toe.

Dryness and sensitivity of the skin

Dry skin from chemotherapy drugs can be characterized by mild scaling, roughness, a feeling of tightness, and possibly itching. Lots of moisturizing products are to be used on the skin during a pedicure to help reduce this feeling of tightness.

Stay away from products that contain ingredients that are drying, such as fragrance in creams or lotions. Soaps and 'soap-free' cleansing bars, bubble baths are very drying to the skin, so avoid them and try and use a bath gel instead and use a moisturizer immediately afterwards.

Nail changes

You may encounter several types of nail changes during chemotherapy, of which the most common will be a skin reaction called hyper pigmentation or skin darkening in the nails. Drugs that can cause this skin darkening are: Bleomycin, cyclophosphamide, doxorubicin, fluorouracil, cisplatin, docetaxel, methotrexate, etc. Usually this skin darkening will grow out with the nails.

Beau's lines can occur after a few weeks of chemotherapy, and these will be horizontal depressions of the nail plate. Mee's lines are white horizontal discoloration of the nail plate which involves the entire nail. Leukonychia is white horizontal discoloration involving only part of the nail. Onycholysis is when the toenail separates or loosens from the nail bed and Onychodystrophy is malformation of the nail. All of these skin and nail conditions are temporary and eventually resolve once cancer treatment has been completed and the nails grow out, which can take a few months.

Your pedicurist needs to keep your nails trimmed and kept clean. The same risks can apply and the pedicurist must not do anything to increase the risk for infection. It is not recommended to have nail polish and artificial nails until your nails have grown out and returned to normal.

Lymphedema

Lymphedema is an abnormal swelling condition that may affect one or many body regions. The swelling develops because the lymphatic vessels or nodes have been damaged or were formed incorrectly. Lymphedema can be a side effect of cancer treatment. If a person has surgery to remove lymph nodes, as is common for cancer treatment, or if they have radiation therapy, the damage done to the lymphatic system may result in a back-up of fluid.

Lymphedema can affect any part of the body where lymphatic vessels have been damaged or are not functioning properly. Lymph nodes removed or radiated in the inguinal (groin) area, can create a risk for lymphedema in a leg.

When swelling occurs in the body, and it is not treated, it can get worse over time. If left, changes will occur in the tissues, resulting in scarring and hardening of the tissue. As the waste products back up in the tissue, there is an increased risk of infection because the body cannot process and eliminate bacteria that are accumulating in this area of damaged tissue.

If you experience any symptoms and signs of lymphedema initially they may be very slight and almost unnoticeable. If left untreated, the swelling may get bigger and eventually become permanent. Some or all of the following symptoms may be experienced.

- Feeling of tightness and heaviness in a limb
- Altered sensation, such as pins and needles, shooting pains or feeling of heat
- Joint discomfort due to the swelling, e.g. elbow, knee
- Tenderness in the groin of an affected leg
- Changes in temperature of the limb or affected skin
- Reduced range of movement

At first the swollen area will pit if pressed with a thumb. However, as it becomes bigger and harder it will no longer pit. If lymphedema is left untreated and the swelling gets worse, skin changes may occur. The skin may get very thick with folds, bulges and dry warty spots (elephantiasis, or lymphatic papillomatosis) and make it prone to infection (cellulitis). This is particularly the case if lymph leaks through to the skin. Lymphedema of the legs is often worse than that of the arms as lymphatic drainage from the legs is more difficult. Walking becomes difficult as the patient carries the excess weight.

Pedicurists are to avoid cutting the skin to prevent risk of infections and to be aware of any skin rashes on the foot and leg with lymphedema. Any skin lesions and ulcerations are difficult or can be impossible to heal in a leg that has lymphedema. The skin is to be kept clean to reduce infection and the use of emollients will help to restore and maintain skin suppleness, while keratolytics (peeling agent such as salicylic acid) will remove hard, dead skin.

Should you require any further information regarding this article you can contact Morag Currin directly at: info@touchforcanceronline.com