

# The Foot Guide: How to Become a Successful Pedicure Specialist

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# content

## The Foot Guide: How to Become a Successful Pedicure Specialist

Nail techs are all about education—they are constantly learning new ways to take their clients' manicures to the next level. But what about feet? Pedicures require a different set of skills and foot-care knowledge.

That's why NAILS Magazine has put together this Foot Care Guide. Learn how to step up your foot-care regimen and ensure your clients are getting the best care—from hands to toes!



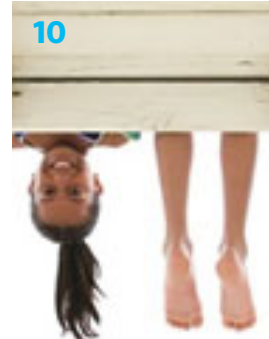
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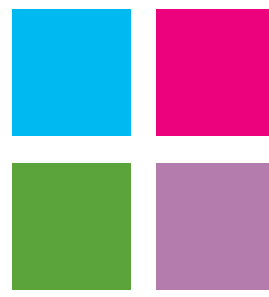
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# 10 Secrets of a Fabulous Pedicure



Is there more to pedicuring than soak, clip, file, massage, and polish? Most definitely. Nellie Neal, a master pedicurist and the owner of Get Nailed in Minnetonka, Minn., has turned the pedicure into an art form — he reveals his favorite techniques so that you can, too.

**N**OT ONE TO do things by halves, Neal has earned certification as a Master Pedicurist and as a Podologist through the North American School of Podology. Through years of experimentation and practice, Neal has created a portfolio of services that address challenging foot problems: ingrown toenails, severely cracked heels, missing or misshapen toenails are all in a day's work. Plus, the feet look gorgeous when they walk out the door. If you want a little of that Nellie magic, read on for some ideas you can adopt in your own service menu.

## ONE

It starts on the phone. Start your pedicure service with a phone consultation if the client books in advance. Ask her questions such as does she have diabetes or any other health issues you should know about. Encourage her to describe her skin condition and if she is looking for a pedicure that's relaxing, cosmetic, or both. If the client is a walk-in proceed to step 2.

## TWO

Guest consultation — learn to ask the right questions and use an intake form. First, remove the nail polish so you get a visual on the client's nails. Here is what to assess:

- a. Health conditions
- b. Skin condition
- c. Sensitivity to massage and pressure

## THREE

Towel wrap. Keep the feet cozy at all times by having a soft towel wrapped around each foot whenever you aren't working on the skin. It's a simple gesture that feels really good and spa-like.

## FOUR

Toe flossing! Use soft towels (such as Soft Landings) to gently weave in and out of the area between your client's toes. Although it sounds odd, toe flossing provides effective and gentle cleansing that will keep your pedicure sanitary and also help maintain your client's personal hygiene. Use this time to educate your client about the importance of

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cleaning and drying between the toes.

**FIVE**

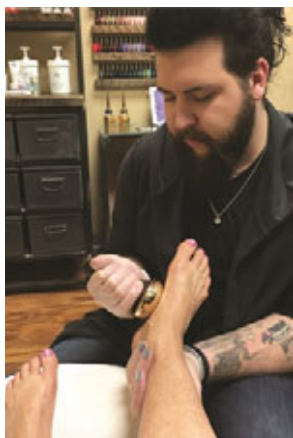
Make product choices a serious matter. You want to find a product line that works for your clients, and stand behind it. “You can get results and pampering with the right products,” Neal says. He likes LCN’s Urea Pedicure line for its “results-oriented ingredients.” Take advantage of industry trade-shows like Premiere Orlando, IBS, and ABS to discover products and techniques that are effective for the foot care issues that matter most to your specific clientele.

**SIX**

Whatever filing method you choose, balance effectiveness with ease of sanitation. Neal uses an e-file for callus reduction and for dead skin cleanup. He also uses it to smooth the nail. E-file bits are easy to clean and disinfect — Neal uses a hospital-grade autoclave for thorough sterilization. If you choose to hand file, use a file made specifically for the feet that is completely sanitizable and uses disposable abrasive pads. Also check out many of the callus softeners available to professional nail techs.

**SEVEN**

Sanitary procedures are the most important steps. Make sure you understand and follow a consistent protocol that meets (or exceeds) your state’s requirements. Using an autoclave for implements or using single-use implements are two good ways to ensure the highest level of sanitation. For best practices in pedicure bowl sanitation refer to the International Nail Technicians Association/Nail Manufacturers Council’s Guide to Pedicure Equipment Cleaning and Disinfecting.



Nellie Neal uses a Kansa Wand during his 20+-minute foot massage.

**EIGHT**

Up your massage game! Neal incorporates many forms of massage into his treatments including reflexology, energy work using a Kansa Wand, and assisted stretching techniques. Look for classes at tradeshow or contact the American Massage Therapy Association. Don’t rush this part of the service — you are very likely the only one providing this kind of therapy in the client’s life. Factor in at least 20 minutes for the massage and make sure you upcharge clients for your expertise.



**NINE**

Consider offering special services, such as ingrown toenail therapy. Neal uses a product called a B/S-brace. Thin strips fit over a toenail and gently contract to ease curvature and relieve pressure. The product is distributed in North America through [www.bs-brace.com](http://www.bs-brace.com).

**TEN**

Toenail reconstruction is something more and more clients are requesting. Whether the toenail is unsightly or is even missing entirely, reconstruction techniques can provide cosmetic results that are wearable and real-looking. Neal uses Barefoot Gel by LCN; he creates a new nail with the product and applies it before the service begins.

Neal charges \$75 per nail for this procedure. Neal is often asked to reconstruct a damaged toenail. He uses a gel that is flexible for natural foot and toe movement. It can be used over a nail or bare skin.

**NELLIE NEAL’S CALLUS REDUCTION TECHNIQUE**

1. Gently pat dry the foot. Spray or apply a callus reduction treatment on the entire foot.
2. Using a 180-grit file, gently buff the sensitive areas to remove excess debris. Start with the medial (outer) side of the big toe. Continue around each digit and down the lateral (inside) and medial (outside) sides of the foot; then on to the arch. (Tip: Apply pressure to the spot just under the ball of the foot to help reduce the tickling sensation.)
3. Continue with callus reduction using a stainless steel foot file. Do not reduce the callus more than 80%.



Nellie Neal is a certified Master Pedicurist and Master Podologist through the North American School of Podology. He specializes in pedicures at his salon Get Nailed. Follow him on Instagram @getnailedbynellie. ●



# Sanitation Checklist: What to Do When

In a perfect world we would be able to press a “self-clean” button whenever needed.

**I**N A PERFECT world we would be able to press a “self-clean” button whenever needed. In reality, we must juggle the task of cleaning, sanitizing, and disinfecting a myriad of surfaces and items at varying intervals to protect the health and safety of clients and team members. We hope these checklists make the job a little bit easier.

## AFTER EVERY CLIENT

- Wash your hands before and after each client (clients should also wash their hands before services). Avoid touching your face, eyes, mouth, etc., during services. Stay home if you are ill.
- Dispose of single-use items

(files, buffers, etc.) or gift them to the client.

- Replace table towels.
- Dispose of vaporous items in a covered trash receptacle.
- Sanitize/disinfect/sterilize any multi-use implements from the previous service and place them in a clean, closed container. The proper level of sanitation is prescribed by your state board.
- Sanitize your manicure table and your UV/LED lamp.
- Sanitize hard surfaces that clients may have come in contact with.
- Whirlpool pedicure spa: Clean all visible debris from the spa with soap and a disinfected brush, rinse with water, refill with clean

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## ● Sanitation Checklist: What to Do When

**Assure ample quantities of cleaning supplies, alcohol, etc., are at the nail station.**

water and appropriate amount of hospital-grade disinfectant, circulate for 10 minutes, drain, rinse with water, and dry with a paper towel.

- Pipe-less pedicure spa: Drain water, remove impeller, footplate, and other removable parts. Scrub parts with soap, water, and a disinfected brush. Rinse and replace removable parts, refill basin with water and hospital-grade disinfectant and recirculate for 10 minutes. Drain, rinse, and wipe dry with a paper towel.
- Pedicure bowl (with no jets, impellers, etc.): Drain water and clean all inside surfaces with soap, water, and a disinfected brush. Rinse and refill with water. Add proper amount of hospital-grade disinfectant and allow to sit for 10 minutes. Drain, rinse, and dry with a paper towel.
- Electric file: Wipe handpiece with disinfectant, replace bit with a new or sanitized bit. (Dispose of sanding bands.)
- Dispose of gloves and don a fresh pair for next client.
- Change implement disinfectant as needed throughout the day. Quats solutions will become flat much faster than phenolic-based solutions. Check label for instructions.

### DAILY

- Check sanitation log to see what tasks need to be completed.
- Empty trash receptacles.
- Sweep floors (after every client if you also do hair).

- Mop floors and vacuum carpets.
- Clean glass and mirrors. (Spot clean more often if needed.)
- Clean restroom and assure ample hand soap and paper towels. (Don't forget to clean the door handles.)
- Wash soiled towels in hot water; dry, fold, and store in a closed cabinet.
- Assure ample quantities of cleaning supplies, alcohol, etc., are at the nail station.
- Sanitize phones, door handles, etc.
- Whirlpool pedicure spas need extra attention at the end of every day. Remove and clean any removable parts (screen, etc.) as well as any areas behind them. Fill the spa with warm water and non-foaming chelating detergent and circulate for five to 10 minutes. Drain and rinse. Refill with water and the proper amount of hospital-grade disinfectant and circulate for 10 minutes. Drain, rinse, and dry with a paper towel.
- Pipe-less pedicure spa: Fill the spa with warm water and non-foaming chelating detergent and circulate for five to 10 minutes. Drain and rinse. Refill with water and the proper amount of hospital-grade disinfectant and circulate for 10 minutes. Drain, rinse, and dry with a paper towel.
- Pedicure bowl (with no jets, impellers, etc.): Drain and scrub with soap and water using a disinfected brush. Drain and rinse. Refill with water and the proper amount of hospital-grade disinfectant and circulate for 10

minutes. Drain, rinse, and dry with a paper towel.

- Sanitize surfaces in the employee break room. Refrigerator handles and doors, microwave keypads, coffee pot controls all can harbor bacteria and need to be cleaned as well as the areas that come in contact with food.
- Safety rails inside and leading to the salon should be disinfected frequently.
- Disinfect cleaning supplies such as brushes and scrubbers.
- Assure that autoclaves are functioning properly.
- Premix any needed disinfectants and sanitizers.

### WEEKLY

- Check air filters on vented tables. (Change if necessary.)
- Whirlpool or pipe-less pedicure spa: When disinfecting, do not drain the disinfectant solution and allow to remain in the unit overnight. In the morning, drain and rinse. Refill and recirculate, drain, and dry with a paper towel.
- Dust retail items, tops of door frames, and any hard-to-reach areas where dust may accumulate.
- Sanitize the salon washing machine by cleaning with detergent and water, rinsing, refilling, and adding bleach. Allow bleach and water to sit for 10 minutes before draining.

### MONTHLY

- Check and/or clean filters on the salon's heating, ventilation, and air conditioning systems. ●

# Feet Smarts: When to Refer Your Client to a Podiatrist



As a nail tech, you've probably seen your share of calluses, ingrown nails, fungi, and other yucky foot ailments. But how do you know when to declare "hands off" and refer your client to a podiatrist?

**N**OW MORE THAN ever, nail techs are seeing a wide variety of foot and nail ailments in the salon. Because of an aging population, increased rates of diabetes, and stressful lifestyles, more and more people are having foot-related problems. These people are coming to nail techs seeking advice and resolution. "I like to refer to these podiatrists as 'first liners,' because frequently they are the first to see these problems before any medical professional," says Debra Bourque, BSc.Pod, CPod, CMP.

Vicki Malo, president of North American School of Podology (NASP), concurs. "There are increasing numbers of diabetic, senior, and immune-compromised clients opting for pedicures," Malo

says. "It's therefore imperative that technicians have advanced training and know how to proceed with a safe pedicure."

Both Bourque and Malo agree it is vital for nail techs to understand and implement the 3R's of safe pedicuring:

1. Recognize the issue being presented.
2. Recommend the proper pedicure service, products, and home maintenance.
3. Refer the client to a medical professional when necessary.

Here are the most common foot and nail ailments seen in salons, along with recommendations from Bourque and Malo for safe pedicuring and home management:

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● Feet Smarts: When to Refer Your Client to a Podiatrist



**Problem:** Tinea pedis (fungal infection of the feet, or “athlete’s foot”)  
**Description:** Dry, rough, red, itchy peeling skin on the bottom of the feet and/or between the toes.  
**What to do:** Technicians should not diagnose, only recognize and recommend. If they suspect a client has a fungus, they must refer her to a physician. Do not perform salon service if broken skin is present. Advise your client to keep her feet clean and dry, and use a nonocclusive antifungal product daily or as prescribed by a doctor.



**Problem:** Onychomycosis (fungal infection of the nail plate)  
**Description:** The nail can be thickened and/or crumbly and often has yellow, white, or brown discoloration. The cuticle may appear red, and there may be significant debris under the nail and the surrounding nail folds.  
**What to do:** Salon service is not recommended while the fungus is live/active. Advise your client to see a doctor, who will likely prescribe a topical antifungal, oral medication, and/or laser treatments.



**Problem:** Ingrown nails  
**Description:** A condition where the nail penetrates the surrounding skin. An ingrown nail usually affects only one side of the finger or toe. Once the nail has penetrated the skin, bacteria can get into the cut and the area is at risk for infection.  
**What to do:** Do not perform service if the skin is broken or there are signs of infection; instead, refer your client to a doctor. If the condition is mild enough, use flat-edged nippers to remove the piece of nail cutting into the skin, and file. You can also apply a BS Brace enhancement to provide immediate pain relief. Advise your client to wear shoes that allow her toes to move around.



**Problem:** Pedal Keratosis (calluses and corns)  
**Description:** A hard thickening of the skin on the bottom of the feet (callus) or on or near a toe (corn).  
**What to do:** Use a non-aggressive hydrating callus softener and carefully reduce the callus to a safe level. (Never use a credo

blade, even if they are legal in your state.) Advise your client to use a non-occlusive moisturizing formula daily and wear proper fitting shoes with orthotic supports if necessary.



Don’t attempt to reduce a corn.  
**Problem:** Fissure (deeply cracked heels)  
**Description:** A deep crack in the skin that penetrates the dermis.  
**What to do:** If no blood is present, soak with a moisturizing foot soak (no salts), carefully reduce the callus, and apply a non-occlusive moisturizing formula to keep the skin soft.



**Problem:** Bulla (blister)  
**Description:** A fluid-filled bubble between the layers of the skin.  
**What to do:** Do not break or puncture; avoid the area during pedicure service. Advise your client to keep the area clean, avoid continued rubbing on the affected area, and wear proper fitting shoes.

**When it comes to what a technician can ‘safely’ work on, it depends on individual State Board rules and regulations, Bourque says.**

## ● Feet Smarts: When to Refer Your Client to a Podiatrist



**Problem:** Digital deformities

**Description:** Dropped arches, bunions, Haglund's deformity (pump bump), hammertoe

**What to do:** Bourque advises pedicuring as usual, using caution when massaging, as bones may be rigid and painful. Encourage client to use non-occlusive moisturizer daily, wear shoes with additional room to accommodate deformities, and possibly use orthotic support and toe props for comfort and stability.



**Problem:** Thickened toenails

**Description:** Thicker than average toenails caused by friction or trauma on the delicate matrix (where the nail grows from).

**What to do:** Carefully reduce the nail just enough for a good esthetic. If the nails are fungal, refer the client to a podiatrist.

### **TECHNICIANS SHOULD NEVER:**

- Work on anything infected (red, inflamed, warm to touch, oozing)

- Work on any bleeding, broken skin or open wounds
- Work on or reduce a discolored / brownish callus
- Break or pop a blister
- Remove a foreign object from the foot
- Work on active mycotic / fungal nails
- Work on any client presenting with something they cannot recognize. (When in doubt send it out!) ●

If any of these situations are present, always refer to a medical professional for proper treatment to ensure the safety of clients and to prevent potential lawsuits. When it comes to what a technician can 'safely' work on, it depends on individual State Board rules and regulations, Bourque says.

For more information on the North American School of Podology, visit [www.northamerican-schoolofpodology.com](http://www.northamerican-schoolofpodology.com). ●

# 5 Ways to Heal Heels and Repair Dry, Cracked Skin



Summer is upon us and that means pedicure appointments are filling up as clients prepare to shed their shoes in favor of flip-flops and sandals. Make sure your clients' heels are healthy and smooth so they dare to be bare. These five treatments will fight dry skin and give your clients beautiful, beach-ready feet.

**P**OLISHED PIGGIES AND a relaxing massage are two motivators to book a pedicure, but techs can use a third angle to get new clients in their chairs — and this one is packed with potential for an upsell. Dry, ragged heels make no distinction between gender or age, which means nearly every client will benefit from scheduling a pedi appointment to soften up their rough edges.

In the earliest stages, dry heels are unsightly, but left untreated, they have the potential to become painful as neglected skin begins to harden and crack. "It can become a real problem," says Lisa Klemeyer, DPM, a podiatrist at Aesthetic and Family Podiatry Center in Sarasota, Fla. "I've seen heels that have broken open and become infected. Unless the problem is a result of a skin condition, cracked, compromised heels can be avoided with regular maintenance."

That's good news for nail techs! Below, we'll give you five recommended treatments to help heal your clients' heels. Each of the suggestions functions as an add-on to a regular pedicure service, so be sure to schedule appropriately and inform the client you're providing a heel-focused step within the service so she understands the difference in the price.

Market these heel services intentionally: Promote them on Facebook, put signs around the salon, and pass out promo cards. Heel care is a great hook to attract both male and female clients. Along with heel-focused care in the salon, offer clients remedies for home use. This can include traditional items, such as body butters, oils, and lotions, and can extend to socks to wear overnight and files, buffers, pumice stones, etc., to keep dry skin at bay.

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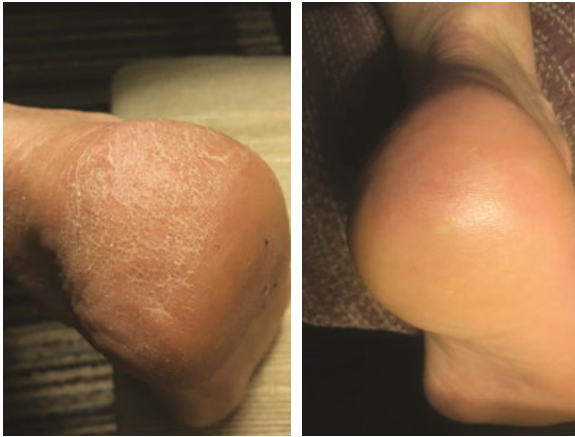
## ● 5 Ways to Heal Heels and Repair Dry, Cracked Skin

**Sloughing lotion has a satisfying effect because it appears as though tons of dead skin is being removed from the dry area.**



### **SLOUGH AND SCRUB**

A typical pedicure includes a "gentle exfoliation," but this slough and scrub is more intense than that. This add-on should take about 10 additional minutes and requires the nail tech to apply sloughing lotion to the heels and follow with a buff using a coarse file or pumice stone.



Sloughing lotion has a satisfying effect because it appears as though tons of dead skin is being removed from the dry area. The truth is some dead skin is coming off, but some of the debris is simply the lotion itself. Either way, it's an effective way to soften skin and remove dead cells. Some sloughing products are applied as a standard lotion; others as a foam or gel. You can even choose some with a fine grit to enhance exfoliation. Once the lotion has been completely sloughed away, use a file or pumice to finish the job. Because the active ingredients of the sloughing lotion are still present on the surface of

the skin, it will be easier to remove the stubborn patches that remain. Follow with a hydrating body lotion that contains shea or cocoa butter.

**Why it works:** Ingredients like fruit extracts, citric acids, or other exfoliating agents work in tandem with moisturizing ingredients, such as paraffin, to remove rough skin and moisturize what remains.



### **CLAY MASK**

A clay mask will do two things: First, it will keep the hydrating, softening ingredients on the skin for up to 10 minutes. Second, many masks rely on heat, which activates the ingredients to work better.



After you've buffed the heel area, apply the mask over the entire foot, then cover and seal using a plastic bootie. Apply heat by wrapping the feet in warm towels (wet or dry). Follow manufacturer's instructions for length of time to leave it on the skin. Remove the mask, pumice the rough spots that remain, and finish with a light oil that absorbs without leaving the feet greasy, such as moringa oil, jojoba, or argan oil, which

contain antioxidants that can help rebuild that dry, damaged skin.

**Why it works:** Clay can grab the dirt and grime in the cracks of dry skin and pull it away to be washed off. Additionally, the properties of clay allow the skin to absorb all the luscious moisturizing oils within the mask, including exotic ones such as sage or geranium oil.



### **PEEL**

This step is the granddaddy of callus treatments. It's for clients who have heels that look like cracked concrete. The benefit is that a peel delivers amazing results. The drawback is it takes five to seven days to realize them. A client won't see the results during the scheduled time of her appointment.

A tech can offer a peel in one of two ways: as a service in the salon or as a retail item with directions to complete the peel at home. Some peels require only a 15-20 minute soak time, which means a tech could apply them in the salon by adding that amount of time to the service. Others need a full hour for the peel to rest on the skin, motivating techs to sell it to clients to use at home. Either way works; but, if possible, leave the decision to the client. For those who want the tech to deliver, let them know they should schedule a time when they can come to the salon for an hour to soak. When they come in, set them up in a seat that doesn't have

## ● 5 Ways to Heal Heels and Repair Dry, Cracked Skin

**There is no need to choose a harsh chemical peel that will be too aggressive on the skin of the foot. Natural peels are available that use extracts to achieve extraordinary results.**

the potential to generate money. (In other words, don't put them in at your mani desk or in a pedicure chair if it might prevent you from seeing other clients during that time.) Wrap your client's feet in warm towels for 10 minutes to soften the skin, then follow manufacturer's instructions for applying the peel. Provide your client with a refreshment to relax with, and let her soak for the required time. Remove the mask and wash the feet to cleanse the peel from the skin. Schedule a pedicure for seven to 10 days following the peel to remove loose skin and buff remaining dry patches. Retail items for this client could include tea tree oil, which she would apply daily to help heal the skin, and also a file or pumice stone to stay on top of dry skin.



**Why it works:** Ingredients in peels work to soften dead skin cells and break down the molecular bonds that hold the dry cells together so the skin will shed. Other ingredients moisturize the skin that remains. There is no need to choose a harsh chemical peel that will be too aggressive on the skin of the foot. Natural peels are available that use extracts to achieve extraordinary results.



### ELECTRIC FILE

Sometimes old-school solutions are still the best way to go. Just as sand paper smooths the jagged edge of cut glass or the frayed edge of a piece of wood, an electric file has the ability to make rough surfaces smooth. This method works best on heels that have hardened, cracked skin. It's also more effective to use an electric file on dry skin, so lead with this step rather than with the soak of a traditional pedicure. (You'll still need to disinfect the feet and wash the feet with soap and a warm, wet towel.)

Choose an abrasive grit for the sanding band that is appropriate to the degree of dryness and cracks on your client's skin. You may want to start with one grit and then switch to a lighter band once the heavy work is done. An electric file has immediate and impressive results. Be sure to explain to your client what she can expect when the file spins across the skin. Finish by buffing the skin and follow with a soak and the remainder of the pedicure.

**Why it works:** Sometimes, dry, dead skin needs to be removed, not just softened. A micro blade may be effective in the hands of an experienced tech, but it can cause cuts and abrasions on skin that is already

damaged; plus, many states prohibit their use. An electric file allows techs to remove rough, stubborn areas without all the muscle required for a rasp. It's a safe, effective option to remove the dead cells using various degrees of abrasion.



### PARAFFIN

Clients often opt for paraffin for the heat. Its healing properties works wonders for reducing pain in joints and sore muscles. Paraffin is also highly effective at healing dry skin. "It's my number-one choice for helping my clients with dry heels," says Dr. Klemeyer. Professional-grade paraffin wax may contain essential oils that provide additional support to restore skin, such as eucalyptus, rosemary, and peppermint. For this reason, perform the entire pedicure first, ending with the paraffin soak. Remove residual oil from the toenails before applying polish.

**Why it works:** Paraffin is a by-product of petroleum, and for that reason some people shy away from its use. However, paraffin effectively provides relief from rough heels because the moisturizing properties of the emollient remain on the surface of the skin even after the wax is removed. ●

# Nail Fungus: Who Can Get Infected and How to Treat it



Dr. Stern discusses who is particularly at risk to contract nail fungus and what treatment options are available to those who do get it.

**WHEN WE THINK** about nail infections, fungus is probably what first comes to mind. It turns out that onychomycosis (nail fungus) is extremely common, as an estimated 35 million people in the U.S. are infected. It's important to understand what makes us vulnerable to nail fungus, and why it's important to treat it. Several treatment options are currently available, each offering pros and cons.

#### **WHO IS VULNERABLE?**

We are all exposed to fungus in our environment, yet not everyone acquires the infection. Our vulnerability is dependent on the complex interplay between our genetics, age, habits, other medical issues, and the environment. Simply being older is a risk factor, as more than 50% of nail fungus cases are seen in those over the age of 70. As we age, our toenails change due to years of chronic, repetitive micro trauma. Once the nail starts to grow abnormally, we become vulnerable to acquiring fungus. Aging

also brings slower nail growth, another factor that predisposes a person to fungal acquisition. Certain medical conditions can also make us more susceptible to fungus, such as diabetes, peripheral vascular disease, psoriasis, and HIV. Toenail trauma, common with certain athletic activities, such as tennis, skiing, and running, can lead to onychomycosis. Once the nail is damaged and lifted away from the nail bed, the protective barrier is compromised and fungus in the environment or on neighboring skin can enter the nail unit. Excessive foot sweating, poor hygiene, and unprotected communal exposure (i.e., bare feet in the gym locker room) can also put a person at risk.

#### **WHY TREAT FUNGUS?**

For many, nail fungus is cosmetically unappealing and the rationale to treat it is purely for aesthetic reasons. Most sufferers do not realize there are important medical reasons why treatment can be imperative. For one, fungus can spread to other toenails, the hands,

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## ● Nail Fungus: Who Can Get Infected and How to Treat it

the fingernails, or other skin sites. Thick, infected nails can be hard to maintain, may become painful, and can even make walking difficult. Fungus on the toenails is also a very common cause of bacterial infections on the skin at the lower legs (lower extremity cellulitis). This occurs when microscopic breaks in the skin become infected with bacteria.

### TREATMENT OPTIONS

Treatment options can be divided into three categories: oral agents, topical agents, and non-pharmacologic approaches to therapy. Oral agents are prescription pills such as Terbinafine (Lamisil), Itraconazole, or Fluconazole. These are medications that must be prescribed by a physician. We have a lot of experience with these medications as they have been on the market for years. Dosing and treatment duration depends on the type of fungus and the severity of the case being treated. These oral medications have had rare but serious side effects associated with them, including liver and cardiac toxicity; therefore, laboratory monitoring is important. Also, these oral agents can interact with other common medications. For these reasons, many patients and physicians shy away from oral agents and prefer to use topical therapies.

Topical fungal medications are advantageous because they have fewer side effects and do not require laboratory monitoring. The disad-

**Two new prescription topical antifungals have been approved and have demonstrated superior efficacy. Efinaconazole 10% solution (Jublia) was approved in June 2014 and Tavaborole 5% solution (Kerydin) was approved in July 2014 for the treatment of onychomycosis.**

vantage is that they are less effective and patients tend to be less compliant with these treatments because the treatment courses are longer. Until recently, the only prescription topical antifungal agent that was approved in the U.S. was Ciclopirox lacquer (Penlac). More recently, two new prescription topical antifungals have been approved and have demonstrated superior efficacy. Efinaconazole 10% solution (Jublia) was approved in June 2014 and Tavaborole 5% solution (Kerydin) was approved in July 2014 for the treatment of onychomycosis. For toenails, treatment is daily for 48 weeks. Both of these drugs have very safe profiles and are exciting additions to our antifungal arsenal.

Non-pharmacologic approaches to therapy include mechanical nail removal, laser treatment, and chemical removal of the nail. Mechanical nail removal — surgical removal of the nail plate — tends to be a method that is favored by podiatrists. The procedure requires numbing the toe and removing the nail in order to reduce fungal load and remove a very thick nail that is not likely to respond well to therapy. When toenails are extremely thick and it is less likely that a topical medication will be

able to penetrate effectively, this can be a beneficial option. Lasers always have appeal to consumers because they are high-tech and thought of as the latest in technology. Currently, short-pulse Nd-Yag lasers are approved in the U.S. for the temporary improvement of fungal nails. These devices are still considered controversial, as their efficacy is questionable and many believe that they have not yet been adequately studied. The last of the non-pharmacologic approaches, chemical removal, involves using a urea-based prescription cream and applying it to the nail repetitively. Urea breaks down keratin and can soften even very thick nails. Over time the nail will crumble and become easier to remove without the need for surgery.



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Dermatologists treat skin, hair, and nails. Dr. Stern is a board-certified dermatologist and I specialize in the treatment of nail disorders including inflammatory diseases of the nail, cosmetic issues, cancers of the nail, sports-related injuries, and nail infections. ●



# Adapting Nail Care for the Elderly

The over-70 set can benefit from manicures and pedicures, as long as their health and safety are paramount. Learn the unique challenges of dealing with an older clientele.

**T**HOUGH APPRECIATED BY all of your clients, your tender touch and sense of style are perhaps most meaningful to seniors, who have the life experience to truly appreciate professional nail services. Elderly clients, those in their 70s and above, may have outlived their spouses and lack enjoyable human interaction in their day-to-day schedules. Their need for assistance with accessing their toenails or grasping nail clippers can also make them more devoted than younger clients, never missing an appointment no matter the season. However, to be successful and work safely within this niche, nail techs should be aware of some changes that commonly occur with age:

## **SLOWER NAIL GROWTH**

Studies have shown statistically significant differences in growth rates before and after age 40. The result? "Older people's more slow-growing nails are exposed to considerably more environmental influences and these exposures, over time, can impact the overall appearance and strength of our nails," says Dana Stern, MD, a New York-based dermatologist. "Subungual hemorrhages will take longer to grow out. Toenail fungus will potentially take longer to resolve."

## **INGROWN NAILS**

Because physically reaching toenails and handling nail clippers becomes more challenging with

**Their need for assistance with accessing their toenails or grasping nail clippers can also make them more devoted than younger clients, never missing an appointment no matter the season.**

## ● Adapting Nail Care for the Elderly

**Assure ample quantities of cleaning supplies, alcohol, etc., are at the nail station.**

age, regular nail care can suffer. So scheduling nail trims about every four weeks is a reasonable precaution. Taking into account that many seniors are on fixed incomes, consider charging for a nail trim only, versus requiring them to book a full pedicure.

If the client's nails are already showing abnormalities, such as onychocryptosis (ingrown nails) or onychogryphosis (curved nails that look like a ram's horn), then refer her to a medical professional first. "It's advisable to see a podiatrist for more complex nail clipping issues that may require special instruments, like onychogryphosis," Stern says.

Then moving forward, keep in mind that trimming toenails straight across (not to the shape of the toe) is safest to prevent ingrown nails.



Z-Hills client Norma has been in the beauty industry all of her life, so she and owner Amber Thomas have much to chat about during appointments.

### **ONYCHOLYSIS**

Nails don't adhere to the nail bed as well as people get older, so care must be taken to avoid loosening or separation of the nail from its bed (onycholysis). "Overly aggressive cleaning under the nails is a very common cause of onycholysis and an issue that predominates in the over-50 age group," Stern says.

She advises, "If a client is prone to separation, no cleaning under the

nail should occur. For those who are not prone to separation, when using an orangewood stick, always be very careful not to put upward pressure on the underside of the nail or to insert the tool too deeply under the nail. Avoid nail brushes which cannot be properly disinfected and can harbor organisms. Keeping the nails clipped short will keep them clean."

### **COMPROMISED CIRCULATION**

Clients can develop faulty circulation at the distal extremities — that is, the hands and feet. This can cause nail ridging (onychorrhexis), a clinical sign of brittle nails. "Interestingly, we see the effects of circulatory compromise in patients who are paralyzed on one side, and I have even observed this in patients who have one arm in a cast for an extended period. The extremity that has a compromised range of motion will often have brittle nails while the opposite, functional extremity will have normal nails," Stern says.

Unfortunately, polish remover can make brittle nails worse, Stern says, and recommends a "nail polish holiday" (two or three weeks without nail color) be considered for these clients.

### **DRY SKIN**

Skin can lose its ability to retain moisture as the years go by. Robert Spalding, DPM, a Tennessee-based podiatrist and founder of MediNail Learning Center, says dry cracked skin "is a recipe for SMT, or 'salon micro trauma,' a term I had to coin in 2006 to scientifically explain the reason for so many infections in salons nationwide." If bleeding is visible, Spalding says not to provide services without a written doctor's clearance. Cracks, even without blood apparent, can let infections in. Spalding is an advocate of autoclaving in nail salons or using all disposable implements and tools to lower infection risk.

For clients lacking moisture but without cracks, a rich moisturizer offers benefits. Stern says, "Shea acts as a barrier for the skin and really helps to seal in moisture. Look for creams that contain ceramides and hyaluronic acid, both of which mimic the skin's natural lipid barrier. The addition of salicylic acid will help to prevent callus from returning."



Client Carol relaxes in an overstuffed recliner that is used as a pedicure chair at Z-Hills.

Getting relevant medical history is important for all clients at their first appointment, particularly with the elderly and other at-risk groups. That will alert you to which adaptations are relevant. "Unless you ask basic questions about their medical conditions, you will not be properly informed," Spalding says. He lists several examples: "Callus removers always pose potential burn problems, but the key is application time or previous history of chemical sensitivities. Less vigorous massage is important especially in the presence of varicose veins, frail skin, edematous [swollen] 'shiny' skin, or discolored blue or red skin with temperature changes either hot or cold. However, proper gentle touch effleurage vascular massage towards the head with the feet in a Trendelenburg position [supine with feet higher than the head by 15 to 30 degrees] can help promote lymphatic drainage. Do not provide deep tissue massage or petrissage."

With appropriate protocols, caring for the elderly can be a win-win for nail techs and clients.

## ● Adapting Nail Care for the Elderly

### SENIOR PEDICURE STEP-BY-STEP

Vicki Malo, president of the North American School of Podology (NASP), and Katharin von Gavel, NASP CEO and Footlogix founder, recommend this pedicure protocol for elderly clients.



1. Soak the feet for no more than five minutes in tepid water using a pH-balanced hydrating foot soak, not a salt- or acid-based product. (If soaking the feet is not indicated, use warm moist towel compresses instead.)



2. Cleanse the foot gently, paying particular attention to the skin between the toes. Use a hydrating, urea-based callus softener.
3. Gently cut toenails and clean the nail groove and free edge. Reduce thick nails where applicable.
4. Do not push back cuticles. Use a fine grit file or buffer with a side-to-side motion on the surface of the toenails close to the cuticle area.
5. Gently smooth calluses on pressure points or areas of dry skin, being very careful not to over-file.
6. Apply a non-occlusive moisturizer (not a heavy sealing one that blocks transpiration).



7. Massage the foot and leg without applying any deep pressure. Use a light touch effleurage up the leg towards the knee.
8. Recommend a daily homecare product, if indicated.
9. Suggest different shoes or appliances such as toe props, cushions, etc., if indicated.
10. Make sure your clients know the benefits of routine pedicures and book them for their next appointment before they leave.

### DOCTOR'S NOTES

- Older clients are more likely to have medical issues than younger clients, so consider developing referral relationships with one or more physicians in different specialties (such as dermatology, podiatry, and general practice) to refer questionable nail and skin concerns to. If there is any doubt about whether nail services are safe to perform or whether a client may spread an infection to the next client, request the client obtain a written medical clearance (doctor's note) first.
- About 50% of irregular looking nails ("dystrophic" nails) are fungal. "That means not every abnormal looking nail is fungus," Stern says. "Given that onychomycosis and pseudomonas (a bacterial infection) are contagious, if a salon worker suspects that a client has these entities, it is advisable to refer. This will benefit the client in the long run."
- Even if it turns out that the client isn't contagious, early medical intervention can be beneficial. "Untreated onycholysis often persists and can become per-

manent and irreversible if not treated," Stern says. "Subungual hemorrhage can sometimes be difficult to distinguish from melanoma."

- To develop relationships with physicians, you may need to prove your high standards to them. Remember that nail techs are able to refer to physicians, but are not legally allowed to make any diagnoses.

### 3 SPECIALISTS' SUCCESS STORIES



Client Carol enjoys a manicure at Z-Hills, where acrylics are not offered because the odor may irritate clients with respiratory disorders.

**Nail tech:** Amber Thomas, owner and natural nail specialist, Z-Hills Nail Salon, Zephyrhills, Fla.

**Percentage of clients over 70:** 35% in salon; 100% mobile (at assisted living facilities/nursing homes)

**What inspired her to focus on this niche:** In the United Kingdom, where Thomas completed her training, she realized nail techs are often the first to notice a client's hand- or foot-related medical issue. Upon returning to the United States to care for her aging mother in Florida, where many residents are retirees, Thomas launched a nail business focused on the "over 55s."

**Design and service accommodations:** Z-Hills Nail Salon is wheelchair accessible, the bathroom has a support bar, and services are done in an overstuffed recliner. The salon avoids products with potentially irritating odors, dry pedicures are offered to avoid risks associated

## ● Adapting Nail Care for the Elderly

**When Baich did nails for a client who was in hospice care, she saw how she helped the client feel beautiful and provided much-needed emotional relief to the client's family.**

with water, and a softened 100-180 grit file shortens toenails instead of a clipper. Clients also appreciate the salon's use of fragrance-free 100% argan oil.

**Most popular services for elderly:** Dry pedicures, foot massages

**How she handles potential medical concerns:** She refers clients to podiatrist J.S. Bidelspach if she suspects a medical issue. Bidelspach also comes to the salon to do toenail fungus laser therapy on clients at a reduced price. She asks diabetic clients to bring in any prescribed medical creams so she does not use contraindicated products during massages.



Elderly clients have sought out Baich's Pedicure Plus salon because of the easy-access lounge chairs that deliberately avoid risers or steps.

**Nail tech:** Denise Baich, ANT/MNT/FNC, owner/operator of Pedicure Plus, St. Louis, Mo.

**Percentage of clients over 70:** 25% and growing due to a recent move into a building with medical offices

**Three factors drew Hardoon: Her location in Florida, census data showing a growing elderly population in general, and the knowledge that women generally outlive their male spouses.**

**What inspired her to focus on this niche:** When Baich did nails for a client who was in hospice care, she saw how she helped the client feel beautiful and provided much-needed emotional relief to the client's family. Baich realized there was a need in her area for safe, quality salon care for the elderly and chronically ill.

**Design and service accommodations:** The building's front curb is flush with the parking lot and wheelchairs are available for visitor use at the entrance. In the suite itself, doors are extra wide, scooters and large wheelchairs have room to maneuver, and services are performed in easy-access lounge chairs that deliberately avoid risers and are designed to comfortably hold clients who weigh up to 350 pounds. Services are soakless. Massage is gentle or avoided as indicated. Nail eponychium is not chemically treated or pushed back.

**Most popular services for elderly:** Routine foot care, upgraded pampering pedicures, some manicures.

**How she handles potential medical concerns:** Baich has a network of doctors to whom she refers, some of whom have suites in the same building. She is also moving into a different suite, where she will be performing services on the podiatrist's well patients (those not in actual medical care) as the doctor's practice grows.



Hardoon makes her own scrubs to pamper and protect her clients.

**Nail tech:** Darlene Hardoon, nail blogger at [gentleadorner.com](http://gentleadorner.com) and owner, Ethic Salon, Orlando, Fla.

**Percentage of clients over 70:** 25%

**What inspired her to focus on this niche:** Three factors drew Hardoon: Her location in Florida, census data showing a growing elderly population in general, and the knowledge that women generally outlive their male spouses.

**Design and service accommodations:** Hardoon is currently building out Ethic Salon; she has selected recliners for services and is avoiding rugs and other trip hazards. Products she will use include certified organic white sugar scrubs (not salt-based), jojoba oil, and paraffin. Services will be waterless. Disposable tools will be one-use-only and reusable tools will be sterilized in an autoclave.

**Most popular services for elderly:** Waterless manicures, traditional lacquer for nails

**How she handles potential medical concerns:** She requires a medical clearance note from a podiatrist and refunds the service deposit if the service risks falling outside of the nail tech scope of licensure. ●

# Diabetic Clients: Proceed With Caution



When a disease is as common as diabetes, it's easy to forget that diabetic foot care is hardly a routine matter. Educate yourself on the serious issues that can result from a simple pedicure.

**D**IABETES IS DEADLY. We don't hear about the dangers of diabetes as often as we should, because, for the most part, it can be managed effectively through medicine. However, according to the 2010 National Diabetes Statistics Report, diabetes was the seventh leading cause of death in the U.S. In 2015, 1.5 million new cases of diabetes were diagnosed, half in adults ages 45-64.

Diabetes affects more than the body's ability to metabolize sugary sweets. A multi-system disease, diabetes taxes the immune system, increases the risk of renal failure and arterial compromise, and creates issues with blood flow.

A client who suffers from diabetes may experience numbness in the feet (neuropathy), chronic swelling, discoloration in their skin, and changes in body temperature. Dr. Michael S. Kerzner, a podiatrist at Duke University Medical Center in Durham, N.C., says a difference in temperature can often be felt from the ankles to the toes. When

circulation is poor, the toes are significantly colder.

All this means that when clients with diabetes sit down to get a pedicure, their body will respond differently to everything from water temperature to cuticle care. They won't be as sensitive to discomfort as a healthy client would be, which means the onus of responsible care is on the nail tech. Know how to protect yourself and your client, because even a small nick or abrasion can develop into a serious health issue.

## PROACTIVE PROTECTION

Pedicure risks are higher in clients with diabetes because the disease can cause a loss of sensitivity in the feet. A healthy client will reflexively pull away to warn a tech she's being too rough. A diabetic client with neuropathy won't. Any time a nail tech accidentally cuts the skin or breaks the cuticle seal, she increases a client's risk of infection. But in a client with diabetes, small nicks and cuts can go unnoticed and untreated — and develop into much larger problems.

**When clients with diabetes sit down to get a pedicure, their body will respond differently to everything from water temperature to cuticle care.**

## ● Diabetic Clients: Proceed With Caution

Nearly 10% of the U.S. adult population suffers from diabetes, a statistic that should motivate techs to educate themselves on proper anatomy and on the severity of their client's condition.

"What we view as the half moon of the big toe is actually the end of the long bone. In fact, if we were to peel back the eponychium of the big toe, we would see that bone," says Dr. Kerzner. "Two to three times a year, I see patients in the high-risk population come in with bone infections. These patients have to be put on drugs that suppress the immune system. A bone infection becomes very hard to heal."

Techs can learn to recognize silent signs that alert them to the severity of a client's diabetic health. "Look for hair on the toes," says Dr. Kerzner. "Absence of hair indicates a higher risk. Press on the skin. If the color doesn't return in 3-5 seconds, it's a sign of distal pooling, another risk."

In clients with known diabetic conditions, ask about their health at each appointment. Don't assume because they indicated they have diabetes on the intake form that the condition is static. Practice asking health questions so it becomes a natural part of the conversation: How have you been feeling? Is your sugar well controlled? Do you get cramping when you walk? Do you experience tingling or numbness in your toes?

Their answers warn you of risks. Cramping can indicate vascular compromise. Numbness and tingling are indicators of neuropathy. "More than 50% of wounds in diabetics will become infected," says Dr. Kerzner. With statistics like that, it's vital for nail techs to com-



Submerge your whole hand and wrist into the water to check that the foot bath is not too warm.

municate with clients throughout the entire pedicure service.

### COMMUNICATING SAFETY

Once you know a client has diabetes, offer assurance that you're educated about proper foot care. Let them know you're committed to working with them to reduce risks and increase safety. Part of that is keeping the lines of communication open. Be comfortable asking about their health and providing tips to maximize their pedicure experience.

Let diabetic clients know you're diligent about sanitizing all implements, files, buffers and bowls. Assure them absolute care and attention has been given to cleaning the bowl before their appointment. (This should be the standard regardless of whether the client has diabetes or not.)

Warn them to avoid shaving before a pedicure appointment. Give them the freedom to reschedule without consequence should they discover a cut or abrasion on their skin. Finally,

let them know what precautions you will take as you provide the best care.

Neuropathy restricts a person's ability to feel. That means your client might be unaware of discomfort from a deep massage, pain from a cut, or heat from the water temperature. Every step of the pedicure service can be modified to increase the comfort of a client with diabetes.

- Choose a water temperature that is comfortable but not too warm. Submerge your whole hand and wrist into the water. Your fingertips may not give an accurate feel for the deeper water of the foot bath.
- Smooth the skin using a less abrasive buffer rather than a pumice stone. Delicate skin could peel more easily than you realize. Be extraordinarily gentle, especially in seniors with diabetes.
- Take special care when you shorten the nails and clean under the free edge. Work slowly to avoid digging too deep or cutting the nails too short. Often, a straight nail shape is preferred to an oval, to avoid any risk of the nail growing into or cutting the skin as it grows.
- Avoid digging into the sidewalls of the nail. Use gentle pressure when you scrape the cuticle from

**Know how to protect yourself and your client, because even a small nick or abrasion can develop into a serious health issue.**

**When a client has compromised skin, an open wound, or clear signs of infections, it's important to set a precedent and inform the client of the need to reschedule the service.**

the top of the nail plate. Do not push the cuticle back, as any compromise of the cuticle can cause serious health problems to develop.

- Opt for a gentle exfoliant, such as a mask, rather than a salt or sugar scrub, which can be abrasive on the skin.
- Use a smooth moisturizing cream that can spread easily with soft strokes during the massage. Avoid deep pressure, which could easily bruise the skin. Instead use a light, therapeutic touch.

**OUT OF SCOPE**

A visit to the salon can be an excellent alternative for elderly clients. A pedicure can be a welcome experience for those who have a difficult time bending over to cut their nails, or who have deteriorating eyesight that makes filing nails difficult. However, sometimes a client's needs extend beyond the scope of a nail license.

It can be difficult to recognize when and how to decline a service. First, it's understandable that a tech

wouldn't want to lose the income from the hour that's been booked. Second, it can feel rude to refuse to care for a client. But the situation can be handled delicately to end with a win-win for both the client and the tech.

When a client has compromised skin, an open wound, or clear signs of infections, it's important to set a precedent and inform the client of the need to reschedule the service. To continue puts the client at a health risk and you at risk for future liability issues. With gentle professionalism, let them know you can't continue until the area has healed. In rare circumstances, you may want to require a physician's release.

It would be easy for a client to feel insecure if a service is denied, so it's important to make sure the client feels respected. One suggestion on how to ease the discomfort of rescheduling their appointment is to offer an alternative service. For example, if an infection is somewhere on the foot, offer to perform a manicure in place of a pedicure.

The client will leave feeling validated and pampered, and you'll have an opportunity to recoup part of the service price.

**POSITIONED AS A PROFESSIONAL**

Offering diabetic pedicures is an excellent niche market that could help grow your business. Position yourself as a well-educated professional by creating specialty pedicure services for diabetics. Promote the services through brochures that explain the precautions you take for diabetic clients. Make the brochures available so clients can hand them out to friends. Stop by local podiatrists offices to introduce yourself and to drop off your brochures. Become the name podiatrists think of when their patients ask for a pedicure referral.

Special care is essential when clients with diabetes come to the salon for a pedicure. But rather than viewing the extra attention as too much work, use it as a way to stand out in a busy, competitive market. By positioning yourself as an expert, you'll not only be able to grow your business, you'll also be offering a much-needed service to customers who need — and appreciate — your expertise. ●

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