Beauty at any age
an industry evolution

HEY SUGAR!
the glycation rage

MYTH-BUSTING
Brazilian-style

Online bookings
friend or foe?

Scratch me happy!
why nails rule
Top 10 dermatology MYTHS DISPELLED

There are many myths surrounding dermatology and you surely come across many confused ideas in your day-to-day beauty consultations, empowering good choices through the sharing of sound knowledge.

By Dr Adam Sheridan, MBBS, FACD, FACMS, FAAFPS.

1. Doctors don’t respect beauty therapists and non-medical providers.

Let’s start with this doozy. Nothing could be further from the truth! The experience at our clinics over the years attests to the value of close connections and networks between varied providers.

We enjoy ongoing good interplay between our dermatology clinic and a network of local and far-flung medical, skin cancer clinic and cosmetic practice GPs, nurse injectors, plastic surgeons, oculoplastic surgeons, beauty therapists, dermal therapists, physiotherapists, naturopaths, Chinese medicine practitioners and podiatrists, to name but a few.

Only last month a patient underwent life-saving removal of a melanoma, thanks to the attentive beauty therapist who noted a changing lesion and duly advised a check with the GP who then referred onto our clinic.

Post-operative follow-up then broadened to involve a tertiary hospital head and neck cancer unit.

Conscientious and caring acts such as these can only ever build respect between all parties involved. We all have a role to play.

2. Shaving hair makes it stronger

This myth has been around forever and is very familiar to all in the beauty industry.

The short cut (no pun intended) to realising that this is false is to recognise that of all the balding men who have shaved their heads to conceal the fact, none have miraculously regrown their crowning glory.

Despite this, many are convinced that after shaving an area of unwanted hair it has grown back stronger and thicker.

What explains this is that new hair starts off much like the head of an oil painter’s brush; fine and pointy. Shaving often cuts this point off to reveal the next portion of the emerging hair, which appears thicker in contrast.

This “optical illusion” is compounded by the fact that plucking, waxing and laser hair tend to remove the entire hair unit. This causes the hair to reset and grow again from scratch, and to develop the pointy brush head once more; such that in comparison shaved hair may seem thicker and stronger.

3. Men don’t care about their appearance

We all know this to be untrue. Men care just as much about their appearance as the other 50 percent of the population!

More often they simply lack the ability to fully express their points of concern. In those instances where they can, may feel that seeking help somehow undermines their masculinity.

We are sure that many of you will have heard the refrain, while tilting their head towards their attentive other half: “I’m only here because SHE told me to come”. Your job is an important one in drawing out valid concerns and helping chart the pathway to their solution.
This may start and end at your salon, or may involve your network of doctors and allied health providers.

4. Fads are bad
Taken to extremes, fads may obviously cause harm. However, on the whole they are a bit of fun and at best may challenge individuals to take a fresh look at their existing attitudes to their skin care and general health and thereby motivate positive change.

5. A tan protects your skin from sun damage and skin cancer
This is a myth of the worst kind, in that it encourages an activity proven to cause premature ageing of the skin and eyes, immunosuppression and fatal skin cancer.

There is a terrible misconception that a suntan somehow toughens and prepares the skin to withstand further sun damage. Nothing could be further from the truth.

In fact, a natural tan signifies that the sun has already done its worst to exert sufficient damage, including to DNA, and to put the skin’s natural defences into overdrive to produce more melalin (melanogenesis); to create a lasting imprint of oxidised melalin — the brown “stain” that is a suntan.

6. Fake tan protects your skin from sun damage and skin cancer
As we all know, a fake tan is a good compromise for those clients who feel tanned skin looks good and who are sensible enough to avoid the achievement of this through damaging sun exposure, melanoma causing sunbeds, and questionable products obtained over the internet to stimulate melanocytes.

However, the illusion that must shattered is that the applied colour dye possesses protective qualities. Fake tans are not SPF-rated and confer no additional protection over the client’s baseline skin colour.

Once a red head or blonde, always a red head or blonde!

7. Dark skin means you don’t have to worry about sun damage
This is another dangerous myth. While it is true that darker skin types may prove more resilient in the sun, significant damage still occurs.
“Unfortunately, less-than-ideal practices have now crept in, with some seeking the prestige and advantages of certain titles, without undergoing the process usually associated with their attainment. Examples abound in all walks of life.”

Skin ageing accelerates and the bane of all darker skin types — pigmented blemishes — increase in number.

Fatal skin cancers may also arise. Dermatologists never tire of recounting the cautionary tale of Bob Marley who died of melanoma of the toe.

It is also important to remember that, as the world becomes ever more interconnected, mixed race backgrounds are on the rise.

It is therefore not uncommon for an individual with dark appearing skin to share the genetic susceptibilities of their paler forefathers and mothers.

8. If I cut out all my moles I can avoid melanoma

This would be true if all melanomas arose from pre-existing moles. Unfortunately, many melanomas arise from previously normal and clear skin, so simply removing all one’s moles is not the solution.

This is not to say that monitoring of moles is unhelpful. Remain vigilant for the changing mole in those individuals with numerous moles of irregular shape or colour.

9. Roaccutane is an evil drug to be avoided at all costs

Roaccutane is a well known brand name for 13-cis retinoic acid, a form of retinoid; i.e. a relative of vitamin A.

Used correctly, it is the most effective treatment known for severe scarring cystic acne. Given correctly, it achieves a cure rate exceeding 95 percent within six to eight months at our practice.

In doing so it also prevents severe and permanent scarring and all the associated problems such as poor self-esteem and confidence.

It is, however, not to be trifled with, and must be prescribed by a properly credentialed dermatologist.

Significant side effects include birth defects, liver toxicity (especially when taken with alcohol), photosensitivity, dry lips and muscle aches.

Controversy exists regarding links to severe conditions such as inflammatory bowel disease and depression, with which it has been associated, but a causal link has never been established in large studies.

Any beauty client with severe unresponsive acne at risk of scarring should at least be made aware of this treatment option and have the opportunity to engage in a balanced and careful discussion regarding it and other available treatments.

10. People who call themselves a “specialist” have always undergone further advanced post-graduate medical training.

It is unfortunate that this is now a myth that needs to be debunked here in Australia.

We have long enjoyed a happy tradition of solid ethics and standards, both moral and professional.

Unfortunately, less-than-ideal practices have now crept in, with some seeking the prestige and advantages of certain titles, without undergoing the process usually associated with their attainment. Examples abound in all walks of life.

It behoves the therapist and their clients to always cross check titles or descriptions such as “skin specialist” to be sure that these correlate with what is implied: advanced post-graduate specialist training overseen by an accredited specialist college over four to five years, and enrollment in continuing medical education.

All recognised specialist colleges publicly disclose their procedures and processes, and list accredited members and their areas of expertise.

The Australasian College of Dermatologists is a good example: www.dermcoll.edu.au

Dr Sheridan is a dermatologist and fellow of The Australasian Academy of Facial Plastic Surgery (AAFPS). For more information visit www.sdsl.com.au

facebook.com/LGFBAustralia
instagram.com/LGFBAustralia
twitter.com/LGFBAustralia

LGFB.ORG.AU
or freecall
1800 650 960

WWW.PROFESSIONALBEAUTY.COM.AU