



BASIC
BOTULINUM TOXIN
TRAINING

PRE-STUDY PACK

The Aesthetics Academy

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Aesthetics
Academy**

Basic - Botulinum toxin training Pre study pack 2

Welcome to the pre-study learning pack. The idea of this pack is to give you some foundation learning to help you as an aesthetic practitioner deliver high quality care to your clients. You need to undertake this prior to commencing your course and bring it with you on day 1.

Bring this pack with you when you attend your study day as we will spend time assessing your pre-learning to enhance the delivery of the programme to you. We will go over your answers to assist you in achieving the best you can from your training course.

This pack is divided in to four sections, which you need to complete. Each question is designed to help you as the practitioner understand more about the topic. If you see a question in red, you need to write your answer or thoughts below it. Don't worry if you don't know something, you will learn it on the course but do try to find the answer beforehand.

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Part A – Business

As you start your business offering botulinum toxin treatment to your clients, you will need to develop a business model. This business model will be ultimately what pays your wages, so it is important to get it right.

Firstly, have a think about how much you should be charging your clients for a botulinum toxin treatment?

How much for one area, two areas and three areas?

How much do your competitors charge in your locality for the same treatments? An easy way to work this out is to ring and ask! If you know what your competitors are offering you can know what works well in your area.

What is the maximum being charged and what is the minimum?

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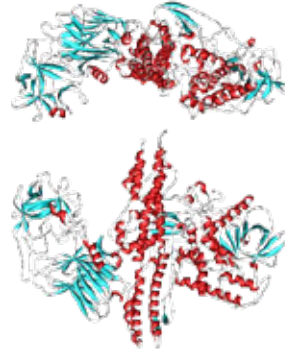
Next work out how much your competitors charge in towns next to you. This is important to know as you expand and advertise your treatments. Does this influence how much you can charge?

What treatments do you currently offer your clients at present? Can you offer them botulinum toxin in addition?

How do you plan on advertising your business?

Part B – Clinical Learning

What is botulinum toxin?



A toxin produced by the bacterium *Clostridium botulinum* that is the most poisonous biological substance known. Botulinum toxin acts as a neurotoxin. It binds to the nerve ending at the point where the nerve joins a muscle, blocking the release by the nerve of the chemical acetylcholine (the principal neurotransmitter at the neuromuscular junction), preventing the muscle from contracting. The result is weakness and paralysis of the muscle or muscles. The blockage of acetylcholine release is irreversible. Function can be recovered by the sprouting of nerve terminals and the formation of new synaptic contacts, which usually takes 2 to 3 months. This is the reason why botulinum toxin lasts around 3 months for most clients!

Very small amounts of botulinum toxin can cause botulism in one of two ways. One way is by ingesting the toxin itself (food borne botulism), as in canned foods. The other way is by infection with the bacterial spores that produce and release the toxin in the body (infectious botulism). The infection may occur in the intestine (intestinal botulism), as in a newborn (infant botulism), or deep within a wound (wound botulism).

There is more than one type of botulinum toxin. Different strains of the bacteria produce eight distinct neurotoxins. All eight types have a similar molecular weight and structure, consisting of a heavy chain and a light chain joined by a disulfide bond (most publications recognize only seven types; there are eight if the subtypes of C, C1 and C2, are counted as separate types. All eight types act in a similar manner. Only types A, B, E and F are known to cause botulism in humans. The toxin is heat labile and can be destroyed if heated at 80 C (175 F) for 10 minutes or longer although the CDC recommends boiling for 10 minutes or longer.

Purified botulinum toxin A was the first bacterial toxin to be used as a medicine. The US Food and Drug Administration (FDA) approved purified botulinum toxin A (Botox) in 1989 for treating two eye conditions: blepharospasm and strabismus. Botox has since found other medical and cosmetic uses and was FDA approved in 2002 for treatment of moderate-to-severe frown lines between the eyebrows known as glabellar lines. Botox is often used in other areas of the face for cosmetic purposes. It has been used in the treatment of other medical conditions as well, including migraine headaches, cervical dystonia (a muscle disorder of the neck muscles), and primary hyperhidrosis (excessive sweating).

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While botulinum toxin is generally considered safe in a clinical setting, there can be serious side effects from its use.

What side effects can you find from botulinum toxin?

What brand names of botulinum toxin have you heard of? Name at least four different brands

Where does botulinum toxin need to be ordered from?

How much does a vial of botulinum toxin cost?

The Skin

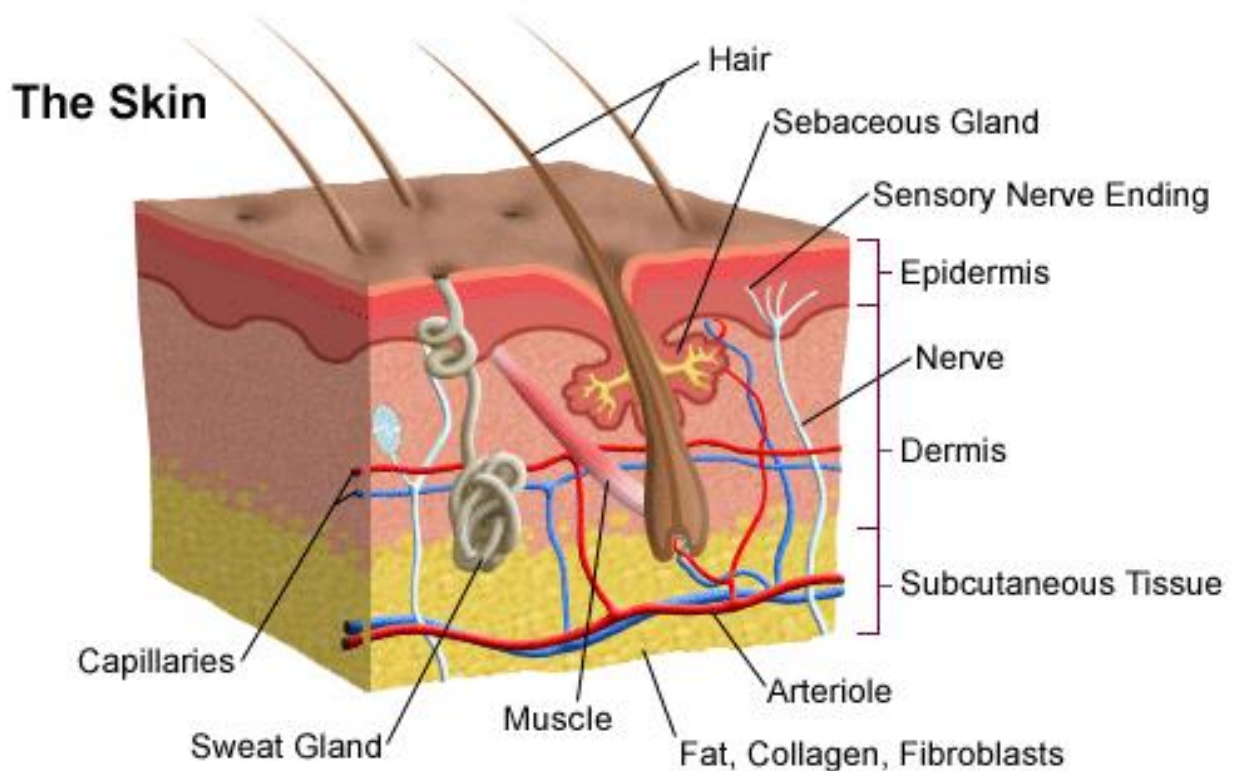
We need to know about the skin and its structure to help us know more about where to inject botulinum toxin.

The skin is the largest organ of the body, with a total area of about 20 square feet. The skin protects us from microbes and the elements, helps regulate body temperature, and permits the sensations of touch, heat, and cold.

The skin has three layers:

- The epidermis, the outermost layer of skin, provides a waterproof barrier and creates our skin tone.
- The dermis, beneath the epidermis, contains tough connective tissue, hair follicles, and sweat glands.
- The deeper subcutaneous tissue (hypodermis) is made of fat and connective tissue.

The skin's colour is created by special cells called melanocytes, which produce the pigment melanin. Melanocytes are located in the epidermis.



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What conditions of the skin would prevent botulinum toxin from being injected?

Muscles of the upper face

The muscles of the upper face are responsible for facial expressions and movement of the face. Each group moves its own individual area.



Muscles commonly treated with botulinum toxin treatment are the frontalis muscle, corrugators, procerus and orbicularis oculi.

On the picture above label where each of these groups of muscles are on the face.

Some clues to help you....

- Orbicularis oculi is a sphincter muscle as it circles the eye socket. Clients may notice and call these 'crows feet'
- The frontalis muscle raises the eyebrows and may show as a wrinkly forehead.
- The procerus and corrugators cause frown lines commonly called number 11's by clients.

Part C – Health and safety

Needlestick injury



Needlestick injuries can occur when undertaking any procedure using a needle with a client. You need to protect yourself from this the best you can.

How should you dispose of a used needle?

Which company can collect used needles from you?

If you pierce or puncture your skin with a used needle, follow this first aid advice immediately:

1. encourage the wound to bleed, ideally by holding it under running water
2. wash the wound using running water and plenty of soap
3. do not scrub the wound while you're washing it
4. do not suck the wound
5. dry the wound and cover it with a waterproof plaster or dressing

You should also seek urgent medical advice as you may need treatment to reduce the risk of getting an infection:

- contact your employer's Occupational Health service if you injure yourself at work
- otherwise call your GP, NHS 111 or go to the nearest accident and emergency (A&E) department

Injuries from needles used in medical procedures are sometimes called needle-stick or sharps injuries. Sharps can include other medical supplies, such as syringes, scalpels and lancets, and glass from broken equipment. Once someone has used a needle, viruses in their blood, such as hepatitis B, hepatitis C or HIV, may contaminate it. This includes needles used to inject illegal drugs. Blood can also contaminate sharps.

Assessing your injury

The healthcare professional treating you will assess the risks to your health and ask about your injury – for example, how and when it happened, or who had used the needle.

Samples of your blood may need to be tested for hepatitis B and C or HIV.

Part D – Industry guidelines

In 2013 Sir Bruce Keogh from NHS England published a report outlining recommendations for practice in aesthetics. Since then numerous reports and implementations have taken place.

Have a read of the report at this [link](#) or google 'Keogh Report Aesthetics' to find it.

The report is 67 pages long and we recommend you read the summary document at the beginning and then read the relevant sections that affect you.

What have you learnt from reading this report?

How does this affect you in practice?

The JJCP (Joint Council for Cosmetic Practitioners)

The JCCP was set up to improve and help regulate the aesthetics industry. You can find out more about the JCCP at link <https://www.jccp.org.uk/Home>

Have a read of their website and see what they do?

Is it relevant to you as an aesthetics practitioner?

What are their aims?

The JCCP Aspiration....

“Seeking to become a ‘thoughtful organisation’ that encourages the pursuit of trustworthiness and effective collaboration amongst its partners in order to protect the public and to promote excellence in practise.”

Why establish JCCP?

To provide credible regulation, protection and guidance for the public/patients in a currently unregulated sector.

The Health Education England (HEE)

The HEE has published several reports aimed at improving and standardising the training available to practitioners who carry out hair restoration surgery and non-surgical cosmetic procedures, such as botox, chemical peels and laser hair removal.

<https://www.hee.nhs.uk/our-work/non-surgical-cosmetic-procedures>

This HEE has published two reports which are available at the link above. Have a read of the report and decide how these affect you.

How does the HEE report affect you?

END OF PRE LEARNING