Complications

& Hyaluronidase





Your Name:

Welcome to your course!

Aim:

To ensure that all student practitioners are knowledgeable in treating complications that may arise following aesthetic procedures in a professional manner and responding to clients' in a calming and re-assuring response to any concerns that they may experience following treatment.

Objective:

That on completion of the course all students/ practitioners will be competent and professional in relation to the procedure and be able to perform at the highest standard to ensure that clients receive the best possible advice and treatment and they will be confident to recommend you and your services to others.

What does the Client fear the most?

- Aesthetic Procedures what do you fear the most?
- Managing Fears how do you manage these?
- Client Support Who do seek support from?

Tailored First Aid

Vasovagal Reaction/Attack - also known as fainting.

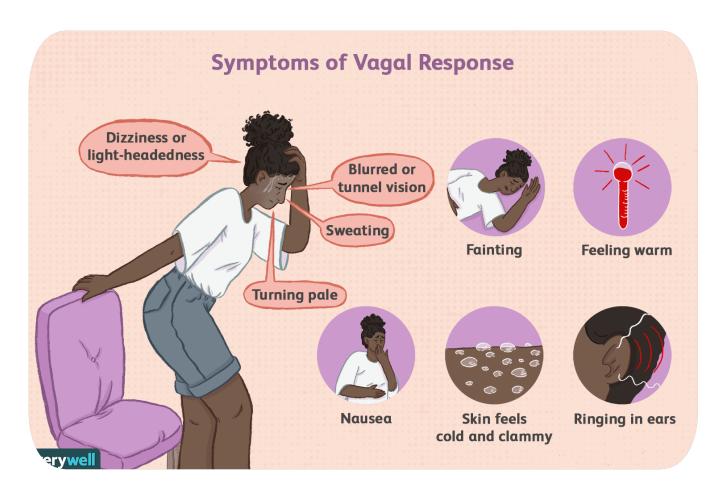
What causes a Vasovagal Attack?

- The heart rate slows.
- A drop in blood pressure

As a result of this the blood supply to the brain is affected which causes fainting and confusion.

Sometimes there may be some difficulty in diagnosing between a Vasovagal attack and a Panic or Anaphylaxis shock. However, if the client does not show any of the following symptoms, then this helps to confirm it is a Vasovagal attack, they are:

- 1. There is no rash evident.
- 2. The client is not experiencing any breathing difficulties.
- 3. There is no indication of any swelling.
- 4. The client has a slow pulse (not rapid which is associated with Anaphylaxis shock).



Managing a Vasovagal Attack

What is the main danger to the client should they experience an attack of this nature? The immediate risk is the injuries they may incur because of falling. (Hitting their head on the floor or object when they fall because of losing consciousness)

Fainting will usually lead to the client laying on the floor, raising the legs is the first thing that you will need to do to after checking the client's airways are clear and they are as comfortable as you can make them, as this will encourage blood to be sent towards the heart and brain to focus on restoring the blood flow during this episode.

What should the practitioner do with the client to restore consciousness and wellbeing to the client?

- The client will already be on the floor and they should be made comfortable.
- Ensure that their legs are raised.
- This will ensure that normal blood flow is restored to the heart and brain.

- Once this is achieved and the client is recovering the practitioner can make comfortable in a chair but should advise the client not to stand until the episode is over and a drink of water should be offered and encouraged.
- Once the client shows improvement and their colour is returning to normal then assist them to a standing position.

There are other symptoms or indicators of a Vasovagal Episode and the practitioner should be acquainted with these, they can include the following:

- 1. Light-headedness
- 2. Feeling warm and clammy (cold sweat)
- 3. Vision may become blurred.
- 4. Tunnel Vision (only being to see directly in front of you no peripheral vision)
- 5. A sense of Nausea
- 6. Skin may become pale.

During a Vasovagal Attack, the client may also exhibit the following.

- A slow and weal pulse.
- Pupils may become dilated.
- Abnormal Movements

As a practitioner you should always remain alert and be aware of any contributing factors that may help to induce a Vasovagal Episode – these early indicators will assist the practitioner in their prompt response to the clients need.

- Room Temperature may be too hot or warm.
- The Client exhibits signs of confusion.
- Skin becomes pale and the client may become restless.
- The client may try to sit up (which may exacerbate the condition)
- The client may experience fitting or minor convulsion (blood flow to the brain is insufficient).

Choking

The practitioner should be confident and able to recognise the signs of choking (this is when a foreign object obstructs the airways) to ensure that there is a successful outcome to the incident. The signs of choking should not be confused with other emergencies that may occur (e.g., heart attacks, respiratory conditions or distress, loss of consciousness and cyanosis). Choking may be mild or severe depending on the obstruction.

What are the signs of Mild / Severe choking?

- Choking occurs whilst consuming foods.
- The individual may grasp their throat / neck.

If conscious the individual should be able to the enquiry of "Are you choking" (they may be able to vocalize and if not, they will nod their head to indicate this is case - this question may appear obvious, but it is important).

- Indication of severe obstruction to the airway
- They are unable to communicate verbally.
- Inability to breathe normally.
- Breathing appears to be wheezy.
- "Silent" coughing
- The individual has lost consciousness.

Choking First Aid:

- The individual should be encouraged in their attempt to cough.
- Give up to 5 back blows. (Support the chest with one hand and lean them forwards. Give up to five sharp blows between shoulder blades with heel of your other hand)
- If five back blows fail to relieve the airway obstruction give up to five abdominal thrusts (stand behind them and place your clenched fist between the navel and the bottom end of the breastbone. Grasp hand with other hand and pull sharply inwards and upwards).



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