



## Waxing Promising Practices Fact Sheet

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### Prevent Double-Dipping

This is an easy and effective way to reduce the health risks related to waxing

### What are the health risks?

Waxing can draw blood and body fluid from the skin. If this occurs, there is a potential to transmit viral, bacterial, and fungal infections between the technician and the client, as well as between clients.<sup>1,2</sup>

Folliculitis (infection of the hair follicle), irritant dermatitis, contact dermatitis, and general skin irritation can also occur.<sup>3</sup>

These health risks can be minimized by using proper infection control techniques and hygiene procedures.

### What happens during a waxing session?

Warm wax (or sugar) is applied to the skin and then stripped away to temporarily remove unwanted body hair. With the exception of hard wax, cloth strips are used to strip wax from the skin. Hard wax, once dry, can be stripped directly off the skin without the use of strips.

Warm waxing is typically done with a wax pot (Figure 1).



Figure 1: Wax pot

Wax is taken from the pot and applied to a client's skin using a spatula. One *batch* of wax is typically used between multiple clients and can easily be contaminated. If wax becomes contaminated, bacteria and viruses can spread between the technician and the client, as well as between clients.

## What tools and instruments are used during a waxing session?

Single-use tools	Multiple-use tools
Wooden spatulas	Wax pot
Waxing strips	Lotion (in pump dispenser)
Tissues or gauze (to wipe up blood or fluid droplets)	Linens
Gloves	Tweezers
Disposable underwear (for intimate waxing procedures)	Scissors

## How can the risk of contamination be minimized?

During the waxing session:

- Waxing should never be performed on broken, irritated, or infected skin.
- Technicians should clean their hands (with soap and water and/or an alcohol-based hand rub) before and after each client service. A new set of latex-free gloves should be worn before performing procedures on a new client; used gloves should be immediately discarded.
- Fresh paper or clean linen should be used on waxing tables/beds between each client; used linen should be laundered.
- Use only single-use spatulas.
- Never double-dip spatulas into wax; there is a risk of spreading contamination from the client's skin to the wax pot. Once a spatula has come in contact with the client's skin, it should never be dipped into the wax again.
- Follow one of these methods to avoid double-dipping:
  1. Use a new spatula each time wax is removed from the pot.
  2. Apply wax directly onto a disposable strip instead of onto the client's skin; this way, the spatula will never come in contact with the client.

3. Use one dedicated spatula to remove wax from the pot, drip or drizzle the wax onto the client's skin and then spread it with a second spatula. The first spatula should never come in contact with either the client's skin or the second spatula.
  4. Separate a quantity of wax from the main wax pot to use on a single client; this quantity should be placed in a small single-use container. Double-dipping is allowed as long as the remaining wax is not reused between clients. Once the waxing procedure is complete, any remaining wax, as well as the single-use container, should be discarded.
- A wax roller should not be used for waxing. The roll-on system uses a wax cartridge and a roller head to apply wax directly onto the client's skin. Hair, skin cells, and wax can be trapped within the roller; the roller cannot be disinfected properly since the hardened wax will prevent contact between the surface of the roller and any disinfectant.
  - Lotions and oils should be dispensed in a pump bottle to prevent cross-contamination.
  - After each procedure, all contact surfaces should be cleaned and disinfected with a low-level disinfectant. Any surfaces contaminated with blood or other body fluids should be disinfected with a high-level disinfectant.
  - All reusable tools, including tweezers and scissors, should be treated as semi-critical items. Tools should be cleaned with soap and water and then immersed in a high to intermediate-level disinfectant for appropriate contact times, prior to and after each waxing procedure.
  - Ultraviolet (UV) lamps, glass bead *sterilizers*, pressure cookers, microwaves, and boiling water do not sterilize tools and should not be used as a substitute to chemical disinfection.
  - All used waxing strips should be disposed of immediately in a hands-free waste receptacle. Waxing strips cannot be reused as wax is difficult to remove from strips once it has hardened.
  - Wax pots/units should be emptied and disinfected with a low-level disinfectant on a regular basis (weekly minimum); gloves should be used during the disinfection.

## The salon or spa in general:

- Alcohol based hand rubs should be readily available in areas where services are being provided. Hands should be cleaned frequently throughout the day using soap and water or alcohol-based hand rub, especially before and after providing services to each client, before eating, after using the toilet, and during cleanup. Alcohol-based hand rubs can be used between clients and with procedures on the same client, as long as the hands are not visibly soiled. If hands are visibly soiled, they must be washed using soap and water.
- Handwash areas should be easily accessible and equipped with a liquid soap dispenser, single use towels (or hands-free dryer), a hands-free waste receptacle, and sinks that supply both hot and cold water.
- The workspace should always be clean and well lit.
- The workspace should contain only the tools and equipment that will be used during the waxing procedure.
- Storage areas should be clean and uncluttered; all chemical bottles and other supplies should be well-labelled.

## Where to go for more information:

National Collaborating Centre for Environmental Health. Comparison of guidelines and regulatory frameworks for personal services establishments. Vancouver, BC: NCCEH; 2010; Available from:

[http://www.ncceh.ca/sites/default/files/PSE\\_Guidelines\\_Comparison\\_Table\\_Sept\\_2010.pdf](http://www.ncceh.ca/sites/default/files/PSE_Guidelines_Comparison_Table_Sept_2010.pdf)

National Collaborating Centre for Environmental Health. Cleaning, Disinfection, and Sterilization at Personal Service Establishments. Vancouver, BC: NCCEH; 2010. – *coming soon*

Canadian Institute of Public Health Inspectors Ontario. Resources. CIPHI Personal Service Setting Factsheets. Waterloo, ON: CIPHI; 2010; Available from:

<http://www.ciphi.on.ca/resources>.

Habia Standards Information Solutions. Code of practice waxing services. Doncaster, UK: Doncaster Metropolitan Borough Council; 2007. Available from:

[http://www.habia.org/uploads/waxing\\_code\\_of\\_practice\\_booklet.pdf](http://www.habia.org/uploads/waxing_code_of_practice_booklet.pdf).

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## **References**

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2. Watts RW, Dall RA. An outbreak of *Pseudomonas* folliculitis in women after leg waxing. *Med J Aust*. 1986 Feb 3;144(3):163-4.
3. Imran D, Mandal A, Erdmann M. Folliculitis secondary to waxing for depilation--a cause for concern. *Ir Med J*. 2003 Sep;96(8):246.

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