

The Effective Use of Cinemagraphic Remedial Make Up to Conceal Disfiguring Scars

Andrea Mc Kittrick^{1*}, Amber Jones¹, Sue Laracy¹ and Andre Bauer²

¹Department of Occupational Therapy, Royal Brisbane and Women's Hospital, Australia

²Consultation Liaison Psychiatry Service, Royal Brisbane and Women's Hospital, Australia

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Corresponding author:

Andrea Mc Kittrick,
Department of Occupational Therapy,
Royal Brisbane and Women's Hospital,
Level 2 Dr James Mayne Building,
Butterfield, Street, Herston, QLD,
Australia, Tel: + (07) 3646 7100; Fax:
(07) 3646 7495; ORCID ID:0000-
0001-6647-272X;
Email:
Andrea.McKittrick@health.qld.gov.au

ABSTRACT

Disfiguring burn scars are a constant reminder to patients that an accident has occurred, and their lives are changed forever. Today social media has become a platform for communication that puts pressure on users to conform or blend into popular culture. Readily shared techniques that enable individuals to filter and manipulate their public image have resulted in increasing pressure to fit in to the perfect physical image. While the use of remedial camouflages make-up is not a new technique to cover burn scars, advances in the field of cinemagraphic makeup provide remedial techniques to disguise and hide skin conditions including scarring and pigmentation. As occupational therapists we discuss the use of camouflage makeup however remedial makeup application techniques are beyond our scope of practice. The aim of this project was to create educational videos for patients to 1. Improve patient's experiences, 2. Help emotional recovery by normalizing patient's experience and 3. Provide autonomy to enable patients to practice and tailor the makeup application techniques.

INTRODUCTION

Disfiguring burn scars are a constant reminder to patients that an accident has occurred, and their lives are changed forever [1-3]. Burn survivors can experience unpleasant social encounters when they attempt to integrate into the community after hospitalization [4]. Over the last 10 years (2008-2018) 515 patients presented to the Professor Pegg Adult Burns Centre at Royal Brisbane and Women's Hospital Queensland with facial burns. 149 of these patients also had severe burn injuries to their hands resulting in visible scarring. Males were over represented compared to females with their ages ranging from 17 to 64 years. In today's society social media has become a platform for communication that puts pressure on the user to conform or blend into popular culture [5]. Readily shared techniques that enable individuals to filter and manipulate their public image have resulted in increasing pressure to fit in to the perfect physical image [6]. A recent systematic review by Kornhaber et al. (2018) [7] found that an altered appearance bears a significant burden on patients' psychosocial health and that camouflage remedial makeup can improve quality of life among patients with skin disfigurement [7,8].

While the use of camouflage remedial make-up is not a new technique to cover burn scars, advances in the field of cinema graphic makeup provide remedial techniques to disguise and hide skin conditions including scarring and pigmentation [9,10]. Learning

to use camouflage make-up can afford burn survivors enhanced self-image and increased confidence to participate in everyday activities [7,10]. As occupational therapists we discuss the use of camouflage remedial makeup however makeup application techniques are beyond our scope of practice.

This study involved partnering with professionals from the Australian Academy of Cinemagraphic Make Up (AACM) to combine their expertise in makeup application techniques to enhance image and minimize disfiguring aspects of scars. The aim of this study was to create educational videos for patients enabling them to practice and tailor the makeup application techniques to their own preferences. It was anticipated that this innovation would enhance patient self-esteem, reduce body image dysphoria and increase their participation in the community. The resource created from this concept can be easily shared with any patients at our facility who sustains scarring as a result of trauma or surgery.

METHODS

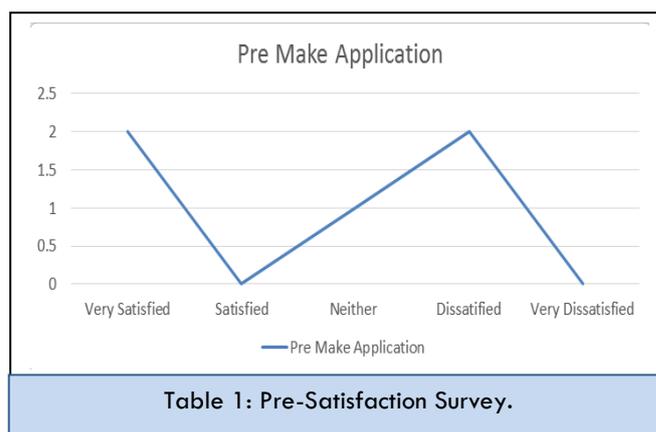
This project was a single cohort design through partnering with professionals from the AACM. Ethical approval was attained through the local ethics body for our facility: HREC/18/QRBW/248 Recruitment of patients with severe burns to their face or hands to volunteer in this project occurred via the RBWH Burns Occupational Therapy outpatient clinic, the RBWH Burns Specialized Outpatient Clinic and the RBWH Burns Data Base. Patients who met the criteria were invited to participate in this research project. Patients were approached by a member of the RBWH Occupational Therapy burns team who was not involved in the study. Patients who were willing to consent were provided with an information sheet and a Patient Informed Consent Form (PICF).

All participants completed a consent form for recording of their image for the use on a media platform and for publication purposes. Prior to partaking in the study participants were asked to complete a pre satisfaction question regarding the impact of their burn scars on their emotional wellbeing (See Appendix A). $n = 5$ participants were enrolled in this study (3 male and 2 female). Table 1 (below) contains the responses to the pre satisfaction survey.

Coordination of study participants, professionals from the AACM and a videographer was facilitated by the primary

author to produce the videos. The filming and educational sessions on remedial makeup application techniques occurred on the same day. Filming and editing of the video were undertaken by a professional videographer who specialized in creating educational resources.

All of the makeup products used in the educational videos is available commercially in locally pharmacies and department stores.



RESULTS

$n=3$ (2 male and 1 female) participated in the videos. 5 participants partook in the education session. A total of three educational videos were compiled focusing on the face and neck, the upper limb and different skin types. Each video was 20 minutes in total running length post completion of the editing phase. Quality of the videos during the editing phase underwent several peer review processes to ensure high quality educational resources were achieved. This peer review process was undertaken by the Director of Occupational Therapy Services RBWH, the Principal Communications Advisor RBWH and participant feedback.

Participants were asked to complete a satisfaction survey post partaking in the video or after watching the educational video. Three participants reported they were very satisfied and two reported satisfied with the appearances of their scars post make up application. (See Table 2 below)

The literacy of the explanations provided in the videos was assessed during the editing phase. $n = 5$ reported very satisfied with the wording used by the AACM professional pertaining to remedial make up application. Ease of following the instructional steps to apply remedial make up was also reviewed $n = 5$ reported "very easy" to understand.

Participants were also asked to report the frequency they would use the new skills learnt (See Table 3 below).

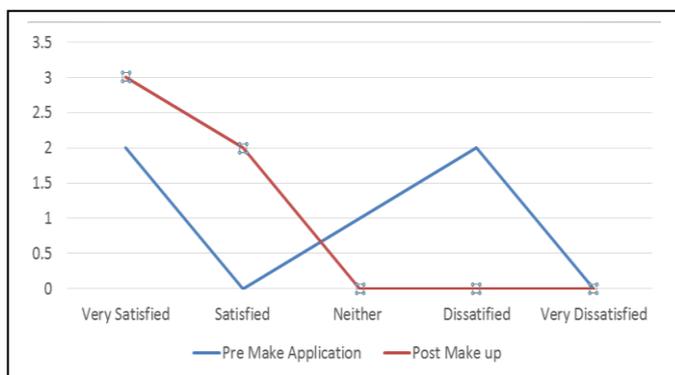


Table 2: Post Satisfaction Survey.

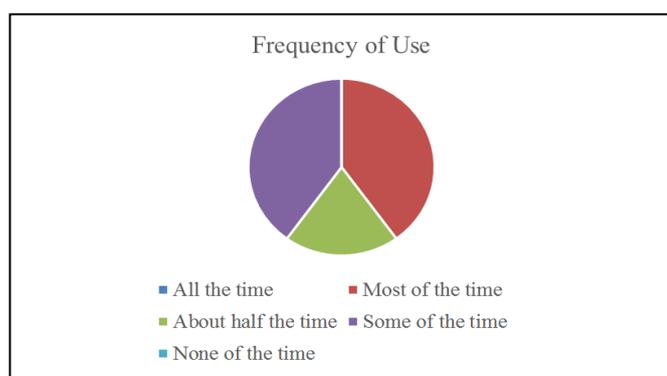


Table 3: How often will you use the techniques learnt?

Study participants were surveyed regarding their confidence in achieving the same results when applying the make-up themselves in the future - Table 4 (below) summarizes the results. n = 5 (100%) of study participants reported they would need to need to practice the make-up techniques at home to be confident with the techniques.

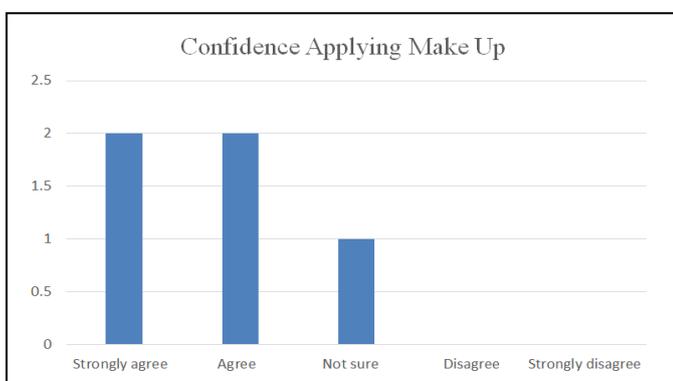


Table 4: How confident are you that you will achieve the same results?

DISCUSSION

We live in a world where body beautiful is the accepted norm. For burn survivors disfiguring scars are a reality [2, 11]. Scaring to the face or hands are not easy to conceal and are visible when participating in everyday life [12]. For the burn survivor trying to re-integrate into society after a protracted hospital stay, they have the added burden of disfiguring scars [13]. These scars elicit questions, curiosity and at times impoliteness from strangers [11]. Such unpleasant encounters and comments further reduce the person's self-esteem and interfere with the person getting back into daily life [2,13,14]. This study enabled the research team to use the expertise of AACM professionals in remedial makeup application techniques to enhance image and minimize disfiguring aspects of scars to create three educational videos. The results found that these educational videos enhanced participant's self-esteem, reduced body image dysphoria and increased their participation in their communities.

These videos can now be accessed by burn survivors during and after their acute hospital admission, allowing them to practice and tailor the makeup application techniques to their own preferences. A limitation of this study is the results of this study cannot be generalized due to the small sample size.

CONCLUSION

Anecdotal feedback from participants was overwhelming positive and all were keen to use the videos to practice the skills learnt. The resource created from this concept can be easily shared with any patients at our facility who sustain scarring as a result of trauma, surgery or skin disfigurement.

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CONFLICTS OF INTEREST

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REFERENCES

1. Stoddard FJ, Ryan CM, Schneider JC. (2015). Physical and psychiatric recovery from burns. *Psychiatric Clinics of North America*. 38: 105-120.
2. McLean LM, Vanessa Rogers, Rachel Kornhaber, Marie-Therese Proctor, Julia Kwiet, et al.(2015). The patient-body relationship and the "lived experience" of a facial burn injury: a phenomenological inquiry of early psychosocial adjustment. *J MultidiscipHealthc*. 8: 377-387.
3. Magee L. (2012). Traumatic injuries and body image, in *Encyclopedia of body image and human appearance*. Elsevier Academic Press: San Diego. p790-797.
4. Lawrence JW, Fauerbach JA. (2011). Body image issues associated with burn injuries, in *Body image: A handbook of science, practice, and prevention*. Cash TF, et al. Editors. 2011, Guilford Press: New York, NY, US. p. 358-365. https://digitalcommons.odu.edu/psychology_books/3/
5. Fardouly J, Vartanian LR. (2016). Social media and body image concerns: Current research and future directions. 9: 1-5.
6. Dittmar H. (2009). How do "body perfect" ideals in the media have a negative impact on body image and behaviors? Factors and processes related to self and identity. 28: 1-8.
7. Kornhaber R, Visentin D, Thapa DK, West S, McKittrick A, et al. (2018). Cosmetic camouflage improves quality of life among patients with skin disfigurement: A systematic review. 27: 98-108.
8. Levy LL, Emer JJ. (2012). Emotional benefit of cosmetic camouflage in the treatment of facial skin conditions: personal experience and review. *Clin CosmetInvestig Dermatol*. 5: 173-182.
9. Monfrecola G, Cacciapuoti S, Capasso C, Delfino M, Fabbrocini G. (2016). Tolerability and camouflaging effect of corrective makeup for acne: Results of a clinical study of a novel face compact cream. *Clinical, Cosmetic and Investigational Dermatology*. 9: 307-313.
10. Goman T. (2016). How can camouflage help with long-term skin problems? *Journal of Community Nursing*. 30: 55-59.
11. Jones BA, Buchanan H, Harcourt D. (2017). The experiences of older adults living with an appearance altering burn injury: An exploratory qualitative study. *Journal of Health Psychology*. 22: 364-374.
12. Lawrence JW.(2012). Burn injuries: The social and emotional impact of scarring, in *Encyclopedia of body image and human appearance*, Cash TF and Cash TF, Editors. 2012, Elsevier Academic Press: San Diego, CA, US. p. 300-306. <https://www.biblio.com/9780123849250>
13. Martin L, Byrnes M, McGarry S, Rea S, Wood F. (2017). Social challenges of visible scarring after severe burn: a qualitative analysis. 43: 76-83.
14. Wisely J, Gaskell S. (2012). Trauma-With special reference to burn injury.In *The Oxford handbook of the psychology of appearance*.