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• Initial Piercing Jewelry p. 20
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November 17th this year marked the 40th anniversary of Gauntlet, the world’s first body piercing studio. For most of you reading this, it will be difficult to conceive what things were like for body mod enthusiasts back in those days. For many of us, our piercings were a sexual fetish that were well concealed under our clothing and revealed only to our most intimate of friends and acquaintances. We remained firmly in the closet.

With the exception of tattoos, other body mods were rare or non-existent in the United States. Unless you lived in a colorful ethnic neighborhood, you were likely to see only piercings of the ears. Even then people with visible piercings could lose their jobs. Despite Gauntlet’s efforts, it was almost 15 years before things began to change. When that change came, it was explosive.

Modern Primitives appeared in 1989 and soon thereafter Shannon Larratt began advocating for more extreme body mods. Piercing shops began springing up like fungi after a spring rain. We saw fashion models strutting down runways sporting navel and nostril rings. Alicia Silverstone appeared in the Aerosmith music video ‘Cryin’ getting her navel “pierced” by Paul King (admittedly, the piercing was staged). Suddenly, visible body mods were everywhere. They have become so common that virtually no one raises an eyebrow anymore.

As most of our readers know, I do the design and layout of The Point. When I was sent the image for this issue’s cover I was a bit taken aback by the lack of visible body modifications. Don’t get me wrong; it’s a great image of Rob Hill, a well-known and respected member of the APP community. But what, I asked my fellow editors and the APP Board, did it have to do with piercing. The response stunned me: “We are seeing more and more people that work in our industry who are choosing not to have visible modifications. We also realize that not everyone that reads our publication is a piercer or modification artist and we want to increase our readership, even having an article specifically aimed at reaching our clients in this issue.” [emphasis mine]

I have to laugh. It has been 40 years, and we have come full circle. While people may be choosing to keep their piercings private again, I can’t help wondering if piercings will ever be as erotic as they were all those years ago.

Change: it is the only thing that is certain in life (other than death and taxes). So why is it that change is so hard for so many? I am one of those many. I consider myself in the know when it comes to what is hip and cool these days, but in all actuality I struggle everyday with the fast paced, significant changes that are happening in the world around us.

In order for any change to happen, small or big, someone has to start the wheels in motion. I am a firm believer in the idea that everyone can make a difference, and together a lot of small differences can lead to great change. We can all have a voice and make sure that it is heard. This is not to say that everyone will listen to your voice, nor will they like what you have to say, but neither of these reasons should ever stop you from using your voice. That is one of the things I like about the body piercing industry as a whole; there are so many accepted ways to get to the same final product. We may not all agree on how to get there, but for the most part we are all open minded enough to realize that this is the case.

Very recently we were able to get a lot of these different opinions together in the same room at the first ever APP Members Retreat in Georgia. You could see change happening—changes in perspectives, methodologies, self esteem—and know...
that further change in practices were to come as a re-
sult of attendance. I was so fortunate to be a part of that
group and those changes.

As an organization the APP stands poised for its next
change with the anticipated election of three new Board
Members this winter. This year there are a number of
outstanding candidates that will be in the running for
these positions. We, as a membership, are so fortunate to
have the ability to directly drive the changes that shape
our organization. So when your ballot arrives, remember
you have a voice and it should be heard.

I hope you enjoy Issue 73 of The Point as we take a
look at some of the current issues and changes on the
horizon for body piercing.

• Marina Pecorino

I realized that in planning my pieces for this issue, I
composed my outlines in terms of an almost methodical
past—present—future format. As a result, it has become
apparent to me that even when planning to discuss the
current events of our industry, I can’t help but relate it
back to where we came from and what has brought us to
this point.

In the past, current events within the body modifi-
cation community were defined within small regional
groups, making the reach and influence fairly limited.
Then as piercing enthusiasts became less closeted and
more prevalent, conferences like the APP Conference
and BMXnet, publications like PFIQ (Piercing Fans In-
ternational Quarterly), and internet communities like
BME became available. With this, the barriers of geogra-
phy were broken and current events were defined more
by the shared interests of individual communities. This
allowed for a broader reach of knowledge and experi-
ence, and for enthusiasts to have more choice available
in their involvement with specific interests. But informa-
tion still had a trickling spread; trends were slower to be
replaced with a newer, better, shinier thing.

With the overwhelming prevalence of social media
and technology, the wealth of knowledge available is in-
credible and the reach of information is limitless. Trends
change almost as quickly as they are born; in a matter
of days, sweeping interest in a particular piercing place-
ment or jewelry style can become global. Unfortunately,
the same can be true in regards to misinformation and
misconceptions surrounding placements, techniques,
jewelry, and aftercare. It is our shared responsibility to
ensure the quality and validity of piercing specific in-
formation available to our peers and the general pub-
lic. Please be mindful of what you are sharing with the
world.

However, even with this global reserve of knowledge,
there are still specific concerns that only affect certain
areas. In this issue, we are sharing some of those con-
cerns seen during the revision process of body art laws
and rules and regulations within the state of Ohio. You
will also get a glimpse into the newly formed UKAPP
and the issues specific to body modification artists in the
European Union and the United Kingdom.

We hope that these articles help you gain an under-
standing and greater world view of what is happening
within the professional realm of your peers.

Shea Lloyd—photo by Kerry Tasker
The APP is always going to be a work in progress, since standards are ever changing with new evidence. Lauded among the guiding principles we maintain as safety standards for our membership is the practice of asepsis. We refer to many procedural acts as practice, as they are rarely ever perfect and require a profound theoretical understanding coupled with regular exercise and critical self observation for improvement. Asepsis requires the right combination of cleaning and sterilization with touching and not touching manual, instrumental and environmental surfaces for infection prevention and control (IPC).

We apply two types of asepsis to reduce or eliminate infection transmission: medical asepsis which emphasizes protection for the client and their environment is more concerned with cleanliness and prevention of the spread of the clients own organisms to other clients, while surgical asepsis which focuses on sterilization and maintaining sterility for items that will be introduced to a wound or piercing cavity or penetrate the skin, thus preventing the introduction of organisms to the client. Medical asepsis can be referred to as clean technique, and surgical asepsis as sterile technique. A thorough and effective means of surgical asepsis should be implemented for all body art procedures. [CE resource]

“Sterile technique is not one set-in-stone method, this is a guideline for establishing your own individual technique.” Nor is it advocating precautions beyond what our sort of minimally invasive ear piercing procedures require for antisepsis and sterility. For those who are curious to learn more about Maximum Sterile Barrier precautions, the CDC HICPAC describes further steps that can be taken for more seriously invasive punctures such as a central venous or arterial catheter. For body artists, an achievable version of surgical asepsis (sterile technique) maintains barriers such as sterile gloves, masks and eye protection, and removes obstacles likely to compromise these barriers such as hanging earrings and necklaces, long hair, rings and watches.

One might say there is no single right way to pierce. Many variations are possible with an understanding and application of asepsis. We are an industry in which studios market based on their specialties, and for some that is participation in continuing education, gaining knowledge, and raising standards.

“I think that when you say ‘aseptic technique,’ a lot of people automatically think ‘operating room’ or ‘surgical procedure,’” explains Kathleen Meehan Arias, MS, CIC, president of the Association for Professionals in Infection Control and Epidemiology (APIC) and director of Arias Infection Control Consulting LLC. “That’s rightly so because that is where the bulk of it is. But whenever you are doing anything that bypasses the skin barrier, you should automatically think aseptic technique.” — Applying Aseptic Technique in all Clinical Settings

This outline of technique suggestions comes from the AORN, APIC and CDC standards and recommended practices as well as a number of textbook resources such as Asepsis, the Right Touch. Much of it needs very little interpretation for our purposes. Safety precautions should result in greater control of the procedure, clinical benefits, reduced harm, and limited liability for negligence.

Rationale: There exist standards for prevention of surgical site infection that apply to even minor invasive elective procedures, and piercing falls within this category by definition.

“When implemented, these guidelines should reduce the risk of disease transmission in the piercing environment, from piercee to piercer, and from piercer to piercee. Based on principles of infection control, the document delineates specific guidelines related to protective attire and barrier techniques; handwashing and care of hands; the use and care of sharp instruments and needles; sterilization or disinfection of instruments; cleaning and disinfection of environmental surfaces; disinfection and the de-
My personal observation is that based on their specialties, and for an industry in which studios market are possible with an understanding right way to pierce. Many variations. One might say there is no single interest. Safety is an ever-evolving field of interest. More input and adaptation. Body art Biosecurity, medical professionals, and university professors. That said, bioscientists, medical professionals, and legal counsel, viewed by legal counsel, qualified. These policies have helped limit risk. Essential reading for anyone who wants to understand how modern body piercing arrived at the place it currently occupies.”—James Weber, Former President Association of Professional Piercers.

Essential reading for everyone with an interest in body piercing; you, your shop staff, and your customers will treasure this book. For more information and to order a copy of Running the Gauntlet signed especially for you by the author, visit runningthegauntlet-book.com. Also available wholesale and retail at safepiercing.org/publications/running-the-gauntlet.

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I believe that is the responsibility of each of us to uphold the values we feel are important, and to continually advance our standards in order to achieve our goals. I do have romantic hopes that over time the industry will move in the direction of pure, validated, ethical materials and practices that are as harmless as possible. A predictable, consistent, safe, simple, and gentle piercing experience is attainable today and can be refined based on these principles and open communication among colleagues.

It should be clear that these position statements in support of surgical asepsis are neither contradictory nor accusatory of others currently using APP minimum standards for medical asepsis according to our 2013 revised Procedure Manual. They build upon them as we are all encouraged to do as Members, employing additional precautions and elective limitations based on evidence and strong theoretical rationale. My preference is to demonstrate best practices as an educator instead of the minimums. If we all did no more than what was required, the industry would not be as interesting.

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The recommendations that I make in addition to APP minimums result from a continually researched process of elimination and adaptation, and they are freely shared for peer review. Please consider this a formal request for comments.
That sentence will forever hold a special place in the heart of the people that attended the first Association of Professional Piercers’ Members Retreat at Hard Labor Creek State Park in Georgia. After getting home and taking time to reflect on the new friendships that were forged, old ones that were strengthened, and realizing exactly how much I learned, I also realized that no one person would be able to fully express what this first was like. So instead of solely giving you my viewpoint, on the following pages, I give to you reflections on our time in the woods.

—Kendra Jane B.
This One Time at Piercer Camp...

photos by April Thomas

Paul King, Mic Rawls, and Brian Skellie cool off from the steamy Georgia humidity in the lake.
I’m still in awe of Camp APP. I’ve worked this hard for many events, but never been so happy about it. I see people transformed after Vegas and just try and remember what that used to be like. It happened for me at this event. I learned more, got to know people better, and even relaxed. It was a truly beautiful group effort. Thank you to my staff at both studios for holding down the fort and helping before, during, and after (I’m not tagging you all but know that I appreciate you). Thank you Nancy Napolitano for coming to fill in. Thank you Monica Sabin for coming early and helping out. Thank you John Johnson, Matt Bavougian, Tamar Strong, Randy Smyre and Woodstock Bader for kicking ass in the kitchen. Thank you speakers for making things interesting. Thank you campers for bringing an open mind and heart to the event. Also, for helping out with dishes, trash runs, box loading, and everything else needed to make things happen. Finally, thank you Paul King for your ongoing support and love. You are an amazing person and friend. It’s helped me be brave about a lot of things just knowing that you believe in me.

—Bethrah Szumski

The anthropology of Pie! Organizer Bethrah Szumski puts the finishing touches on the pie buffet which was out of this world!
It’s difficult to accurately sum up just what went on last week in a single post. Camp was not at all like Conference. I think in a lot of ways it was better. The communal setting and small intimate classes made all the difference. Most campers, like me, were out of their element and comfort zone for sure. Well, everyone but Woodstock, but I think he lives out there full time.

The classes and instructors were the best I have experienced. There was more instructor interaction, and a lot of great hands on learning in small workshop groups. All the kids were very well fed and cared for thanks to Bethrah, Matt, John and Tamar. Thanks guys!

The last night was the peak and culmination of all of our feelings from the entire week. We all stood in a big circle and gave our thoughts on what we were taking away from the week we spent together. It was a beautiful and intense experience. If you were one of the fortunate people to be standing in that circle you understand exactly what I mean. I have never been held in such a loving, massively huge embrace as the one we all shared at the end. The feeling in the room was so positive and strong; it’s hard to describe how wonderful it really was. Many had tears, everyone was smiling and cheering and the hugs, laughter, and love went on into the night. All in all, I got to learn a great deal more about the profession I love and the great people who are at the top of their game making it all happen. I’ll be there for the next one for sure. No doubt.

Thanks again and Love to you all.

—Julian Ganesha
Thank you for allowing me to be your cook. Without hyperbole, this was one of the best weeks of my life. It allowed me to combine some of my greatest passions in life, as well as feeling like I was directly helping those I admire and respect. Las Vegas is a fun and exciting place, but like many others, it is very taxing on me physically and emotionally. Heading out to the Georgia woods with you was rejuvenating for my soul. Cooking for you over the week gave me a way to stay calm and always feel like I had a sense of purpose. With your help I was able to stay upbeat all week, become a more well-rounded piercer and, I hope, a better member of our community. I enjoyed the little bit of private time I got with each of you as you filtered in and out of the kitchen over the week. It feels good to have been entrusted to nurture your bodies while others had been nurturing your minds. I look forward to cooking for you in the future, if you’ll allow it.

—Matt Bavougian

So I survived the Georgia heat, the spiders, the snakes, the scorpions, at the camp where Jason was filmed. I let go of the internet for a week and spent it with some of the most amazing people I have ever met. I had the opportunity to build new relationships and strengthen others. I learned, I cried, I laughed, but most of all I became a better person because of this week. I am not sure I can even put words to it all, but it really truly was an experience of a lifetime. So much love.

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—Kendra Jane B.
This first week back at work after camp has been the best I've had in a long time. Every piercing I did I was very pleased with the final result (which hadn't been the case for the months leading up to camp). I even did a septum and while it was not absolutely perfect, it was one of the best I've ever done and only a hair off on the horizontal plane. She was thrilled with it and hugged me after she looked in the mirror. I had a great time talking to all my clients. Everything just felt perfect. I remember why I decided to make this my career! I'm so happy I got to have this experience and can't wait for Camp APP2016!!! Thank you all so freaking much for helping me get back on track!!! I love you all more than you know!

— Shorty

Camp APP was one of the most intense weeks of my life! The connections I made with so many amazing and passionate people meant the world to me, especially since quite a few of these people were icons for me as a young piercer. Being very shy, I needed an environment like this to really open up to form those bonds. Not only did I learn so much, both in and out of classes, but the love of my life proposed to me, making everything truly magical! I look forward to getting to be part of Camp APP again; hopefully it becomes a regular event!

— Key York

I just wanted to say, thank you to everyone for making this experience so amazing. Super thanks to Bethrah for setting this up, John and Matt for keeping us fed with awesome food, Paul for keeping me laughing all week. It was great getting more one on one time and small group time with everyone. I sometimes feel left out in Vegas because of how long I've been piercing and teaching, but here I felt like I was still a part of the vibrant electricity that flows in the membership. Great job, everyone.

— Luis Garcia
This one time at piercer camp, I met and remet 40 amazing humans!

—Woodstock Bader

Chad Frodnella learns about ear projects with Matt Bavougian, Julian Ganesha, and Luis Garcia

Randy Smyre immersed in learning

Tobias Vallone and Rivka Chavi

Brian Skellie and Christina Blossey gave us all a very hands-on class about best practices and asepsis

An impromptu late night Statim class from Brian Skellie
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ISSUE 73
One of my favorite parts about December is counting every little piece of jewelry in my studio for end of year inventory. For most people, that line was read in a sarcastic tone. In my case, it is true and should have been ended with an exclamation point and been followed with a smiley face. While this article will probably not have any effect on the enthusiasm you may or may not have while counting your jewelry, I do hope to share some tips that could make the experience a little smoother and hopefully more pleasant for you.

I would love to address why end of year inventory is so important and the impact it has on your financial statements and taxation. You are spared from that info in this particular article. It would be a very long article otherwise, maybe even a small book, and I do not want to bore you to death if you are not a current or future business owner. If you are interested in learning more about the administrative aspect of piercing, stay tuned in January for the debut of my blog “The Business of Piercing” which will be filled with plenty of information on the business side of the industry: taxes, accounting, employee relations, legalities, financial statements, and all the aspects that go into keeping your business profitable and compliant with local, state, and federal regulations. For now, let’s delve into how to make your end of year inventory count as smooth as possible.

Planning your end of year inventory count is the best way to minimize stress and increase accuracy. Inform your staff members in advance about inventory planning and give them clear and specific instructions. An accurate count can significantly reduce the chance that you will overpay for taxes related to jewelry investments. Shrinkage, or losses, which can happen in our industry fairly easily: jewelry being dropped on the floor and rolling into the abyss, small parts easily end up in the sink drain of the processing room (along with almost every threaded or pin taper you once had), and the often overlooked comp jewelry that a client received as a no-charge upsize/downsize/“oops, the piercer grabbed the wrong size/color/etc.” An accurate inventory count at the end of the year allows you to properly determine your Cost of Goods Sold (COGS), which directly affects the amount of tax you will pay.

Count All the Things
CHRISTINA SHULL
Owner of Integrity Piercing

Photo by Kendra Jane B.
tions, preferably in writing. During your planning, consider the following:

When will the count be done? Ideally, inventory counting will be done when the studio is closed, or at least during a day when business is expected to be slow. I personally opt to perform the count on a day my studio is closed. It is worth it to me to pay a little bit of overtime in return for a count that is done in a shorter period of time and is more accurate when there are no interruptions from clients or vendors.

Who will be counting the jewelry and what will they be counting? In my two person studio, we split the responsibility pretty much down the middle. My staff member counts and records the jewelry in the front of the studio—everything in the display cases and the bead totes used to store backstock jewelry. I count and record the jewelry in the piercing room, clean room, and any potential defective jewelry that has not been replaced yet.

It is uncommon to have jewelry that should be excluded from the inventory count, but there are a few situations where it can happen. Those situations should be explained in advance. For example, the majority of the jewelry I have on display are items that I would sell if needed, such as jewelry in “body bits” that is switched out periodically or a threaded end that I would sell if it was the last in stock of its color, size, style, etc. However, my anodized captive display has the rings stabilized with glue inside of a shadow box. Upon assembly of that display, I knew the rings would never be sold in the future and they were re-categorized from Jewelry and Aftercare (COGS) to Displays and Decorations (Expense). Another studio I worked at years ago had jewelry on display that was not going to be sold—discontinued “collectors’ items” and antiques. Those items needed to be excluded from the jewelry inventory because they were not items for resale.

What can you do to prepare?

Pre-counting preparation can make the inventory count go smoother. The day before the count, make sure that jewelry is organized and items are in their designated places. If you have recently received a jewelry order, have all jewelry checked in, processed, and put away. Every studio seems to have a place, if not many places where jewelry just ends up; a special cup or drawer can be found in almost any room that often contains random beads, balls, and o-rings. Defective jewelry has a habit of ending up in a variety of different locations. Check for all of these miscellaneous pieces of jewelry and put it all away where it belongs.

How will the count be recorded?

If you have a Point of Sale system, you may have inventory worksheets available that are ready to print and go. I just recently discovered that QuickBooks has printable inventory sheets that I am very excited to use this year! (Reports>Inventory>Physical Inventory Worksheet, for those who are interested). If your POS program does not have dedicated inventory sheets or if you choose not to use them, you can print an item list and use that to record your count. Many studios use the same inventory sheets that they would when counting stock items before placing an order. Blank paper can work as well, although the less detailed the documentation system, the easier it can be to overlook or miscount items.

Marking items that have already been counted is important. Keeping track of what has and has not been counted is not as simple as it may seem. For example, I have multiple threaded end options in one display.
frame and when following inventory sheets, they are far apart alphabetically on the sheet. In this case, I have used something to mark the rows or particular items that have already been counted; masking tape or little strips of post-it notes have both worked well for me. Sometimes I have drawn a quick diagram of the display and what is in it, crossing off pieces as they are counted. It may be easier for you to remove the jewelry from the displays entirely and replace them later. This provides a perfect opportunity to refresh displays for the new year. The important part is finding a method that will easily communicate to all staff members what has already been taken care of.

Double counting is suggested to ensure accuracy and this is when having a POS definitely comes in handy. I consider my POS stock numbers to be fairly close to accurate, with a physical count done to confirm. If the physical count matches the amount in the POS, I consider the single physical count to be fine. If the physical count does not match the amount in the POS, I double and sometimes triple or even quadruple check the physical count before I alter the amount in the POS. Double-checking is crucial when we have large quantities of small items that can be found in many locations. For example, 14g 2mm threaded flowers in my studio can be found in numerous places: a frame that has the more decorative 14g threaded options, in a few display body bits, in the middle of an assembled industrial barbell, on the top of some displayed navel curves, in one of the bead totes for backstock items at the front counter, and with flower navel curve posts in the piercing room. With 6 different places to find one particular item, it can be easy to miscount.

Employees need to be aware of what is counted separately versus together. You need to have consistency between how an item is entered into the POS or otherwise introduced into inventory and how it is counted. For instance, if a double gemmed navel curve was entered into the POS with the top gem and gemmed post being received as a single item, staff members need to consider both components when counting inventory. If there is a gem curved post without a top (usually because individual gems were out of stock when one was needed), this needs to be documented. Failure to document this would result in an assumption of the whole piece, which would lead to a lower COGS and result in paying tax on an asset you do not actually have.

Once you have completed your end of year inventory and extracted the information that you need for filing your taxes, don’t toss the inventory sheets! End of year inventory counts will serve as helpful tools for a variety of things including documentation of the actual inventory count (really useful if you are unlucky enough to be audited), your starting inventory amount for the next year (which you will use along with your next end of year inventory and purchase receipts to determine your COGS next year), and is very helpful when making adjustments to desired inventory stock numbers.

Now is a good time to start preparing for your year end inventory count. Create or update existing inventory sheets, draft a protocol for inventory counting, pick a day and time for the count and schedule some staff members specifically for this project, research additional tips and tricks to make your inventory count smoother. Most importantly, if you don’t want to pay more taxes than you absolutely have to, start getting your inventory numbers down in the next couple of weeks, which helps get your COGS amount up!
Megan Naito—photo by Autumn Swisher
In the beginning, there was one main manufacturer: Gauntlet. Originally, gold was the predominant material for jewelry used for initial body piercings. According to Jim Ward (Running the Gauntlet, pg. 35), “There was an interest in stainless steel as a material for piercing jewelry”, but due to his lack of knowledge or experience with it “every piece was either gold or silver”. Many people used standard earrings, but the sizes were limited. These were primarily ring styles—captive bead and fixed bead. There were other individuals making specialty jewelry, but acquiring a piece required knowing someone. The first jewelry catalogue from the Gauntlet is dated August 15, 1976 and includes many styles of jewelry we still see in use today such as the aforementioned bead ring. In fact the currently popular septum retainer was also a Gauntlet innovation.

In its early days, Gauntlet had one short-lived competitor called Whatever Rings. It was run by a gay couple who were heavy S/M players. They operated out of their West Hollywood apartment and sought business through ads placed in the local gay press and Drummer Magazine, a gay BDSM publication. Their jewelry consisted solely of gold abutted rings with no closure.

At the time Gauntlet began business in 1975, the only stainless steel
jewelry manufacturer of note was Spain’s Custom in Lawton, Oklahoma. It was the jewelry favored by early pioneer Sailor Sid. Although the quality was acceptable, at least by the standards of the time, some objected to the stiffness of the unannealed rings and chose not to offer these products to their customers. Spain’s barbells were also externally threaded. Spain’s Custom advertised in PFIQ until the time Gauntlet began manufacturing and offering stainless steel jewelry of its own in the early 1980s.

Ray Spain, the owner of Spain’s Custom, suffered from back problems which eventually became so severe that he was forced to close his business. Sailor Sid purchased the equipment and began manufacturing jewelry under the name Silver Anchor.

The internally threaded barbell is credited to Tattoo Samy from Frankfurt, Germany—early barbells had no countersink. Over the years, Jim Ward expanded on this, not only manufacturing straight, but also curved and circular barbells. Other companies came and went in the beginning, but Gauntlet remained the staple for many years.

The ‘80s and ‘90s saw a rapid influx of jewelry manufacturers. According to Shawn Porter (SPC, BME), the ‘80s spawned companies like Pleasurable Piercing, Toucan (for gold), Wildcat in the UK, and Silver Anchor (formerly Spain’s Custom).

In the late ‘80s, John Donoghue founded Wildcat, a wholesale manufacturer out of Brighton, UK. During the ‘90s they were the largest supplier of body piercing jewelry in Europe.

In 1990, Josh Warner also brought us Good Art and their whimsical, sometimes over the top advertising. In 2002, they rolled out what was to be their fine jewelry line. By 2005, they rebranded themselves as Good Art HLYWD and ceased production of body jewelry.

Some of the manufacturers originating in the ‘90s have become staples for current piercings today. In 1991, Anatometal, Body Circle, and Industrial Strength were founded. 1991 also brought about “implant grade” materials from Anatometal and Industrial Strength, as well as countersunk ends on barbells.

Unfortunately, the ‘90s also brought us a proliferation of body jewelry from Asia and the birth of the “cheap piercing”.

In 1993 Venus by Maria Tash was brought into the mix. Originally only making steel and niobium captives, she moved on to gold designs in 1994.

In 1995 LeRoi opened its doors in upstate New York and Body Vision Los Angeles in, of course, Los Angeles, California.

1997 brought us two companies, Intrinsic Precision and NeoMetal. Intrinsic was opened in San Francisco, California and has been the sleeper of the body jewelry world. Putting out high quality jewelry, they have flown under the radar until recently. Now they are sought after with a long list of piercers waiting for the opportunity to buy their products. NeoMetal, a small company from Concord, California, created something that would eventually stand the piercing community on its proverbial ear: threadless jewelry. In 2004 they moved to Washington and the threadless movement continued to grow and thrive.

In 1998 Glasswear Studios opened in Ashland, Oregon offering high quality glass jewelry.
JEWELRY CATALOGS OF THE PAST

Late 1980s

1991

1992

THE POINT
1999 brought us Steel Skin, fusing implant grade steel and titanium with dental acrylic ends. In February 2007 Steel Skin was sold and moved to Louisville, Kentucky. They eventually closed in 2010.

In 2002 Gorilla Glass opened in Oaxaca, Mexico fusing traditional and modern designs in glass and obsidian.

While this is by no means a complete timeline of body jewelry manufacturers, it does however highlight, in my opinion, the top (American) companies that made significant contributions to the body piercing world. While I know this list could be MUCH longer, I chose to focus on the companies that produce(d) jewelry for initial piercings.

Authors note: I would like to thank Barry Blanchard, JD Lorenz, Josh Warner, Maria Tash, Sue from NeoMetal and Wickert Beasley for their prompt responses to my questions on dates. Also I would like to thank the rest of the companies that put a timeline on their websites that made my list much easier to compose.
For the last three years, the state of Ohio has been rewriting its body art Rules and Regulations. Beginning in 2013, a number of body modification professionals, health inspectors, medical professionals, legal professionals, Ohio Department of Professional Personnel and more, set out with the purpose of reworking the outdated rules that had been put in place 18 years ago. The Association of Body Art Professionals was formed for the state of Ohio to take on this task. The association had piercers and tattoo artists from the four corners of the state, many of which were fellow APP Members.

Many people don’t realize that when you are dealing with the government and government agencies, you are dealing with two separate things: rules and regulations, and laws. These are two totally different animals. Laws are far more difficult to change and are usually written to be intentionally vague. Revisions or additions to laws must go through the House and Senate in the state and must be signed by the governor. Rules and regulations go into great detail and are usually written by a committee. Laws are set for the state level. However, most states allow local health departments and municipalities to go above the state’s laws in the rules and regulation procedures. For this reason, it is so important to understand what your local municipality requires, because many people, including public officials, don’t realize the significant difference in laws and rules and regulations. We have the issue of travelling artists being allowed to practice their craft in different states. It is like this in most states, however, some states do things a little differently. So make sure you understand how things work in your state, and any states that you may visit while working.

Many people don’t realize that when you are dealing with the government and government agencies, you are dealing with two separate things: rules and regulations, and laws.

Going back 18 years, Ohio had some of the best body art laws in the nation, with matching rules and regulations. Because of this, many states set up their laws similarly to Ohio. I was fortunate enough to be involved in writing the laws way back then, and this made it a little easier to get involved in the changes this time. Due to the fact that they were previously so well written, the Ohio Department of Health (ODH) pretty much left the rules and regulations alone until 2 years ago. Unfortunately, due to the lack of evolution, the rules and regulations had become outdated.

Overhauling the antiquated laws and rules and regulations to reflect the incredible amount of advancement in our industry over that 18 year period was no easy task. Our committee met, on average, once or twice a month, for nine months going over all of the changes that needed to take place. During these meetings, we were able to address many changes that had occurred in our industry.

When originally written, it was stated that studios had to sterilize their own tools. In response to the evolution of pre-sterilized, disposable tools, we added the “Pre-Sterile” law, allowing artists in this state to use pre-sterilized items. Up until this point, an artist was breaking the law if they used pre-sterilized tools. Most states have requirements that rules and regulations be looked at every few years so things like this don’t happen. But, as we all know, if things are working well they never get changed. So I urge each of you to make sure your state stays current with the progress happening in our industry.

The rules and regulations were written with extensive depth and specifications regarding things like quality of jewelry, detailed instruction on how to sterilize instruments, aseptic techniques for set-up and teardown, and even how documentation had to be kept. To ensure that the health inspectors in the state of Ohio were properly trained on the new changes that had taken place, we held back the roll out of the new rules and regulations for six months and offered training to them regarding all of the changes. These training classes were not only open to health inspectors, but also to people in the body art industry, free of charge. This was done so that they could learn how the changes in rules and regula-
We taught ten classes throughout the state over a 6 week period with over three hundred health inspectors in attendance. These classes went into great detail regarding instruction for inspectors. We covered topics such as correct procedures for disinfecting and sterilizing, proper aseptic technique for both tattooing and piercing, what to look for in an exposure control plan, and what works and doesn’t work regarding aftercare. Information on industry standards tats was also discussed. We stressed the importance of inspectors observing procedures within the studios to ensure that artists know what they are doing.

The classes were quite successful and the participants enjoyed the opportunity to be in an interactive environment where they could ask questions. These were the first classes that had been offered to them strictly covering body art in the state of Ohio. We learned that making comparisons to the food industry allowed the inspectors to better comprehend the information being taught from that industry to ours. We were asked to record a final class session in a sound studio using the PowerPoint presentation. This prerecorded session is now used for training new inspectors. We were also invited to teach classes for inspectors at four conferences across the state.

I have maintained a great working relationship with ODH over the last 19 years of working with them. It is important to remember a few things when building and maintaining a working relationship with health departments and inspectors. As much as you may not like it, we are in their world, so dress accordingly. One of the biggest mistakes I’ve seen over the years, and why many in our industry don’t have a working relationship with their public departments, is the simple fact that they don’t dress up. Don’t expect to be seen as a professional if you show up to a meeting dressed in jeans and a t-shirt. Also, don’t talk down to them; treat them as a peer. Health inspectors are just there to do their job and keep the public safe, so if they don’t understand everything in our profession, take the time to educate them. I think you will find that most inspectors welcome any knowledge you can offer them.

Most states have conferences to teach inspectors, and they are always looking for new classes. So feel free to ask your health departments if you might be able to help out and teach a class for them.

*Editor’s Note: Pat was also the APP’s first elected president.*
In the grand scheme, our industry is young, but in reference to how we display our portfolios there has been quite a bit of progress throughout our short history. During the inception of the modern piercing movement, piercers displayed their work selectively in printed photographs, which resulted in a lag between when a piercing was performed and when it was available to showcase. The range of viewing audience was also much smaller as a result of this medium and its reliance on a physical print.

As the internet became more accessible, shops were able to use websites to display their collective works. Websites like BMEzine came into being, allowing piercers to reach a broader audience, beyond the bounds of geography. However, until digital photography became affordable and readily available, this medium was still limited by the lag and expense of developing film and scanning photographs.

Modern digital photography has reached a level where decent digital cameras are built into every smartphone, and standalone digital cameras are widely available. Social media allows us to quickly reach an audience around the world. We hold these sophisticated marketing tools in our pockets, purses, and fanny packs every day, but do we know how to implement them to their fullest potential?

This will be a two part instructional article to help you make the most of these tools. In this first edition, I’ll touch on some tricks and tips for shooting portfolio photographs. In Issue 74, I’ll explain some ways to make sure those photographs have as broad a reach as possible, using the tools allowed through current social media and search engine optimization.

And now on to the good stuff! I hope that you find these quick techniques and tricks useful in displaying your work to the world.

- Variety—Don’t get drawn into only taking photographs of your favorite types of piercings or jewelry styles. Strive to show the full range of options available within your studio and the diversity of your clientele. Showing a mix of gender, race, age, and style helps make your portfolio relatable to a broader range of your clients and allows your potential client an opportunity to visualize themselves and their new or upgraded adornment within your portfolio.
• **Composition**—Your photograph is intended to display your superb piercing technique and the incredible, high polished jewelry you’ve used, so make sure that these are the main focal point. Frame collages have become popular and allow you to show the piercing from multiple angles. These are a great way to show a close up and distant view (with a smiling, happy client, maybe?), and can be especially useful in displaying symmetrically paired piercings.

• **Distance and Zoom**—When zooming in on your subject within your digital camera, image quality loss is irreversible. Therefore you should avoid using the digital zoom, which may leave your image looking pixelated and distorted. It is far better to take a step or three closer to your client to take advantage of the natural optics of the lens. If necessary, crop the image after the fact to get rid of extraneous or distracting aspects or achieve a closer view. That being said, be careful not to get “too close”. This can make the viewer feel uncomfortable and the piercing will lose some of its impact without the rest of the anatomy as a frame of reference.

• **Focus**—If a photograph is out of focus, avoid using it, regardless of how in love with it you may be. An out of focus image will not tell the viewer much about the health of a piercing or quality of the jewelry used. Using a shallow depth of field (choose a large aperture close to f/2.8, for the photography geeks in our midst) to blur the background can be useful if you’re shooting photographs in a visually busy environment. If you forgot to use this setting while taking the photograph, post-processing software like Photoshop, Lightroom, Affinity, Exposure, or photography apps on your smartphone can accomplish this after the fact as well. If you have the option, try using a minimalistic or subtle background, but still aim for some color and texture when possible.

• **Lighting**—If you have the environment available to take portfolio photographs outside or close to a window, choose a spot that is well-lit by indirect sunlight. Unrestrained direct sunlight can cause harsh shadows and loss of detail in highlights. If you’re shooting in a windowless room, positioning multiple light sources with natural spectrum light bulbs can simulate indirect sunlight. If you’re shooting with a DSLR, using a bounce flash directed at a white wall behind you can help evenly illuminate your client and their beautiful jewelry. Regardless of your lighting, watch out for unintentional shadows near eyes, noses, and chins.

• **Color Balance**—Using natural spectrum lighting is a great start to provide the truest colors for jewelry and the healthiest skin tones for your clients, but color correction can be done in post-production with most photography processing software and apps, like the ones mentioned earlier. Be careful about color balance; aim to make your whites as true as possible. Photographs with a greenish or yellowish hue may cause your client to look sickly. A reddish hue may cause your client to look flushed. If your camera has an option for white balance, set it appropriately based on your environment or take multiple photos with the white balance set a few different ways.

• **Quality of Work**—Avoid including angry, bloody, or otherwise unappealing piercings; happily healed piercings should make up the vast majority of your portfolio. If you are not pleased with the angle or placement, or if the perspective of the photo makes it look like something is wonky, choose a different photo or piercing. Your portfolio does not need to include every piercing you’ve performed or every photograph you’ve taken. It should be a selection of your very best work and it should show that the piercings you perform will heal well and elegantly accentuate the anatomy that surrounds them.

Source: *Cold Steel*
CHILDREN’S EAR PIERCINGS—A TAKE HOME FOR CLIENTS

KENDRA JANE B, APRIL THOMAS, & JULIE TAYLOR

Most of us receive at least one phone a week—sometimes even a day—from a concerned parent wanting to know the best option to pierce their child’s lobes. We are frequently seeing that the safe piercing message is reaching the masses. However, we are still seeing many piercings done with piercing guns. Whether it is because they are unable to find the information in the places they are visiting or because they are intimidated to visit their local tattoo or piercing studio to have their questions answered, parents are using less than favorable methods to pierce their children’s lobes. Perhaps they are leery of taking their six or seven year old daughter or son into said studio because of things that have nothing to do with piercing, such as the music, a worry of profanity or inappropriate behaviour, etc.

Within this article, we have presented similar information in two forms. The first is intended for an audience with a more complete understanding of piercing industry jargon and intricacies. The second presentation has been simplified with our clients in mind. Our intention was to provide something that you are able to print and send home. You can choose which presentation is most appropriate for your target audience. Either way, we encourage you to share the link to this article and re-post on every site that questions the safest way to pierce children’s ears.

What is the APP’s position on ear piercing guns?

It is the position of the Association of Professional Piercers that only sterile disposable equipment is suitable for body piercing, and that only materials which are certified as safe for internal implant should be placed inside a fresh or unhealed piercing. We consider any procedure that places vulnerable tissue in contact with either non-sterile equipment or jewelry that is not considered medically safe for long-term internal wear to be unsafe. Such procedures place the health of recipients at an unacceptable risk. For this reason, APP Members may not use reusable ear piercing guns for any type of piercing procedure.

Reusable ear piercing guns can put clients in direct contact with the blood and bodily fluids of previous clients.

Although they can become contaminated with blood-borne pathogens dozens of times in one day, ear piercing guns are often not sanitized in a medically recognized way. Plastic ear piercing guns cannot be autoclave sterilized and may not be sufficiently cleaned between use on multiple clients. Even if the antiseptic wipes used were able to kill all pathogens on contact, simply wiping the external surfaces of the gun with isopropyl alcohol or other antiseptics does not kill pathogens within the working parts of the gun. Blood from one client can become aerosolized, becoming airborne in microscopic particles, and contaminate the inside components of the gun. The next client’s tissue and jewelry may come into contact with these contaminated surfaces. This creates the possibility of transmitting bloodborne disease-causing microorganisms through such ear piercing, as many medical studies report.

As is now well known, the Hepatitis virus can live for extended periods of time on inanimate surfaces, and could be harbored within a piercing gun for several weeks or more. Hepatitis and common staph infections, which could be found on such surfaces, constitute a serious public health threat if they are introduced into even one reusable piercing gun. Considering the
dozens of clients whose initial piercings may have direct contact with a single gun in one day, this is a cause for serious concern. Babies, young children, and others with immature or compromised immune systems may be at higher risk.

Additionally, it has not been documented how often piercing guns malfunction. Some operators report that the earring adapter that holds the jewelry will often not release the earring, requiring its removal with pliers. These pliers, which contact contaminated jewelry immediately after it has passed through the client's tissue, may be reused on multiple customers without full sterilization. Few, if any, gun piercing establishments possess the expensive sterilization equipment (steam autoclave or chemclave) necessary for such a process.

**Piercing guns can cause significant tissue damage.**

Though slightly pointy in appearance, most ear piercing studs are quite dull. Therefore, these instruments use excessive pressure over a larger surface area in order to force the metal shaft through the skin. The effect on the body is more like a crush injury than a piercing and causes similar tissue damage. Medically, this is referred to as “blunt force trauma.” At the least, it can result in significant pain and swelling for the client, but it also has the potential to cause scarring and increased incidence of auricular chondritis, a severe tissue disfigurement.

Occasionally the intense pressure and speed of the gun's spring-loaded mechanism is not sufficient to force the blunt jewelry through the flesh. In these cases, the earring stud may become lodged part way through the client's ear. The gun operator, who may not be trained to deal with this possibility, has two options. S/he can remove the jewelry and repierce the ear, risking contamination of the gun and surrounding environment with blood flow from the original wound. Alternately, the operator can attempt to manually force the stud through the client's flesh, causing excessive trauma to the client and risking a needlestick-type injury for the operator. How often such gun malfunction occurs has not been documented by manufacturers, but some gun operators report that it is frequent.

When used on structural tissue such as cartilage, more serious complications such as auricular chondritis, shattered cartilage, and excessive scarring are common. Gun piercings can result in the separation of subcutaneous fascia from cartilage tissue, creating spaces in which fluids collect. This can lead to both temporary swelling and permanent lumps of tissue at or near the piercing site. These range from mildly annoying to grossly disfiguring, and some require surgery to correct. Incidence can be minimized by having the piercing performed with a sharp surgical needle, which slides smoothly through the tissue and causes less tissue separation. A trained piercer will also use a post-piercing pressure technique that minimizes hypertrophic scar formation.

Cartilage has less blood flow than lobe tissue and a correspondingly longer healing time. Therefore infections in this area are much more common and can be much more destructive. The use of non-sterile piercing equipment and insufficient aftercare has been associated with increased incidence of auricular chondritis, a severe and disfiguring infection in cartilage tissue. This can result in deformity and collapse of structural ear tissue, requiring antibiotic therapy and extensive reconstructive surgery to correct. Again, medical literature has documented many such cases and is available on request.

**The length and design of gun studs is inappropriate for healing piercings.**

Ear piercing studs are too short for some earlobes and most cartilage. Initially, the pressure of the gun's mechanism is sufficient to force the pieces to lock over the tissue. However, once they are locked on, the compressed tissue cannot return to its normal state. This constriction causes further irritation. At the least, the diminished air and blood circulation in the compressed tissue can lead to prolonged healing, minor complications, and scarring. More disturbingly, the pressure of such tight jewelry can result in additional swelling and impaction. Both piercers and medical personnel have seen stud gun jewelry completely embedded in ear lobes and cartilage (as well as navels, nostrils and lips), even when pierced “properly” with a gun. This may require the jewelry to be
cut out surgically, particularly in cases where one or both sides of the gun stud have disappeared completely beneath the surface of the skin. Such risk is minimal when jewelry is custom fit to the anatomy of the client, and installed with a needle piercing technique which creates less trauma and swelling. Custom fit jewelry should allow sufficient room for swelling and can be downsized to fit snugly on healed tissue.

Jewelry that fits too closely also increases the risk of infection because it does not allow for thorough cleaning. During normal healing, body fluids containing cellular discharge and other products of the healing process are excreted from the piercing. But with inappropriate jewelry, they can become trapped around the fistula. The fluid coagulates, becoming sticky and trapping bacteria against the skin. Unless thoroughly and frequently removed, this becomes an invitation for secondary infection. Again, these consequences can be avoided with implant-grade jewelry that is designed for ease of cleaning and long-term wear.

**Not all piercing jewelry is safe for prolonged wear.**

Most ear piercing studs are not made of materials certified by the FDA, ASTM, or ISO as safe for long term implant in the human body. Even when coated in non-toxic gold plating, materials from underlying alloys can leach into human tissue through corrosion, scratches and surface defects, causing cytotoxicity and allergic reaction. Since manufacturing a durable corrosion- and defect-free coating for such studs is extremely difficult, medical literature considers only implant grade steel (ASTM F138) and titanium (ASTM F67 and ASTM F136) to be appropriate for piercing jewelry composition. Studs made of any other materials, including non-implant grade steel (steel not batch certified as ASTM F138), should not be used, regardless of the presence of surface plating.

**Misuse of ear piercing guns is extremely common.**

Even though many manufacturers’ instructions and local regulations prohibit it, some gun operators do not stop at piercing only the lobes, and may pierce ear cartilage, nostrils, navels, eyebrows, tongues and other body parts with the ear stud guns. This is absolutely inappropriate and very dangerous.

Although gun piercing establishments usually train their operators, this training is not standardized and may amount to merely viewing a video, reading an instruction booklet, and/or practicing on cosmetic sponges or other employees. Allegations have been made that some establishments do not inform their employees of the serious risks involved in both performing and receiving gun piercings, and do not instruct staff on how to deal with situations such as client medical complications or gun malfunction. Indeed, surveys conducted in jewelry stores, beauty parlors, and mall kiosks in England and the US revealed that many employees had little knowledge of risks or risk management related to their procedure.

Considering that a large proportion of gun operators’ clientele are minors or young adults, it is not surprising that few gun piercing complications are reported to medical personnel. Many clients may have been pierced without the knowledge or consent of parents or guardians who provide healthcare access. Therefore, the majority of the infections, scarring and minor complications may go unreported and untreated. Furthermore, because of the ease of acquiring a gun piercing and the lack of awareness of risk, many consumers fail to associate their negative experiences with the piercing gun itself. They believe that, since it is quicker and easier to acquire a gun piercing than a manicure, gun piercing must be inherently risk-free. Often it is only when complications prove so severe as to require immediate medical attention that the connection is made and gun stud complications get reported to medical personnel.

Despite these pronounced risks associated with gun piercing, most areas allow gun operators to perform piercings without supervision. Recent legislation has begun to prohibit the use of guns on ear cartilage and other non-lobe locations, and the state of New Hampshire has made all non-sterile equipment illegal, but these changes are not yet nationwide. It is our hope that, with accurate and adequate information, consumers and the legislatures will understand and therefore reject the use of gun piercing in the interests of the public health.
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Proper technique, sterility, piercing placement, aftercare, jewelry material, and style are among the many important factors that go into a successful piercing. First, let’s look at the technique itself.

Piercing guns use pressure to force a pointed object, the jewelry, through the skin. While these mechanisms may seem like a quick, easy, and convenient way of creating holes, they can have major drawbacks in terms of tissue damage, inappropriate jewelry designs, and sterility. These concerns have been documented in medical literature over the years and provide proof of these concerns.

Due to the dull nature of the jewelry used in piercing guns, more damage is caused to the tissue when compared to piercings done with quality piercing needles. The effects are similar to a blunt force trauma including significant pain, swelling, scarring, and an increased potential for complications. The gun then pinches the back of the jewelry in place snugly against the skin, allowing no way for the new wound to breathe and heal properly. The customer is often told to turn the jewelry, which only further pushes growing bacteria into the wound, increasing the risk of infection and delaying the healing process considerably.

Additionally, it has not been documented how often piercing guns malfunction. Some operators report that the earring adapter that holds the jewelry often will not release the earring, requiring its removal with pliers. These pliers, which contact contaminated jewelry immediately after it has passed through the client’s tissue, may be reused on multiple customers without full sterilization. Few, if any, gun piercing establishments possess the expensive sterilization equipment necessary for such a process. Occasionally the intense pressure and speed of the gun’s spring-loaded mechanism is not sufficient to force the blunt jewelry through the flesh. In these cases, the earring stud may become lodged part way through the client’s ear. The gun operator, who may not be trained to deal with this possibility, has two options. S/he can remove the jewelry and repierce the ear, risking contamination of the gun and surrounding environment by blood flow from the original wound. Alternately, the operator can attempt to manually force the stud through the client’s flesh, causing excessive trauma to the client and risking a needlestick-type injury for the operator.

There may also be a greater likelihood of more serious complications when cartilage or structural tissue such as noses are pierced using a piercing gun. This type of tissue (cartilage) has less blood supply than earlobe tissue and therefore a correspondingly longer healing time; this means that infection in this area can be more likely and more destructive.

Another common concern is sterilization and asepsis. Any kind of procedure which involves contact with blood or bodily fluids requires strict adherence to cross-contamination prevention.

As is now well known, the hepatitis virus can live for extended periods of time on inanimate surfaces, and could be harbored within a reusable piercing gun for...

Diagram showing the differences in the the “cutting edge” of ear piercing studs used in piercing guns. The bottom silhouette is a single use hollow needle.

Reference:
Ear piercing techniques and their effect on cartilage, a histologic study
M.P.van Wijka,* J.A.Kummerb, M.Kona
several weeks or more. Hepatitis and common staph infections, which could be found on such surfaces, constitute a serious public health threat if they are introduced into even one reusable piercing gun. Considering the dozens of clients whose initial piercings may have direct contact with a single gun in one day, this is a cause for serious concern. Babies, young children, and others with immature or compromised immune systems may be at a higher risk.

Some will argue that the piercing gun never comes in contact directly with a customer’s skin, or is sterilized or disposed of after a single use. This might be true, but the gun operator’s hands do—if they touch the customer’s skin and then touch the gun, the gun is now contaminated. When the gun drives the stud through the flesh—whether or not the skin starts to bleed—there is no way of knowing whether or not tiny particles of blood have been dispersed into the air contaminating everything around it. Piercing guns are usually made with plastic and cannot be adequately cleaned and sterilized for reuse. A quick wipe with an antiseptic pad is not effective in removing disease-carrying blood. Although many manufacturers now make disposable options, these do not negate concerns regarding possible damage to tissue, jewelry quality, or inadequate staff training.

The Association of Professional Piercers does not support the use of piercing guns because the reusable versions can’t be sterilized using APP approved equipment, such as an autoclave. Without proper sterilization, the risk of spreading diseases such as Hepatitis and staph infections increase.

The Bottom Line: Professional piercers use a more modern approach to piercing that’s less traumatic, cleaner, and more likely to result in a smooth healing process.

Child’s ear piercings by Becky Dill at Cold Steel Piercing. Photo by Danielle Greenwood for beckyadorned.tumblr.com
The LBP—Asociación Latinoamericana de Body Piercing AC (Latin American Association of Body Piercing) Conference was held in Tlaxcala, Mexico at the Trinity Vacation Center from November 2-6, 2015. This is the third annual official LBP Conference, and the second I was lucky enough to participate in.

The LBP Conference has a special magic air that surrounds it. While it is officially a Spanish speaking conference, piercers from around the globe were in attendance. The remote location of the facility means that most attendees and speakers arrive via buses provided by the LBP. These bus rides are wonderful, which feels weird to say, but the whole trip from Mexico City to the vacation center is a wonderful bonding experience.

My experiences vary from practicing my classes to thoughtful discussions, even sing-alongs to ‘80s songs. It fosters a wonderful sense of community amongst the speakers and attendees.

In terms of setting, this year’s LBP was spectacular. The Trinity Vacation Center is a wonderful facility, with brick walls and a stunning view of the volcanic mountains surrounding it. The combination of the remote location, climate (warm days and chilly nights), mountain air and the time of year (Día de Muertos) made for a unique experience that I believe all the attendees enjoyed.

Classes were held throughout the week, and were located in two classrooms connected by a courtyard with a Day of the Dead altar at the center.

This year I was thrilled to present two separate classes: “Disposable Piercing Studios” and “Navel Piercing: Advanced Fundamentals”. My Spanish is very limited (although the full immersion allowed me to follow along with many conversations, even if I didn’t have the means to contribute in Spanish) so I was fortunate to have translators assist me.

“Disposable Piercing Studios” was co-instructed by Oscar Sandoval, who speaks fluent Spanish and added quite a bit to the presentation. I also had the assistance of Ruben Lew and Jesus “Sala” Cabanas. These two have several projects in the works geared toward Spanish speaking piercers, and I am looking forward to what they have planned.

In my “Navel Piercing: Advanced Fundamentals” class I was joined by...
THE BETO MADRIGAL AWARD
presented to Ed Chavarria
at the LBP Gala
by Beto’s brother Ennio Madrigal

Unfortunately Beto took his own life last year, Beto had a large role in the LBP and this new award akin to the APP’s Josh Prentice volunteer award was to recognize outstanding volunteer work and contributions to the piercing community.

Spanish Original:
Muy Feliz y agradecido con LBP... por seguir honrando la memoria y el aporte de mi hermano Beto ...para con la industria del Body Piercing Latinoamericano ... Para mi es un orgullo que hayan nombrado con el nombre Beto Madrigal el premio que entregarán año con año en la gala de Latinoamérica Body Piercing... Este año le correspondió a nuestro querido Eduardo Chavarria....recibir este importante reconocimiento por su entrega y compromiso para con la industria del Body Piercing. Felicidades mi queridísimo Ed...!!! Sé que Beto se encuentra feliz de que te entregarán ...tan merecido reconocimiento..!!

Thank you, Luis Garcia,
for an English Translation:
I am very happy and thankful to the LBP for continuing to honor the memory of my brother Beto and the support he gave the body piercing industry in Latin America. I am proud that they named the service award after my brother, Beto Madrigal, and that they will be presenting this award year after year at the LBP gala. This year the award was given to the beloved Eduardo Chavarria for his hard work and commitment, not only to the Latin American body piercing community, but the industry worldwide. Congratulations Ed. I know that Beto is happy that you were honored with this much deserved award.

Ana Paula Escalante; she seems to be effortlessly everywhere, always helping with everything ensuring a great LBP Conference. There were seemingly endless choices of classes to choose from, but the conference still felt tightly curated. There were presentations by Bethrah Szumski, Autumn Swisher, Nick Wolak, Mauricio Torres, Javier Fingazz, Jesus “Sala” Cabanas, Ruben Lew, Danny Yerna, Luis Garcia, Didier Suarez, Erika Gomez, Oscar Sandoval, Eduardo Chavarria, Ryan Ouellette, Alejandro Hernandez, Ana Paula Escalante and Matias “Rata” Tafel.

I think when one attends a new conference of this type, they can be tempted to draw comparisons and contrasts to familiar events they have attended. What I think is a more honest approach to evaluating any conference is to judge it on its own merits and those alone. The LBP Conference is truly wonderful. The quality of classes are superb. The facility is wonderful, and the people make this experience extra special. The LBP Conference either intentionally or as a happy accident fosters deep friendships amongst piercers who may have otherwise never met. I can’t say enough positive things about the excellent job the LBP Board of Directors and their volunteers do. I hope to be a part of LBP Conferences for many years to come, and I look forward to seeing so many LBP attendees at the APP Conference next year.
ASOCIACIÓN LATINOAMERICANA DE BODY PIERCING AC
(Latin American Association of Body Piercing)
CONFERENCIA—2015
RINGS ARE NOT THE DEVIL

JEF SAUNDERS
Membership Liaison for the Board of Directors

Editor’s Note: This article is reprinted from a May 22, 2015 blog post on Confessions of a Piercing Nerd.

The main focus of my blog is to discuss the very basics of body piercing. There are people who write beautifully about health and safety issues. There are websites and Tumblr pages with superb photos of jewelry and piercings. That isn’t this blog. I’m the guy that writes about nostril piercings for the better part of two years. If this blog were a basketball coach, it would have you running lay-up drills all day long.

I want to address the challenges and benefits of piercing with rings, and compare and contrast them with barbells and curved barbells. Much of this will seem rudimentary, but it will give us the basis on which to address the shades of grey involved in jewelry selection. Spelling the basics out will hopefully lead us toward tackling bigger issues.

As a piercer, there are opportunities to draw a clear line in the sand between “correct” and “incorrect”. I can very easily point to sterile jewelry as a necessity, and unsterilized jewelry as unsafe.

Separating issues in body piercing as “yes or no” questions simplifies our jobs. Piercers are constantly weighing lots of different variables: placement, materials, skin prep, technique, and so on. We crave simple answers because there are enough complicating factors in our work already.

To put it bluntly: Piercers really like “always” and “never”... we hate “sometimes”.

Unfortunately, piercers often try to force the square peg of a complicated idea into the round hole of “right or
wrong". In my opinion: that's lazy. Pretending the complex is actually simple doesn't really benefit anyone. The piercing community needs to allow itself to admit what many piercers already know: sometimes rings in fresh piercings are okay. What's worse, and this is a very unpopular opinion: sometimes rings are the better option for fresh piercings.

Anyone who started piercing in the 1990’s or earlier is thinking “duh”, but many of our younger colleagues are scandalized by this notion.

(For what it’s worth… we were wrong about plenty in the 90’s.)

Rings are curvy.

Bear with me. Obviously, rings have a curvature. How curvy they are depends on the diameter of the ring. Maybe you’ve never considered that. The smaller the diameter of the ring, the more curve a piercing has to contend with. The Large Hadron Collider is an enormous underground circle... It is such a big ring that the curvature is barely noticeable. This plays into our size selection, and influences our decision if a ring is appropriate at all.

Any excuse for a Large Hadron Collider photo is a good excuse.

Let’s take a piece of tissue, for example: an ear lobe. This particular ear lobe is ⅛" (~4.75mm) thick. In general, the curvature of a ring is irritating to the tissue unless it is at least double the thickness of the tissue in diameter. (I love that Imperial measurements actually are helpful here) ⅛" of tissue requires at least ⅛" diameter rings. Any smaller in diameter is irritating to the tissue, because the curvature of the ring is too small.

Every good piercer has a really bad piercer within a 15 minute drive from them. It’s a law of nature, I suppose. Those good piercers tend to see a lot of nipple piercings from that bad piercer with small rings in them. Those nipples are irritated and, in many cases, the jewelry is growing out. Why? Bad piercers have an almost uncanny ability of putting exactly the wrong sized rings in nipples. I don’t know why, but 14g ⅛" rings in nipples (regardless of the size of the nipple) is the calling card of the local bad piercing studio. The curvature of rings that size usually is not a problem for small male nipples. Larger nipples (usually female) can’t handle rings that size. They put pressure on the channel of the piercing, which causes irritation and migration.

Too Deep, Too Small
Let's take a nipple that measures ¾" across for example. The smallest diameter ring you could conceive of putting in that piercing is ¾" (~19mm). More likely that nipple would need ¾ inch (~22mm) or larger, and no client wants a door knocker on their breast. Also, rings that diameter cause other problems (more on that later).

If you are reading this blog and aren't sure if you are the culprit, there's an easy test. When you put rings in nipples, do they stick straight out at first (instead of hanging naturally with gravity)? Those rings are far too small, or you are piercing in the areola, or both. Stop it.

Nipple piercings have taught good piercers that barbells are better, because properly sized rings are aesthetically displeasing (and can cause additional problems). Barbells genuinely are the best choice... On nipples.

Good piercers, unfortunately, have developed a false binary from these experiences. That being rings=bad, barbells=good. Many don’t make the connections as to why rings don’t work well in this particular instance, but barbells do. They see the results, and they draw far-reaching conclusions based on them.

The gauge of the ring you pierce with matters a LOT.

Thin rings are irritating to tissue. Thin rings have a “sharpness” to them. Often times our clients want both thin jewelry and small diameter. Should they choose to ignore our advice and change their jewelry to something inappropriate anyway... We get to see how the combination of small diameter and thin gauge rings can ruin good piercings.

In the bad old days of body piercing, the truly worst shops would try to buy as little jewelry as possible. If they could buy two hundred 14 gauge ¾" rings at a discount, they were putting 14 gauge ¾" rings in as many piercings as possible.

What’s frustrating about this approach is that their results were not always as terrible as you’d imagine. Those awful piercer’s female nipple piercings were complete disasters, sure. But in the rare case they talked someone into a nostril or helix piercing with one of these rings, the results were, for better or worse, a surprisingly healed piercing.

Aesthetically, a ring that size in an average nostril piercing is a pretty bad look. On the other hand, the gauge is thick enough that the curvature of the ring isn’t too irritating. Add to that the diameter of the ring is so big, thin nostril tissue hardly recognizes that the jewelry is curved. These shops weren’t doing aesthetically sound, safe, or well thought out work. Despite all that they fell ass-backwards into a situation that worked out more often than we would like to admit.

The opposite side of this example is 20 gauge rings. I love the look of 20 gauge rings in healed nostril piercings. I don’t start with them, though. They are simply too thin. Thin gauge jewelry acts like a cheese cutter in piercings, especially when it’s curved, even if the diameter is correct. We are making straight channels through tissue with our piercing needles. Rings put pressure on the center of the piercing channel and on the entrance and exit. The thinner the ring, the “sharper” it is. This irritates the channel, usually resulting in irritation bumps and problematic healing.

Rings and barbells can BOTH get caught, hooked or pressed on, and that motion can irritate a piercing or cause it to drift.

Rings get a bad rap for this, but it isn’t totally undeserved.

Firstly, rings naturally push up on the center of a piercing channel and press down on the sides. This means if you pierce with a ring that is ever so slightly too small, the channel heals with a curve in it which also causes the piercing to appear lower than it really is.

Secondly, all piercings get pressed against or slept on. We can lecture our clients all day long, but let’s be honest: sometimes trying to avoid sleeping on a piercing isn’t successful. Everyone has woken up sleeping directly on their healing piercing at some point. In the case of a conch piercing healing with a ring, this can
be extremely irritating, as the ring acts like a lever and puts pressure directly on the healing channel of the piercing.

This is especially true on female nipple piercings, and you are probably familiar with what happens with rings on larger breasted clients. All the pressure from her bra forces the ring towards the surface of her nipple, and it can result in the piercing migrating through the nipple.

So checkmate, right? Rings are bad.

Wrong.

**Rings have a natural balance that barbells do not.**

Let’s imagine, for a moment, that we aren’t piercing a conch or a lobe, but rather a ¼” piece of cardboard.

You have your choice of jewelry, but you have to do two things. First, you have to pierce the cardboard as if it will swell. Secondly, the cardboard is going to be taken on a long, off road car ride after you pierce it, and you will measure how damaged the hole you’ve made is after the trip.

Because the barbell can shift forward or back, and end up having a heavy side, the cardboard is more damaged by a barbell style than an appropriately sized ring.

Rings, when placed appropriately, distribute gravity evenly. There isn’t a heavy side like there can be with a barbell.

In addition, even when piercing with a barbell, a ring can help us discover the natural balance of the tissue. Using a ring as a tool is usually referred to as using a “Size/Placement Ring” or SPR for short. I have a lot to say about those… but that’s for another blog.

We see balance issues happen with ear cartilage piercings of all kinds. If the client isn’t committed to downsizing their jewelry after the initial swelling process, barbells and flatbacks often drift.

Many piercers have good ways of preventing this barbell drift. Larger gauges can mediate the bodies willingness to let barbell styles drift. Large disk flatbacks for initial piercings seem to be a safer bet than small disks or balls. I’m fond of Lexci Elizabeth’s technique of pushing flatback jewelry forward, letting the flatback absorb and distribute the gravity of the jewelry. The disk constantly distributing the pressure on
the back of the ear can cause a sore spot on especially sensitive skinned people, though.

We are left with a quandary in this situation. Do we pierce with a ring, and cause the client to heal with all the problems that come with rings, just because the ring distributes its' weight load so well? Or do we pierce with a flatback, ask our client to keep it pushed forward (which they hate) and come in for downsizing regularly... Hoping they actually do follow up?

**What the client wants as a finished product can sometimes dictate jewelry selection.**

We know from experience a lot depends on the end result we are hoping for. Occasionally a piercer will make the mistake of piercing an industrial with rings initially, only to switch to a barbell later. Because rings have this natural balance, they settle into place and end up having the wrong angle for the intended barbell.

In contrast, if you pierce a conch with a barbell, hoping to put a ring in after the fact, many times the barbell shifts and the ring you wanted to put in pulls forward or back.

Let's take a look at rook piercings: The traditional rook placement for a curved barbell is a little higher, and a little shallower, than the placement for rings. In this instance, it is silly to be overly committed to a jewelry style. If the client wants a ring, then they should be pierced for a ring; and if rings are a bit tougher to heal, so be it.

This is my wife's ear. I started the rook piercings with 18g 5⁄16” captive bead rings, and she has since swapped to 18g 1⁄4” gold seam rings (shown here)

Attempts to pierce so that both styles of jewelry are appropriate can be successful, but are often failures.

We are essentially stuck between a rock and a hard place. There isn't a glaringly right or wrong answer in my estimation. Much of the responsibility falls on the client. What do they want to wear? Do they understand the responsibility they are taking on with either option? I believe it's essential to really consider all of the options and consequences with an open mind and then guide your client through accordingly.

**Rings can accommodate for more swelling than a barbell can.**

We've all been there: we perform a piercing with an appropriate amount of space for swelling, and the client throws a curveball at us. They swell. Lots.

In the best case scenario, they get back to us and we accommodate with longer jewelry (at their expense? At ours? What's the ethical choice in this instance?)

The red indicates swollen, angry tissue. Not barbecue sauce.

Appropriately sized rings seldom have this problem. Why? The tissue can actually double in size before the amount of room on the ring is exhausted. The likelihood of that happening unless accompanied by genuine infection is very small.

Ok maybe it looks more like barbecue sauce.
Rings are often times the better option for piercings.

Septums and Prince Albert piercings. Not a lot in common, is there?

Well, both heal really well with rings and circular barbells. This tends to be true of very, very thin tissue. Thin tissue easily tolerates the curvature of the ring, but also seems to benefit from the natural balance of a ring.

In my experience with Prince Albert piercings, they really seem to do poorly if they are started with anything but ring shaped jewelry. Curved barbells are a popular option once healed, but seem to irritate fresh Prince Albert piercings. In this rare instance, it seems like curved barbells aren’t curved enough.

Septums with straight barbells or (yuck) curved barbells suffer for looking silly, and also having that balance beam issue. Round jewelry (or the hybrid retainer) are the option for Septums.

Pictured above: significantly more fun than a septum with a straight barbell.

Inner labia piercings have a tendency to stretch as they heal. Barbells in inner labia will cause excess stretching and even fall out when the hole is big enough to fit the barbell ball through. Again, inner labia skin is very thin, and it seems like very thin tissue like this does well with rings.

My guess is, if you are reading this blog, the idea that you should pierce a septum with a ring isn’t astonishing. So how does this discussion help?

I think we can apply this knowledge to other piercings that can, ahem, sometimes heal very well with rings.

When a client of mine wants a ring in his or her nose, I check to see if their nose is thin enough to handle it. I prefer the thickness of the nose to be just less than half the diameter of the ring (5/32" thick, 3/8" ring). I discuss thicker gauges and larger diameters. If his understanding of the risks lines up with complimentary anatomy, we can pierce with a ring. If a client comes in with a very thick nostril, I rule rings out and explain that no ring I put in would be appropriate for their particular anatomy.

You need to understand the tissue you are piercing, and why a jewelry style is appropriate

I have addressed this quite a bit in my nostril blog, but I’ll broaden things a bit.

When I started piercing, all piercings around the edge of the ear that weren’t ear lobe piercings were called “ear cartilage” or “ear rim” piercings. Over time, the term “helix” became popular for ear rim piercings. I prefer this term, because it brought to light another distinction. The helix is the thin, curvy edge of the ear, the scapha is the thick, ear “flat”. Scapha and helix piercings behave differently because they are different.

Scapha piercings are thicker than helix piercings. Because of this, they heal and look better with flatbacks.

Helix piercings, on the other hand, can (and will) heal very well with rings.

They need to be pierced with thick enough rings that have large enough diameter, but they also need to be pierced through thin helix tissue. Barbells pierced in the same location as rings on helix piercings tend to “see-saw” and drift.

We also see this distinction on the forward helix. For years, I pierced these with rings with excellent results. When I tried to put barbells in these piercings, even when healed... Disaster. Piercing the forward helix with a ring necessitates a parallel angle to the head. Flatbacks, on the other hand, are pierced nearly perpendicular. This is an in-depth discussion to have with a client, and they often don’t understand how
their initial jewelry choice drastically affects the finished product.

**The economics of jewelry selection**

Occasionally clients will pick jewelry, not based on what they like, or what will heal best, but rather on what is cheapest. Rings involve much less work to produce, and are considerably less expensive than flatbacks or barbells that are appropriate for the same piercing.

As piercers, we know why this is the case and why this decision needs to be made based on the long term consequences, not the price.

I think this has unfairly biased us piercers against rings. It really tries our patience to see a client make the wrong decision, get a piercing at an angle that will only look good for rings, and then puts in a barbell months later that looks wrong. When a piercing that looks off leaves the shop, even if it isn't our fault, we feel like our reputation is dinged.

The “barbells only” philosophy got us past this discussion. We think we know our clients are picking rings for all the wrong reasons. Forcing them to start with barbells means we don't have to explain to them the complicated details and differences between these jewelry options and the resulting placement issues. Although this genuinely makes our jobs easier, I'm not sure it makes us better piercers. I believe being a better piercer is actually the more important goal.

**Conclusion (?)**

There are no easy answers. I wish there were, but there aren't. It would be nice to put a chart up that said “Always/Sometimes/Never” with a list of every piercing underneath it. I actually considered it for a moment, but I don't think it could really be considered accurate. The truth is, many of these decisions are a case by case situation, informed by our experience, the client's anatomy and their wishes in the future.

What I wouldn't want to result from this blog entry is piercers throwing rings in any fresh piercing just to stick it to popular opinion. Rather, I'd like to see piercers put on their critical thinking caps and really suss out for themselves where and when a ring might be a good decision. I'm looking forward to further discussion and a better understanding of the topic in years to come.

*Rings Are Not The Devil* by Jef Saunders is licensed under a Creative Commons Attribution-NonCommercial-ShareAlike 4.0 International License.
In September of 2015 I traveled to Birmingham, England for the first seminars of the newly formed United Kingdom Association of Professional Piercers (UKAPP). When I got home and sat down to write about my experience I found myself thinking more about wider-reaching industry issues which affect not only the UK, but Europe as a whole. My intention was to give a little perspective as to why there are so few APP Members overseas compared here in North America. Once I started I discovered there was much more to the issue than I could properly cover in a single article, so I have decided to make this a two part piece. Hopefully it will give you an idea of the challenges European piercers face if they want to meet APP membership standards, and in turn hopefully it will show you just how impressive and hard working this group of piercers is.

I travel, what many would consider, a fair amount for a full time piercer. Not as much as some, but much more than others. I try to do as much of that travel outside of my home country (the United States) as possible. I like to see new countries and cities, and while I'm travelling I like to meet other piercers and learn how they practice our craft in their respective areas. When I meet piercers from Europe the conversation always ends up being about the APP. I hear quite a few issues voiced when the topic comes up, not necessarily with the organization, but more so in how our Members talk about other regions or parts of the world being "behind" when it comes to piercing. There is the perception that APP Members imply a piercer who does not use the best jewelry available is being unprofessional. I myself have even made the mistake of assuming "good piercing" is all about the jewelry. Now in an era of social media, these perceptions are more important than ever. Anyone can get nice jewelry, install it in a new or healed piercing, and take a picture. That does not make them a good piercer, or a true professional. In my opinion the sign of a professional is continuing to learn and evolve and to strive to give our clients the best work possible. That doesn't mean you start out doing exactly what you want. For most piercers it is a struggle and you are constantly working towards a goal that, in turn as you progress, changes over time.

I have met piercers in almost a dozen different countries around the world and I see the same challenges that piercers in the US face: "my customers won't pay X for good quality jewelry", "my boss won't invest in quality", "there are no educational opportunities in my area". These are all obstacles that a piercer can overcome with time, persistence, education, and a flexible budget. However, there is another aspect that I think US piercers take for granted: access to supplies. In the European Union (EU) and the United Kingdom (UK), piercers have an additional challenge. As an example, if you want to order Neometal, Anatometal, BVLA, or most other US made jewelry, not only do you have to deal with long wait times, but also increased shipping costs, delays with customs, and substantial import taxes. Canadian and Latin American piercers face these challenges as well, but to a
lesser extent, due to their proximity to where most high end piercing supplies are manufactured. In England, if a piercer orders jewelry they have to pay approximately 20% extra to import it into their country, and that is on top of already significant international shipping costs. Imagine waiting even longer and paying even more. How many US piercers, barely keeping internally threaded and threadless jewelry in stock, would implode at that added challenge? There are almost no native companies manufacturing body jewelry in the EU or the UK at this time. Many have moved production to Asia to lessen costs. Those companies left manufacturing in the EU and UK offer little to no internally threaded jewelry, hand polishing, or products made from materials the Association of Professional Piercers would classify as acceptable for initial piercing.

Needles are another obstacle. How many American piercers are aware of the differences between “blade needles” or “cannulas”? There is a simple reason why; you would never need to. Any American piercer can buy needles made specifically for body piercing, in varying qualities. Again, in the EU and UK there is little to no access to what we would consider “piercing needles” without importing them. In most of Europe there are fewer restrictions on medical devices so it is very common for piercers to use medical catheter needles and biopsy punches to perform body piercings. They call what American piercers use a “blade” needle to distinguish it from the more common cannula needles they are using. Since they don’t have the same access to blade needles many of their techniques are built on a foundation of using the cannula sheath for jewelry transfers. If you are unfamiliar with a cannula it is a plastic sheath covering the needle that can slide off and be used as a catheter. If you have had IV fluids in your arm or hand at the hospital. That little tube going into your vein or artery is a cannula. The application is to pierce through the tissue, once the needle and sheath exit you can slide out the needle leaving the cannula in place. You can then insert jewelry (internal or external) into the sheath and back it through the piercing. In
theory this covers external threading during insertion so many European and British piercers see it as negating the risk of using external threading. Whether is does or does not could be another whole article.¹

I hope by now you can see where the different mindsets come from between US and Europe counterparts. Imagine all those obstacles, and a piercer without those obstacles calling you lazy or sloppy because you do not have the means to overcome said obstacles. It would be frustrating, it might even make you apprehensive to strive to reach the goals that same piercer holds as being a minimum standard. One of the most common complaints I hear about the APP is that membership is geared almost entirely to piercers in the United States. While it is true that the vast majority of APP Members are operating in the US, I have met APP Members all over the world: Sweden, Norway, Denmark, Mexico, England, and more. If APP membership is not an easy goal to achieve in a specific region, another option to improve standards is to create a local organization such as the APTPI (Italy), LBP (Mexico, Central, and South America) and the newly formed UKAPP. The point of these other organizations is not to have lower standards, but to have standards geared towards their specific region. For instance, if jewelry concerns are not the main obstacle, the organization can instead focus on other safety issues such as sterilization, studio layout, and training.

Every Fall I travel to Essen, Germany to teach seminars at the BMXnet (Body Modification Exchange Network) Conference. I’ve met some fantastic piercers from all over Europe there. At the 2014 event I spent quite a while talking with a British piercer named Nici Holmes. We talked about many of the points mentioned above. Specifically, we discussed how it is very challenging to be a piercer who wants to offer quality, especially when the items that go into a “quality” piercing need to be imported from another continent. We talked about how many of the best piercers in the UK could not meet membership standards set forth by the Association of Professional Piercers. One of the concerns she voiced: most, if not all, of the jewelry that meets APP standard is based on ASTM material standards, which has led to some confusion as it previously stood for the AMERICAN Society for Testing and Materials² The APP jewelry standards were revised in 2009 and currently include both ASTM and ISO designations. Much of Europe is moving away from allowing steel as an acceptable material for body jewelry due to nickel content, but at the same time Europe widely allows the use of G23 grade titanium, which is an industrial grade, rather than an implant grade material. G23 Ti has been used as an alternative to nickel containing alloys and its safety has not been addressed, as regulations focused on eliminating nickel as an allergen, not on validation of a material for safe healing and prolonged wear.

Nici talked about how she wanted to start a dialog with other British, Irish, and Scottish piercers to try to form a new group. At first I thought the intention was just to have some casual meetings and discuss industry issues. Apparently the idea caught on and soon after, with the help of a crowdfunding campaign, there was a new nonprofit formed to focus on safe body piercing in the United Kingdom. One of their first acts was to host a central meet. In the next issue of The Point I plan to elaborate on what was accomplished at their first meeting.

¹The plastic sheath is easily damaged which in turn can damage tissue. Also, the blade length is significantly shorter, limiting or preventing many of the bevel theories modern freehand piercers are so fond of.

²The ASTM has focused on international trade since the 1970’s. In 2001 it was rebranded as ASTM International, and is used globally in more than 140 countries.
September 3 through 6 of this year, I was fortunate enough to attend my fourth BMX Conference, which was held in the small but beautiful city of Essen, Germany. The conference was coordinated by the charismatic Stefan Schomowski and his team of trusted helpers and volunteers. As much as I always enjoy this conference, I must admit that just visiting Essen is lovely too: scattered city water fountains, the shopping district, and great food. It is honestly the highlight of my piercing year. Each year I arrive earlier and leave a little later.

The venue for BMX is partly the reason I return year after year; the Unperfekthaus is truly a spectacle to behold. As an artist's village nestled within the city, it really doesn't disappoint. It is such an inspiration to sit for lunch, walk the corridors, or climb the stairs. Every wall is hand painted, covered in collage, or decorated with a sculpture of sorts. When this venue is full (on registration day, capacity is reached long before breakfast) the atmosphere becomes energized. With so many like-minded people gathering from around the world, BMX embodies a special sense of purpose and community.

I remember my first BMX in 2012. I didn't know anyone there personally. I was sitting outside alone having coffee at the ungodly hour of 8:00am.
just because I was excited. The first person that sat by me grew to be the first of many conference friends. Each year BMX expands and there are new faces, new friends to be had. I find it so easy to talk to people during the event. This is another reason I keep attending.

I have attended many seminars, day events, and conventions, but none compare to BMX. There are no similar conferences or events where I live in the North of England. My last large scale, piercing specific event was the 2002 APP Conference & Exposition in Amsterdam. However, 2002 was more than a decade ago and so much has changed. There has been so much grown in the industry since then, I feel a comparison would be irrelevant.

What I can say with certainty is that BMX is not like anything I could have imagined. This year marked the 9th annual conference and it really demonstrated the team’s experience. From the smooth running operation of things to the flow from class to class, the grouping of the lectures was natural and it never felt rushed. Although I feel there was never enough time to visit the expo to do some shopping!

Classes covered topics such as hygiene in the studio, creating sacred space, earlobe reconstruction, and magnet removal. BMX is as it always has been, an umbrella of many topics, not solely piercing based subjects. Tattooing and other modifications are also covered. Many attendees expressed their fondness for this scope of subjects.

I personally feel I absorbed the most this year from the roundtables. These communal discussions based on topics such as “Ethics” led by Samppa Von Cyborg, covering the delicate issue of recording and posting video clips on the internet when you may unwittingly represent the whole industry. In another of this year’s fascinating roundtables, titled “Implantable Technology,” Tim Cannon brought his prototype silicone implant containing LED lights capable of being switched on and off by the users already-implanted magnet. There were even some attendees who were so passionate about the topics that they were willing to hold roundtables at all hours of the day or night. That is a perfect example of the freeform and flexible nature that is BMX.

After classes on both Friday and Saturday, there were striking and eclectic shows from Coco, Superfly, Squid O, and Pain Solution which enchanted the late night crowd with a manifestation of freakshow/sideshow entertainment. This was followed by the annual prize draw raffle.

Overall the whole adventure of BMX was undeniably a special triumph of our industry and community. After discussing this year’s efforts with many other attendees, both new and old, I feel the response was very heartwarming. Everyone that learned and loved at BMX promised to return the following year, myself included.

*Nicole Holmes is one of the newest APP members in the UK.

Photos left to right: Class; Marita Wikström piercing Anna Garvey for suspension; UK piercer gathering at the end of BMXnet; Anna Garvey with Aiden Johnson just before suspension