

I'd like to talk about the issue of female genital piercings— starting with the clitoris and triangle. Both of these piercings are very beautiful, and can be erotically stimulating to the wearer. They are also very advanced level piercings and should not be attempted by anyone but an extremely experienced piercer. There are many, many misconceptions circulating about the proper placement for female piercings. Improper placement has resulted in rejection, migration, scarring, nerve damage, and nerve death.

Unfortunately, the proper anatomy to place and heal these beautiful piercings is rare. Only a very small percentage of women are anatomically built to properly accommodate the triangle piercing, and even fewer are suitable for a clit piercing. I have seen women who at first glance seem to have the right anatomy—a large enough clit, a well-developed triangle area—but I have then opted against performing the piercing. The following are a few considerations that must go into the decision process when performing a clit or triangle:

1.) Is the area itself large enough to pierce? If the actual clitoris is not at least '4" in width and length (about the size of the tip of your pinky), it's probably not big enough to support the weight and mass of a piece of jewelry. You should notice that the vast majority of clitorises are not that large.

2.) Consider the size and elasticity of the clitoral hood. Even if the clit is big enough to support jewelry, what sort of friction might it have to withstand from the hood? If the hood is really large and completely covers the clit, this can

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519 Castro Street, Box 120 San Francisco, CA 94114 Volume 1, Issue 5 September 1995

cause too much pressure on the piercing; it will shift around and be forced into a very uncomfortable position. Usually, the result is that the piercing becomes crooked, leaving a wake of ugly, desensitizing scar tissue as it moves; it could also migrate out completely, which is very painful. If, on the other hand, the hood is too small or tight on the clit, the same problems can occur.

3.) How big is the outer labia? Does the piercee have large thighs? Do her thighs rub together when she walks? These factors can more often than not cause the piercing to twist around quite uncomfortably(more likely with horizontal placement), again resulting in rejection, migration, or simply a frustrating, unrelentingly painful refusal to heal. When doing a consultation for these piercings, it's important to see how the piercee sits, stands and walks, and how her genitals change and move in all of these positions.

4.) Placement! There are some misinformed rumors going around about the placement of the triangle piercing. It is NOT a deep clit hood piercing, nor is it a clitoral shaft piercing. Piercing through the shaft or root of the clit can and will permanently damage those tiny and sensitive nerve endings. Your piercee might never be able to experience a clitoral orgasm again, and possibly lose all feeling in this crucial The appropriate placement of this area. piercing can best be found by manually exploring the area while examining an anatomical diagram. The clitoris is actually a wishbone-shaped muscle, the two long ends of which hug the pubic bone. The triangle of tissue between the three ends is the ONLY place to put a triangle piercing, and it can be very difficult to locate on most women.

If the piercing is too high, you will nick or pierce the shaft of the clit, causing profuse bleeding and nerve damage. If the piercing is too low, the result is two very silly looking. uncomfortably high inner labia piercings. Too shallow? The piercee will, in the best scenario. end up with a very deep clit hood piercing, and, in the worst scenario, will probably go to the hospital with a black and blue, profusely bleeding clitoral shaft piercing. Too deep? The piercer will have effectively stapled the hood and inner labia to the outer labia, and I can't imagine this feeling pleasant or healing at all. Improper placement additionally might cause keloiding, abscesses, scars, pain, and loss of sensation. You could also be slapped with a hefty lawsuit, which in this case you probably deserve.

Proper placement, on the other hand, will give the piercee many hours of fun, with wonderful waves of pressure coming from behind and beneath the clitoris. I've heard it's mindblowing.

5.) Proper clamping. The hour or more that you've spent marking a triangle or clitoris will be utterly wasted if you aren't clamping the piercing properly. For the clitoris, this means only the lightest of pressure, and avoiding any part of the hood. For the triangle, this means clamping only the tissue that you intend to pierce, with the shaft of the clitoris held securely out of the way by the forceps.

6.) Does the piercer have the extremely smooth, professional bedside manner necessary to perform the piercing? These piercings are intense: They cause intense physical and emotional reactions from the piercee. A piercer who attempts to perform a clitoris or triangle piercing must be able to maintain a safe environment for him/herself as well as the piercee. While bedside manner is important for any piercing, it could not be more critical in such a small, nerverich, intimate place where needle sticks or other accidents could be irreversibly damaging. It's not likely that a piercer would have a second chance in the event of a mistake.

I cannot stress enough the importance of this matter. Both of these piercings are difficult to perform, extremely painful to get, and even more so emotionally painful to have to remove if done improperly. If you have the slightest fragment of doubt as to whether or not the piercing will be successful, don't do it!

Personally, I feel that this is not an area that is open to experimentation. it's not a surface piercing, or a navel that might or might not take. We are talking about the very core of a woman's sexual and spiritual pleasure. This is not a place where taking chances is acceptable.

> Sharon Sheinker Gauntlet, Los Angeles

Bravo, Sharon! I couldn't agree more. I've recently caught wind of some "experimental" female genital piercings, my opinion of which accords with Sharon's. Many communities have banned piercing altogether and others are quickly following suit. Who can blame them considering the flagrant disregard for client safety evidenced by a few irresponsible people calling themselves piercers.

Take, for example, the "Isabella," colorfully promoted in issue 17 of *Piercing World* magazine. Perhaps best described as a mutated, vertical version of the triangle, it is being performed in the U.K. under injectable, probably illegal, anesthetic. A long barbell (plastic is suggested) pierces through the suspensory ligament, several layers of hood, muscle, nerves, veins, and other connective tissue, the actual shaft of the clitoris, and exits dangerously close to the urethra. This is similar to having all the equivalent male anatomy stapled together with one piece of jewelry. Any responsible piercer should know that the shaft of the penis is never, never pierced.

Just as alarming to me is the "Princess Albertina", which forces a ring into the tiny, extremely sensitive female urethra and out through the hymen. As women are NOT men, and do not have a man's large, relatively exposed urethra, the area is not sturdy enough to withstand minor infections or the weight and friction of a ring. The female urinary tract is less than 2 inches long. An infection of the piercing could travel rapidly to the bladder and become quite serious. This piercing would be not only be very uncomfortable, but extremely dangerous. I fail even to see the possible erotic benefits, as women's pleasure centers are not similar to men's. Very few women derive any pleasure from having their urethra manipulated, while many men do.

It comes as no surprise that the apparent inventor of both piercings is a man. While I believe that an informed, skilled piercer is capable of performing well-placed piercings on people of either gender, I question the ability of any piercer to develop a new or experimental piercing on anatomy which he or she does not possess. After several years of successful experience performing traditional male genital piercings, I would never attempt to invent a new one. Male and female anatomy may be parallel, but far from identical.

As skilled or experienced as any piercer may be (and a piercer who resorts to injectable anesthetic does not strike me as possessing skill or experience), one simply cannot ignore the fundamental limitations of the human body. The female genitals are vulnerable, and the slightest misstep or infection in this critical area could be permanently damaging, even fatal. Yet these piercings are being done on piercees who, in all likelihood, have not been informed of the real risks involved. Has the excitement and beauty of piercings blinded us from simple reality? It would be shameful for this art to be driven underground, as is already happening in many communities, because of the irresponsible actions of a few arrogant hacks.

Piercees, for your safety and the safety of piercing, please do not participate in the ever-

escalating quest for the weirdest, the biggest, the newest! While there are certainly a few feasible piercings falling outside of the norm, most of the experiments we have seen or heard of involve too many risks of scarring, nerve damage, rejection, infections, and abscessing to be worth risking. Any piercing so radical looking is probably unusual for a very good reason.

There are piercers who claim miraculous skill with surface to surface and other unusual piercings. Make very sure that such a piercer informs you completely and realistically of the risks involved in any piercing. If any chance of scarring, rejection, etc. is even a remote risk, you have every right to know. To deny risks is irresponsible and unethical. If, after discussion, the piercing you are contemplating just seems too chancy, follow your feelings! Get a second opinion, and insure that every piercing is a wonderful, successful, and safe experience.

> —Michaela Grey (Reprinted by permission of PFIQ)

PIERCING FRIENDLY DOCTORS

We've gotten a few responses to our request for open-minded MDs, and here are their addresses. But I'm sure they can't be the ONLY supportive medical folks out there! Let us know if your favorite doctor, nurse, acupuncturist, chiropractor, or other health care worker wants to have more pierced clientele.

•Elsie Fontanella Nurse Cedar's Sinai Center for Nurses Research and Development Los Angeles area (310)855-5000

• Dr. Ward Vaughan Gynecologist 1330 Amherst St. Winchester, VA 22601 (703) 662-0711 or (703) 665-0000 •Dr. Richard Nasca Orthopedic/Spine Surgery 7241 Hanover Parkway Suite A/B Greenbelt, MD 20770 (301) 345-8636

• Shenandoah Community Health Center East Moler Ave Martinsburg, WV (304) 263-4956

•Shenandoah First Med of Inwood I Sader Drive Inwood, WV (304) 229-0600

•Shenandoah Health Services 202 Foxcroft Ave Martinsburg, WV (304) 267-9440

HARD SURFACE DISINFECTANTS: SPRAY OR WIPES?

The surfaces of your studio must be frequently wiped down with a hard-surface disinfectant, be it Madacide, gluteraldehyde, superguaternary ammonium compound, or other bacteriocidal, viruocidal, fungicidal solution. But the best way to apply this disinfectant is a minor point of controversy among professionals. Many use liquid-saturated towelettes, such as Sani-Wipes. Using these requires that the piercer change their gloves a few extra times to avoid cross-contamination, and nobody would want to touch the towelettes with bare hands. A spray form might be easy to apply, but some piercers worry about one thing: is it possible that the spraying action could be sending bloodborne particles off into the air of your shop? Is this a risk you feel comfortable taking?

There is a product which seems to solve this

problem to some degree. This product is Foamy Spray and Wipe Germicidal Cleaner. As the name implies, this super-quat foams upon contact with the surface to be cleaned, thereby trapping nasty particles and preventing them from flying away. This company also manufactures a hospital grade disinfectant and deodorant called Combat. Check them out!

KER Supply Co. Inc. 2250 Moen Ave Joliet, IL 60436 (815) 744-2721.

George Wakup Phantasy Piercing Lockport, IL

BRASS JAW PLIERS

Of all the tools used to manipulate body jewelry, the one most likely to damage your jewelry is the pair of standard pliers used to torque rings. Many piercers are still using Craftsman type household pliers to bend their jewelry before insertion. Not only do these pliers have serrated ends which will scratch the jewelry (even through surgical gauze tape), they are usually not autoclaveable. It is absolutely essential that this tool be autoclaveable since it comes into direct contact with blood and other bodily fluids. The only way to make most of these pliers autoclaveable is to have them nickel plated by a metalsmith, and even then, the risk of scratching your jewelry remains. Some piercers will protect their jewelry somewhat by taping the ends of the pliers. This tape must be removed before sterilizing the pliers, and leaves a sticky adhesive residue which is difficult to scrub off.

A solution to ALL of these problems is to use brass jawed pliers. These pliers have a stainless steel frame, and the tips of the pliers are coated with brass. This brass is softer than most metals and so is less likely to scratch jewelry. I personally haven't had a problem scratching any jewelry with these pliers, not even niobium. The one scratch occurred when bending a 10 gauge 3/8", 18 karat gold ring. I have not, however, had problems bending gold in smaller gauges.

The pliers come with a rubber coating on the hand grips, and I have found that this rubber coating will withstand many trips through the autoclave. Some piercers may wish to run the autoclave at 250° for 20 to 30 minutes to prolong the eventual disintegration of the rubber hand grips. I elected not to change my autoclave settings from their usual 270° at 15 minutes, but after months of use the rubber began to bubble and split, necessitating replacement of the tool. I have gone to great lengths to find ways to repair the rubber, but since the tool only costs \$10.50, it's really more cost effective just to replace it. This tool is available through Dakota Steel, Inc. 1-800-995-0595.

> Kent Fazekas Body Accents Indianapolis, IN

CSR WRAP

While we're on the subject of tools, let's talk about CSR wrap. It's very important that your autoclaved tools stay protected from the air while they await their next use. This means that you shouldn't just drop naked tools onto your autoclave trays. Pliers, files, and other implements need to be wrapped.

Standard paper pouches are often too small and rip easily. You can't see what's inside, which can be aggravating if you are fond of a particular tool. They also tend to condense moisture, which speeds the rusting of the tools.A Peel-Vue pouch, with a plastic window, is expensive, takes up lots of autoclave space, and is a virtual condensation machine. Rust City!

Enter CSR wrap. This specially treated paper is very inexpensive, and can be cut to size. Just wrap it around your tools, label the paper, and autoclave them on the normal wrap cycle. The paper automatically seals to itself, forming a water repellent shield against bacteria and other airborne material. If your tools are being properly stored, these little blue packages will keep your tools sterile until their next use. CSR wrap (and lots of other great products) is available from Henry Schein. Call them at (800) 851-0400.

> Chance Gauntlet, Inc. San Francisco, CA

A NEW YELLOW PAGES HEADING FOR PIERCERS

In late February I called our US West Direct yellow pages ad representative and asked what the procedure was for getting a heading in the phone directory for Body Piercing. I was told that it was just lumped under "Ear Piercing" or "Tattooing". I explained that it was a totally different business and I did not feel that it fit under either of these categories. I was then told that to request a new heading in the phone directory there has to be a written request and documentation that separate heading is warranted. I composed a letter to US West Direct and enclosed various forms of documentation. I soon received a call that our representative was forwarding the information to the corporate offices.

The closing date for all of the review and documentation process was set at July 11, 1995. I was given the phone number of the corporate reviewer. I called and explained the need for the listing, and gave them a number of names of establishments which would be interested in using the proposed heading. On July 10, I was called and told that the heading was approved, and would appear in the 1996 Yellow Pages Directory for US West Direct. As of August 1, 1995, the heading will be available for the following states: WA, OR, MN, NM, AZ, WY, CO, SD, ND, ID, MT, UT, NE, IA. These are the 14 states to which US West distributes Yellow Pages. I also inquired whether this case would influence other phone book distributors in the rest of the country— the answer was YES; it will definitely open the door. I strongly encourage businesses to call their phone directory representatives and ask to be listed under the separate heading of Body Piercing. While ending our conversation I was told that Tribal Rites in Colorado had also been making inquiries into getting this heading. I want to say thanks to Tribal Rites for taking the time to work on this important step towards respect for our industry.

> Al D Playspace LTD

Seattle, WA

(Ed— I'd personally like to thank and congratulate AI D for being the FIRST person to send in all of the required paperwork and photographs to qualify for APP business member status!)

DEALING WITH PROBLEM THOPT

I am glad the APP encourages Point readers to communicate with other piercers in our-area. I chose to take this advice and contact an establishment that was using jewelry of substandard quality.

In one week three different individuals came to my shop complaining of problems with their navel piercings. All three had been pierced at the same place, a new shop in one of the outlying areas of Seattle. Each had jewelry in their piercings that was turning black. The silver captive bead in each was turning green. After removing the jewelry and and replacing it with jewelry of appropriate quality, I coached each individual on what to look for in a professional piercer and what questions to ask their next piercer, I sent them on their way with proper aftercare suggestions. I have since received ŕ

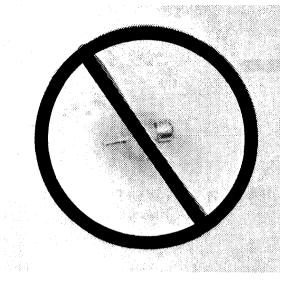
I chose to call the shop in guestion and speak with their piercer. I identified myself and asked if he had time to answer a few questions. I informed him of what was taking place and that the jewelry he was using was causing problems in his clients. After a lengthy discussion I found that he did not know much about the different grades of of surgical stainless steel jewelry, much less that metals such as niobium. titanium, and solid gold are used. I gave him a few jewelry sources to contact so that he could purchase guality jewelry. In further discussion I found that his experience level as a piercer was guite limited. He had apprenticed for several months and was an EMT. I suggested the Gauntlet Seminars and asked if he intended to keep piercing after now knowing that there was a lot more involved in piercing than putting silver rings in navels.

Well... he will continue to pierce, and there is nothing I or anyone else can do about it until regulations of some sort are developed. I offered to answer any questions and invited him to visit my shop at any time. That's the best I can do.

I think it was a success story in one area. He will now at least be installing quality jewelry (I received confirmation from one of my manufacturers and he did buy a proper stock of jewelry). But the other area that is really frightening is that he will continue to pierce with his limited knowledge. I hope this story encourages the professionals out there to contact the problem shops and individuals and make the effort to communicate with them.

> Al D. Playspace Ltd. Seattle, WA

THE TROUBLE WITH EAR GUNS.....



App has received a few very informative submissions dealing with the damage caused by the ubiquitous ear stud guns, and would like to share some of it with *Point* readers. Any piercer who is currently struggling with the board of health over the local ear gun wielder is encouraged to share this *Point*.

Hopefully, these tales of woe will inspire you to photograph and document local examples for the APP legislative artillery. Things will unfortunately have to get worse before they improve, and only a strong show of support for reasonable health and safety legislation will prevent the severe restriction or illegalization of piercing in your area. Help us help you! And thank you all for continuing to support this effort with photographs and testimonies!

paraphrased from: The Capitol Annapolis, MD Thanks to Drew Lewis at Perforations Taking Fashion a Bit Too Far— June 19, 1995 Mark Kaluzenski got two "gold" studs pierced into his left ear cartilage. Six weeks later, a virulent infection had advanced so severely that he had to be rushed into emergency surgery, spend a week in the hospital on an IV, and almost lost all or part of his ear. Fortunately, he got away with only a scar. Dr. Gregory Heacock, the doctor who performed the 45 minute surgery to remove the infection, said that he has similarly treated five or six patients, most of whom lost a piece of their ear.

paraphrased from:

A Submission on Body Piercing a submission to the sub-committee on body piercing, of the Skin Penetration Act Review Committee, Queensland Health Dept. Cairns, Australia

thanks to Cheyenne Morrison at The Piercing Temple

The original gun was developed in the 1960s by Roman Research, a company which simply altered the gun already in use for ID-tagging cow's ears. Later, Studex, J Hewitt, and Inverness, among others, modified the original design, adding the familiar spring-loading function.

One woman reported that when she had her ears pierced with a gun, blood sprayed everywhere— all over her, the gun, the room, and the person doing the piercing. It probably had hit a small blood vessel. There are a lot of anecdotal stories to this effect, suggesting that this occurs occasionally.

Especially dangerous is the use of the guns to pierce noses, because a large part of the gun body must be placed inside the nostril. The nose harbors many dangerous bacteria, including staphylococcus aureus, streptococcus pneumoniae, and the potentially fatal betahaemolytic streptococcus bacterium. One woman in Australia, Lynette Rose, had to visit a doctor because the gun had broken the bone in her nose.

One girl in Cairns had been pierced by the local tattooist using the gun. The stud was completely imbedded in the flesh and had to =

be removed with two needle-nose forceps.

Hepatitis B was reportedly transmitted through a gun that was being cleaned with hydrogen peroxide between customers. This was reported in the Danish medical Journal Ugeskr-Laeger on January 7, 1991

Other problems, including gun-transmitted infections, jewelry imbedding, abscesses, keloids, trauma, are reported in the following articles:

Infection as a consequence of ear piercing George J., White M.

English medical journal Practitioner March 22, 1989

Hazards of ear piercing procedures which transverse cartilage: A report of pseudomonas perichondritis and review of other complications.

Cumberworth V.L., Hogarth T.B. British Journal of Clinical Practice November 1990 Acute pseudomonas perichondritis as a

sequel to ear piercing

Turkeltaub S.H., Habal M.B. Ann-Plastic Surgery USA March 1990 *Ear Piercing Problems* Dr. Ann L. Jay British Medical Journal August 27, 1977

That's probably enough goriness for now... unless you have some story or photo to share with us!

APP DIRECTORY

The need for a trade directory has become apparent. Twice a year, APP will print a **noncommercial** directory, including listings of its members and subscribers, piercing-friendly physicians, positions sought/positions available, sale of piercing-related implements and products (autoclaves, ultrasonic machines, gloves, etc.— NOT jewelry or services!!!) Please send submissions to the Point's box by November 1 for inclusion in the first edition. If you are unsure about the appropriateness of a submission, please call (619) 272-1188, (810) 743-8126, (317) 259-1950 or (415) 552-0505, ext 107 to speak with a board member.

PIERCING INJURANCE IJ NOW AVAILABLE!

Body piercing insurance is now available through Professional Program Insurance Brokers. I have been working with PPIB to develop an insurance program to specifically meet the needs of the professional piercing industry. This is the first of its kind and should prove to be very beneficial both for the individual and for the industry. Insurance for body piercing includes premises and professional liability with rates starting at about \$800.00. Coverage is available for up to \$1,000,000. The program is open to professional piercers who meet the insurance company's standards and guidelines, which are very similar to the minimum basic guidelines any responsible piercer should already be following. For information and application, contact Susan or Carmen at

Professional Program Insurance Brokers 1200 Van Ness Ave #200 San Francisco, CA 94109 (415) 885-1331

> Gahdi Mastodon Body Piercing San Diego, CA

THANK YOU!

A belated thanks is due to Mic Beasley and the Alliance of Professional Tattooists, whose words of encouragement and advice were so helpful at the startup of APP.



I am writing this letter in response to the letter from Erica Skadsen in the last *Point*.

Let's begin with your first issue— how to properly sterilize jewelry before insertion. First of all, it is my opinion that if it is necessary to use an unused, individually sterilized needle for each piercing, shouldn't it be necessary to treat the jewelry meant for insertion in the same way? I feel that in *every* case, the jewelry should be individually packaged and autoclaved; this includes times when you are selling jewelry to be inserted at home in a healed piercing.

What exactly is your point about selling piercing needles? Are you trying to tell me that if I don't sell needles to the public, that they will all go out and pierce themselves with safety pins, dirty needles, or some other type of instrument? If this is your opinion, what makes you confident that the needle I sell to such a person won't be used to pierce themselves and ten others before finally being thrown away? When I say throw away, I remind you that this person will surely not have a sharps container at home, or wherever else they choose to perform their piercings, to properly dispose of this misused needle. If you are indiscriminately selling piercing needles, I feel that you should be held responsible for any misuse that occurs.

You ask for a definition of "professional". Although according to a dictionary a professional is indeed anyone working at the job, a professional should also care about his/her customers. In my opinion a professional is someone who practices **only** the highest level of sterile and ethical practices. This **does not** include someone who sells needles to anyone off the street just to make a buck, or someone who pierces minors without parental consent.

You made reference to a chart in a previous issue which included pressure cookers and dry heat sterilizers as well as autoclaves in the list of reliable methods of sterilization. That chart lists those forms of sterilization approved by hospitals, and does not necessarily reflect the APP's opinions as to "reliable". The **only** sterilization method that the APP stands behind is autoclaving, and yes, we are 100% sure about that!

The last issue I want to address is hair salons. You ask, once again, what is a professional. I will again give you my personal definition. A professional is someone practicing only the highest level of sterile and ethical practices. Feeling as I do, it makes me extremely ill to think of being pierced in a place where hair and nail filing particles are floating through the air. There is a very good chance of this material getting into my fresh piercing. You also ask if the hair salon that also tattoos is a more legitimate place to be pierced. First of all, tattoos should not be performed in a hair salon for the same health reasons I gave for piercings. Secondly, the fact that a person tattoos or styles hair is not an indication that they know the first thing about piercing. It has been my experience that roughly 8 out of 10 tattoo artists performing piercings have little or no clue about the most basic rights and wrongs of piercing, because a good share of these artists are too busy tattooing to research and respect piercing as it deserves. This applies equally to the hair stylists who want to "add piercing to their services".

Erica, in reading and rereading your letter, I am not sure if you are bringing up these issues because you are unclear, or because you think others are unclear about the issues. It is my suggestion that if it is you who is unclear on the points I have addressed, and the many more that I did not, you should throw away your needles and get out of the business; it seems you need to spend some time educating yourself about a topic about which you should know much more than you seem to. Ξ

Rob Petroff Insane Creations Burton, MI

Dear APP,

Please find enclosed a flyer for some of the scariest jewelry to hit the market. The balls on the barbells are misaligned, there is sterling silver and gold-filled something. And don't forget the "glued beads"! I won't even consider supporting (name deleted) for display or anything else. I thought I'd share this flyer with everyone as a good example of garbage!

Dave Randalls Eclipse Body Piercing Martinsburg, WV

Here are some excerpts from the flyer for your enterta nment shudder

"...the captive bead can be used on our surgical steel, niobium, 14k gold filled, or sterling silver...the glued bead can also be used on all metals of body jewelry... 14k gold filled and sterling silver beads can only be used on 14k gold filled or sterling silver wire because we solder the beads on...the threads on the shaft are long enough to insure that the stainless bead does not work itself off... The nose rings...are available in 14k gold filled, sterling silver, and niobium...Body jewelry is very popular. This reason alone did not persuade us to make it because we usually do not follow trends. Our background in handcrafted jewelry means we can easily make it. After many of your suggestions and requests, we decided to give it a try. You will notice that our prices are quite low. This does not mean that we use inferior materials or craftsmanship. The price reflects the fact that we make all of our jewelrv."

-What manufacturer *doesn't* "make all of their jewelry"? Who did they ask for suggestions when designing their line? What is a "nose ring"? What are they using to "glue" and "solder" their beads to the silver and gold filled rings? Why is their jewelry externally threaded? And, since it is externally threaded, what excuse do they have for the obvious misalignment of their barbell beads? Can someone answer these questions? Everyone, please look beyond low cost when purchasing your jewelry. We'd like more submissions dealing with jewelry quality. Whenever possible, please do not name names. We want to hear about *why*, not *who*.

Dear members and supporters of the APP, I believe I've found the perfect gloves for our industry. They're made from blue nitrile rubber which under most conditions is far more puncture resistant than latex gloves. Also, they tend to resist viral penetration better than latex. They pull on and seat by the cuff, and are extremely elastic. I've also noticed increased sensitivity compared with latex. They're very lightly powdered with USP corn starch, and if you have sensitive skin, this might be another plus. For more information on N-Dex gloves or to find a distributor in your area, call The Best Manufacturing Co. at I-800-24I-0323.

Greg Dinkins The Hole Thing Kent, OH

PIERCING KITS-COMING TO A GOVERNMENT NEAR YOU

The Health Department of Western Australia, in conjunction with the Western Australia AIDS Council, has decided to address contamination caused by unskilled piercers utilizing unclean equipment. Are they planning on regulating ear piercing guns? Think again. Despite protests from APP subscribers, they are going to begin distributing "piercing kits"- baggies containing everything that these organizations feel appropriate or necessary to perform a piercing upon oneself. Their intentions are good;

"... the information which can be disseminat-

ed with the kits will clearly describe the risks associated with these procedures, especially when they are carried out by untrained people. It is believed that by doing so we could control and perhaps minimize the transmission of disease which would occur from uncontrolled use of body piercing equipment."

What could be more uncontrolled than distributing hundreds of baggies containing needles to IV Drug users and other young, unskilled people? What could be more likely than that the equipment will be used again and again, until the needles are filthy and dull, and the piercings grossly infected? The only possible result is an epidemic, and a few serious injuries or deaths caused by attempts at dangerous piercings.

I am assuming that a Sharps container is not being distributed with each baggie, or an autoclave, or hard-surface disinfectant, or a manual on how to safely perform piercings. I have no idea how they are going to gauge the needles appropriately to correspond to appropriate iewelry sizes. Clearly, no professional piercer was consulted as to the appropriate equipment or procedures required for safe piercing. The longer I think about this proposal, the more faults I find with it. I am particularly concerned that this move will set a dangerous precedent worldwide. This health department needs to know that we are a professional industry with a specific skill that cannot be imitated by an untrained individual at home. Please, write and explain that piercing is not a casual sport between friends, but a serious, potentially dangerous activity which can harm or kill if abused. The money set aside for this project could be used to enforce regulations developed with the assistance of professionals in Australia, or an educational public-service ad campaign. Make your voice heard and make a difference!

Health Department of Western Australia Attn: P Psaila-Savona PO Box 8172 Stirling St Perth, Western Australia 6849 years at the annual rate of \$20.00 Zip State Enclosed is my check/money order in US funds for 5<u>.</u> I'd like to get The Point for the next I 1 I I Address Country Name I cit∕

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• ASSOCIATION OF PROFESSIONAL PIERCERS 519 Castro Street, Box 120 San Francisco, CA 94114