

What's the Price of a Tan?

rowing up, I would use baby oil and iodine and lay out in the sun to get a good tan. And my daughter did what her friends were doing and got a tan at a tanning salon before the prom. Now it is hard to drive by a group of stores without seeing a tanning salon. In the past 30 years, we have seen the results of all that tanning: wrinkled, aged skin and a growing number of skin cancers. Today, almost half of us reaching 65 years will have had at least one skin cancer. There were 3.5 million cases of basal and squamous skin cancers in 2006 (American Cancer Society [ACS], 2012). Significant disfigurements can be associated with treating these cancers. More significantly, we have seen the number of people with melanoma increase each year, with 76,250 melanomas expected to be diagnosed in 2012 (ACS, 2012).

I can remember a number of patients (many young women) who have had melanoma. Can you? We are all too aware that, although early-stage melanomas are very curable, many are found in later stages with very poor prognoses. The real sadness is that many of these skin cancers are preventable.

We know that avoiding ultraviolet exposure, whether from the sun or a tanning booth, is one of the most important things anyone can do to prevent skin cancer. We all know the mantra of skin health practices regarding avoiding sunlight during peak hours, wearing protective hats and clothing, using sunscreens appropriately, and avoiding tanning booths and sunlamps. The Australians have a great campaign of "Slip, Slop, Slap" (slipping on long-sleeved clothing, slopping on sunscreen, and slapping on a hat). However, we do not do all of those things. According to a recent review, about 33% of adults and more than 66% of adolescents are still getting sunburned and only 30% routinely practice sun protection (Buller et al., 2011). Indoor tanning is prevalent among young adults, particularly younger women. And we

know that a link has been established between tanning bed use and melanoma (Lazovich et al., 2010). Surprisingly, and even more disturbing, is that some people who have had melanoma continue to use tanning beds (Mayer, Layman, & Carlson, 2012).

Many states have begun or are in the process of passing legislation about restricting minors' access to tanning salons. You may even be involved in this type of legislation. But we know from our long history of trying to control tobacco access that legislation is necessary but not sufficient in limiting minors' access to a known carcinogen. We also are seeing the effects of the U.S. Food and Drug Administration's (2012) new regulations regarding sunscreen, establishing a standard test for over-the-counter products that will be allowed to be labeled as "broad spectrum."

So what should we do about this? How can we influence children and adults to practice skin protection and turn these trends around? At a minimum, it will require educating ourselves, our family, friends, patients, and the public about the issue. It has taken a while but my daughter now wears hats and sunscreen-but only after she saw the sun damage to my skin. We can use our time with our patients and their families to teach them about the importance of ultraviolet light protection—particularly for those with skin cancer! I would love to see a campaign and social changes that made it less popular or considered less attractive to have a tan. Such a movement could start with images portrayed in many of the teen and fashion magazines. Or images of what advanced melanoma looks like. Or consider adding taxes to tanning booth use. In addition, more adequate monitoring for adherence to the access restrictions will be required.

So many cancers cannot be prevented; therefore, it is a shame when we see someone with one that might have been prevented. Witnessing patients going through disfiguring treatment or dying because sun precautions were not followed is distressing. Go to the Skin Cancer Foundation's Web site (www.skincancer.org) and get the facts. Let's use our position as the most trusted professionals to educate our families, patients, their families, and communities. Let's try to make sure our last few weeks of summer aren't contributing to this growing problem.

References

American Cancer Society. (2012). Cancer prevention and early detection facts and figures 2012. Atlanta, GA: Author.

Buller, D.B., Cokkinides, V., Hall, H.I., Hartman, A.M., Saraiya, M., Miller, E., . . . Glanz, K. (2011). Prevalence of sunburn, sun protection, and indoor tanning behaviors among Americans: Review from national surveys and case studies of three states. *Journal of the American Academy of Dermatology, 65*(5, Suppl. 1), S114–S123.

Lazovich, D., Vogel, R., Berwick, M., Weinstock, M., Anderson, K., & Warshaw, E. (2010). Indoor tanning and risk of melanoma: A case-control study in a highly exposed population. *Cancer, Epidemiology, Biomarkers and Prevention*, 19, 1557-1568.

Mayer, D., Layman, A., & Carlson, J. (2012). Sun protection behaviors of melanoma survivors. *Journal of the American Academy of Dermatology, 66,* E9-E10.

U.S. Food and Drug Administration. (2012). FDA sheds light on sunscreens. Retrieved from http://www.fda.gov/forconsumers/consumerupdates/ucm258416.htm

The author takes full responsibility for the content of the article. No financial relationships relevant to the content of this article have been disclosed by the editorial staff. Deborah K. Mayer, PhD, RN, AOCN®, FAAN, can be reached at CJONEditor@ons.org.

Digital Object Identifier: 10.1188/12.CJON.337