

You Can Help Strengthen UV-Lamp Warning Labels

Pending legislation could protect patients by making UV lamp warnings stronger and more prominent.

By Jonathan Wolfe, MD

As dermatologists seek support for legislation to require research into UV warning labels, the tanning industry appears to be strengthening its efforts to protect the mass appeal of salon tanning. Though the Tanning Accountability and Notification Act (HR4767) or TAN Act may not be a high priority in the remaining few weeks of the 109th Congress, dermatologists and patients should contact legislators to voice support of the legislation and increase the possibility of successful action in the next Congress.

Philosophies

Dermatologists and others invested in public health have adopted various approaches to dissuade would-be customers from using indoor tanning devices. While some have emphasized education on overall approaches to skin protection and cutaneous health that include avoidance of UV radiation, others have gone toe-to-toe with the tanning industry, refuting assertions that tanning actually confers health benefits. Educational campaigns have emphasized the risks associated with exposure to UVA and UVB regardless of the source, whether natural or artificial. Still others have advocated legal restrictions on tanning salons, including age limits, parental consent requirements, and mandated written and verbal warnings about the dangers of tanning.

From a legislative perspective, the nature of salon regulation at the state level presents a challenge. To enact reg-

ulations, such as a parental consent, dermatologists and other interested parties in individual states would have to band together to push for legislation in that state—a time-consuming undertaking that requires duplication of effort across the country.

There is one way that legislative efforts could influence tanning salons nationwide. Focusing efforts on the FDA, which has regulatory authority nationwide over the UV devices that tanning salons use, may lead to stronger warnings associated with UV-lamp tanning and increase public awareness of the known risks associated with exposure to UVA and UVB. That's where the TAN Act comes in.

The TAN Act

Introduced into the House in February, the TAN Act is a somewhat brief piece of legislation focused solely on UV tanning equipment, not salons, proprietors, or customers. The FDA has neither revisited nor revised the warning labels affixed to UV-lamp equipment since 1979; the proposed legislation would require the agency, at the order of the Secretary of Health and

Human Services, to consider whether or not the current verbiage and mandated placement of the labels are appropriate. Specifically, the Act would require the Secretary of Health and Human Services through the Commissioner of Food and Drugs, to consider:

1. Whether current labeling and positioning requirements provide sufficient information to consumers regarding UV risks, including damage to the eyes and skin, including skin cancer.
2. Whether a new warning, including a proposed new warning from the AAD, would more effectively communicate risks. The AAD recommended statement is: Ultraviolet radiation can cause skin cancer and nonreversible forms of damage to the skin.
3. Whether any warning can adequately communicate risks.

Furthermore, the Act would require the Secretary to:

1. Conduct consumer testing in order to assess the points above and

New In Your Practice

Hello, HelioSol. Patients seeking extra protection in their sunscreen may consider Neutrogena's new HelioSol Sunscreen SPF 57. Available only through dermatologists, HelioSol provides UVA protection utilizing the new sun protection technology, Helioplex, specifically engineered to provide photo-stable UVA and UVB protection, Neutrogena says.

Resident Ertaczo. Physicians seeking to better treat tinea pedis may consider Ortho-Neutrogena's new Ertaczo (sertaconazole nitrate) cream 2%. In a release from the company, Joseph Jorizzo, MD notes that the Ertaczo vehicle is not sensitizing and includes a lipophilic structure that enhances penetration and long-term epidermal residency, which is ideal for treating tinea pedis.

determine consumer understanding of written warnings.

2. Allow for Public Hearings and Public Comment to support the considerations above.

3. Report, no later than one year

from enactment of the Act, determinations regarding warning label wording and placement, along with measures being implemented by the Secretary “to significantly reduce the risks associated with indoor tanning.”

Taking Sides

According to one Indoor Tanning Association press release, the “American Academy of Dermatology is stuck in the Dark Ages” when it comes to anti-tanning campaigns. ITA continues to defend itself against charges by medical professionals regarding the dangers of UV exposure. Following are some points included in the “Findings” section of the TAN Act alongside statements from the ITA website.

TAN Act Says...

“The Food and Drug Administration (‘FDA’) and numerous leading United States health care organizations estimate that approximately one million Americans each year will be stricken with skin cancer, a potentially deadly disease, and the most common of all types of cancers.”

“The American Cancer Society estimates 111,900 Americans will be diagnosed with melanoma in 2006. Nationally, one person dies of melanoma almost every hour.”

“Numerous studies have established that skin cancer is closely associated with excessive ultraviolet light exposure.”

“In December 2002, the National Institute of Environmental Health Sciences issued a report that identified broad spectrum ultraviolet radiation produced by artificial light sources as a known carcinogen and added such radiation to its listing of 228 substances linked to cancer.”

“The FDA has concluded that there are no ‘safe rays’ insofar as both types of ultraviolet light cause skin cancer, damage to the eyes and the immune system, as well as wrinkling and other signs of premature skin aging. Tanning devices in salons, tanning parlors, spas, and similar settings are in no way less harmful alternatives to the sun’s rays.”

—Excerpted from HR4767; accessed at thomas.gov

Indoor Tanning Association Says...

“The AAD estimates that there are 365,000,000 visits each year to tanning salons and states that according to the Centers for Disease Control, there are 700 emergency room visits due to injuries from tanning bed use. This is an astounding injury incidence rate of .0000019; and a safety record for which all industries should strive to achieve.” (1/11/2006)

“18 of 22 previous studies conducted in the last 20 years, on the relationship between UV light and melanoma show that there is no link between indoor tanning and the likelihood of developing melanoma.” (1/11/2006)

“Exposing the skin to ultraviolet light is the body’s primary means of producing vitamin D (which in turn is related to positive physiological effects). Exposure to UV light is also responsible for the production of endorphins and serotonin (which in turn is related to positive psychological effects). Given these facts, the ITA feels confident that indoor tanning can indeed offer health as well as cosmetic benefits.” (From “Positive Effects of UV Light”)

“Indoor tanning, for individuals who can develop a tan, is a smart way to minimize the risk of contracting sunburn while maximizing the enjoyment and benefit of having a tan. In a professional indoor tanning facility, trained personnel teach tanners how their particular skin type reacts to sunlight and how to avoid sunburn—both outdoors as well as in the salon. Tanning in a professional facility today minimizes the risk of overexposure to UV light because tanning devices in the United States are regulated by the FDA.” (From FAQs)

—Information accessed from theita.com, Oct. 2006

The proposed legislation does *not* mandate a change to verbiage or sign placement, nor does it indicate a change is warranted, however those concerned about cutaneous health and the dangers of skin cancer would obviously welcome more strongly-worded and prominent warnings about UV radiation exposure.

As you read this, the “lame duck” session of the 109th Congress may be wrapping up—if it hasn’t already adjourned. Because the TAN Act is not priority legislation, there’s no clear indication it will be acted on this year. Still, it’s important for dermatologists and others to express support for the bill.

What to Do

The American Academy of Dermatology Association (AADA) has actively promoted the TAN Act, garnering support from legislators and mobilizing dermatologists nationwide. There is still time to act. If not acted on this year, the bill must be reintroduced in both the House and the Senate during the 110th Congress next year. Legislators motivated by their constituents to support the TAN Act could sign on as co-sponsors, giving the bill a base of support before it even goes up for consideration. The AADA encourages dermatologists to write to their Senators and Representatives in support of the Act. Furthermore, the association encourages any other appropriate forms of communication, including face-to-face dialogue if opportunities present. Those who do not know the names and contact information of their legislators can find the information at www.house.gov and www.senate.gov.

Encourage staff, patients, friends, and others to contact their legislators. The more support behind the bill, the greater likelihood it will be acted upon during the next Congress. The Indoor Tanning Association (www.theita.com) has its own lobbying force, which it recently expanded. ☞