

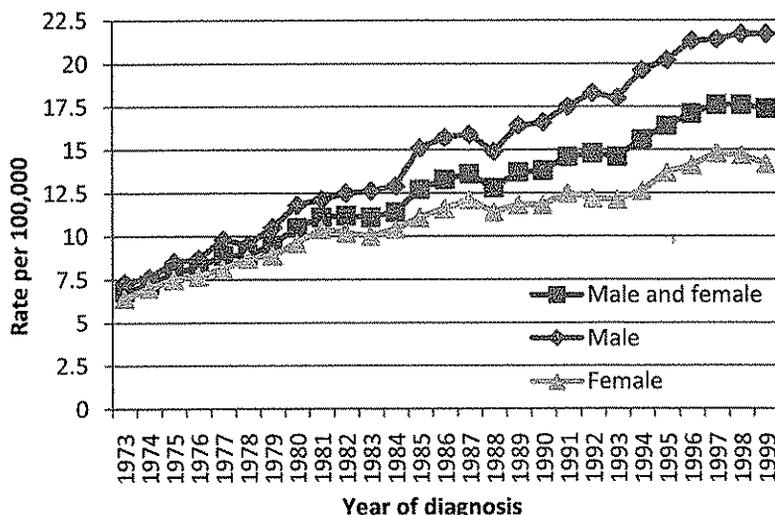


Skin Cancer affects millions of Americans and is ranked as one of the top ten deadly cancers. Unlike many other cancers, the number of new cases continues to increase, as does its impact on younger patients. UV radiation is a known factor in skin cancer development and the most effective method of lowering one's risk is to prevent unnecessary exposure, such as use of tanning beds.

Skin Cancer Incidence on the Rise

- One in five Americans will develop skin cancer in their lifetime.
• The incidence of melanoma, the deadliest kind of skin cancer, has been steadily increasing for the past 30 years.
• Melanoma is the most common form of cancer for young adults 25-29 years old and the second most common form of cancer for adolescents and young adults 15-29 years old.
• Melanoma is increasing faster in females 15-29 years old than males in the same age group.

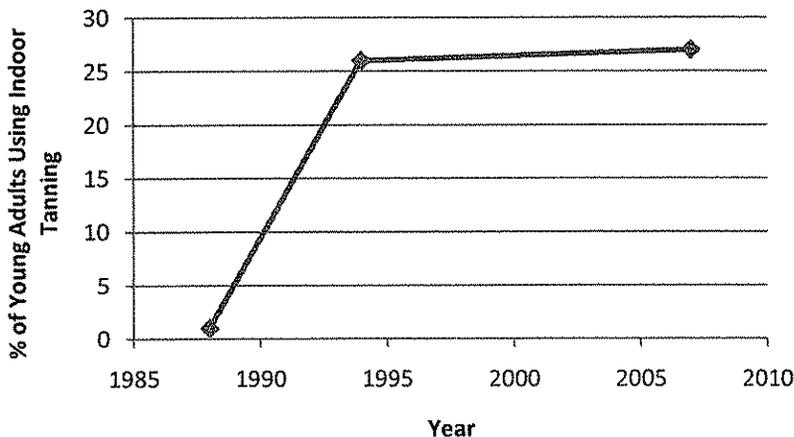
Age-adjusted Melanoma Incidence by Gender, U.S., 1973-2000



There is no such thing as a "Safe Tan"

- UV radiation has been classified as a known human carcinogen by the US Department of Health and Human Services.
• Studies have demonstrated that exposure to UV radiation during indoor tanning damages the DNA in the skin cells.
• Using tanning beds before the age of 35, increases one's risk for melanoma by 75%.

Increase in Young Adult Tanning Bed Use, U.S., 1988-2007



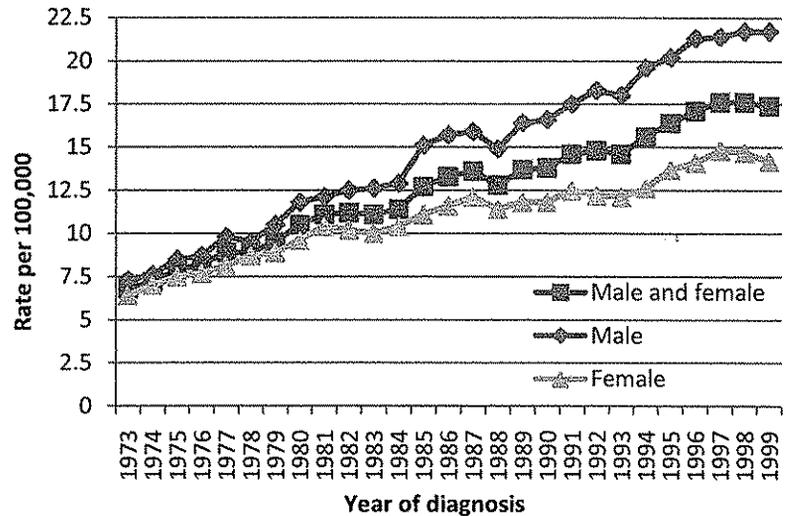


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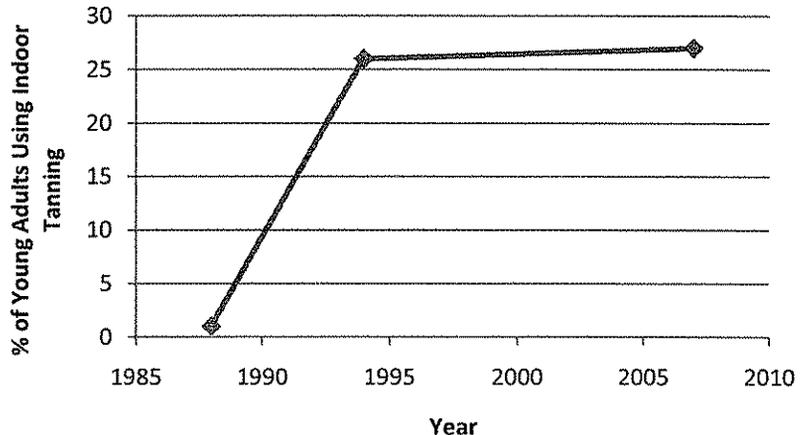
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There is no such thing as a "Safe Tan"

- UV radiation has been classified as a known human carcinogen by the US Department of Health and Human Services. In July 2009, the International Agency for Research on Cancer, a division of the World Health Organization, elevated UV radiation (UVA and UVB) from tanning devices to Group 1, meaning "carcinogenic to humans."
• Studies have demonstrated that exposure to UV radiation during indoor tanning damages the DNA in the skin cells. Also excessive exposure to UV radiation during indoor tanning can lead to skin aging, immune suppression, and eye damage, including cataracts and ocular melanoma.
• Using tanning beds before the age of 35, increases one's risk for melanoma by 75%.

Increase in Young Adult Tanning Bed Use, U.S., 1988-2007



Who is Tanning?

- On an average day in the United States, more than 1 million people tan in tanning salons,^x and nearly 70 percent are girls and women, primarily aged 16 to 29 years.^{xi}
- The prevalence of indoor tanning among white US adolescents aged 13 to 19 years has been estimated at 24% for ever-use and 11.7% for frequent use.
- US female adolescents report prevalence rates of any tanning bed use from 16% to 51%.^{xii}
- In large powerful tanning units, the UVA irradiation intensity may be 10-15 times higher than that of the midday sun.^{xiii} Such powerful sources of UVA radiations do not exist in nature. The UVA doses per unit of time received by the skin during a typical sunbed session are far higher than what is experienced during daily life or during sunbathing outdoors.
- An estimated 700 emergency department visits per year are related to the use of tanning beds.
- Anecdotal evidence suggests that a subset of tanners may exhibit tanning dependence, similar to the compulsive need to use a substance to experience its psychic effects or to avoid the discomfort of its absence. Among adolescents who tanned more than once in the past year, those who were 14 or 15 years old at the time of the survey were more likely to report difficulty quitting indoor tanning than 16-or 17-year-olds.^{xiii}
- In a study of the density of indoor tanning salons in the top 116 cities in the US, researchers found the mean number of facilities was 41.8, and the mean density was 11.8 (per 100,000 population). (For comparison, the mean numbers of Starbucks and McDonald's per city were 19 and 29.6, respectively).^{xiv}
- Seventy-six percent of teenagers in the cities studied lived within two miles of a tanning salon. Those living within two miles of a tanning salon were significantly more likely to have used indoor tanning than those not living within two miles of a salon.^{xiv}

ⁱ Robinson JK. Sun Exposure, Sun Protection, and Vitamin D. *JAMA* 2005; 294: 1541-43.

ⁱⁱ Linos E, Swetter S, Cockburn MG, Colditz GA, Clarke CA. Increasing burden of melanoma in the United States. *J Invest Derm*. 8 January 2009 doi:10.1038/jid.2008.423.

ⁱⁱⁱ *Cancer Epidemiology in Older Adolescents & Young Adults*. SEER AYA Monograph Pages 53-57. 2007.

^{iv} U.S. Department of Health and Human Services, Public Health Service, National Toxicology Program. Report on carcinogens, 11th ed: Exposure to sunlamps or sunbeds.

^v IARC Working Group. Special Report: Policy; A review of human carcinogens –Part D: radiation. *Lancet Oncology* 2009; 10: 751-52.

^{vi} Piepkorn M. Melanoma genetics: an update with focus on the CDKN2A(p16)/ARF tumor suppressors. *J Am Acad Dermatol*. 2000 May;42(5 Pt 1):705-22; quiz 723-6.

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^{viii} Walters BL, Kelly TM. Commercial tanning facilities: a new source of eye injury. *Am J Emerg Med* 1987;120:767-77.

^{ix} Clingen PH, Berneburg M, Petit-Frere C, Woollons A, Lowe JE, Arlett CF, Green MH. Contrasting effects of an ultraviolet B and an ultraviolet A tanning lamp on interleukin-6, tumour necrosis factor-alpha and intercellular adhesion molecule-1 expression. *Br J Dermatol*. 2001 Jul;145(1):54-62.

^x Whitmore SE, Morison, WL, Potten CS, Chadwick C. Tanning salon exposure and molecular alterations. *J Am Acad Dermatol* 2001;44:775-80.

^{xi} Swerdlow AJ, Weinstock MA. Do tanning lamps cause melanoma? An epidemiologic assessment. *J Am Acad Dermatol* 1998;38:89-98.

^{xii} Zeller, Sarah, et al. "Do adolescent indoor tanners exhibit dependency?" *J Am Acad Dermatol*, 2006; 54: 589-96.

^{xiii} Gerber B, Mathys P, Moser M, Bressoud, D, Braun-Fahrlander C. Ultraviolet emission spectra of sunbeds. *Photochem Photobiol* 2002; 76: 664-668.

^{xiv} Hoerster, Katherine D., et al. "Density of Indoor Tanning Facilities in 116 Large U.S. Cities." *Am J Prev Med* 2009; 36 (3): 243-46.

Graph citations:

¹ "Age-adjusted Melanoma Incidence by Gender, U.S, 1973-2000." Lens MB, Dawes M. 2004. Global perspectives of contemporary epidemiological trends of cutaneous malignant melanoma. *Br J Dermatol* 150(2):179-185.

² "Increase in Young Adult Tanning Bed Use, U.S., 1988-2007." Robinson JK, Kim J, Rosenbaum S, Ortiz S. 2008. Indoor tanning knowledge, attitudes, and behaviors among young adults from 1988-2007. *Arch Dermatol* 144(4):484-488.

For Release: 01/26/2010

Indoor Tanning Association Settles FTC Charges That It Deceived Consumers About Skin Cancer Risks From Tanning

The Federal Trade Commission today charged the Indoor Tanning Association with making false health and safety claims about indoor tanning. Contrary to claims in the association's advertising, indoor tanning increases the risk of squamous cell and melanoma skin cancers, according to the FTC complaint. The association has agreed to a settlement that bars it from any further deception.

"The messages promoted by the indoor tanning industry fly in the face of scientific evidence," said David C. Vladeck, Director of the FTC's Bureau of Consumer Protection. "The industry needs to do a better job of communicating the risks of tanning to consumers."

The Indoor Tanning Association represents tanning facilities and suppliers of tanning equipment. The FTC complaint alleges that in March 2008, the association launched an advertising campaign designed to portray indoor tanning as safe and beneficial. The campaign included two national newspaper ads, television and video advertising, two Web sites, a communications guide, and point-of-sale materials that were provided to association members for distribution in local markets. In addition to denying the skin cancer risks of tanning, the campaign allegedly also made these false claims:

- Indoor tanning is approved by the government;
- Indoor tanning is safer than tanning outdoors because the amount of ultraviolet light received when tanning indoors is monitored and controlled;
- Research shows that vitamin D supplements may harm the body's ability to fight disease; and
- A National Academy of Sciences study determined that "the risks of not getting enough ultraviolet light far outweigh the hypothetical risk of skin cancer."

The complaint also alleges that the association failed to disclose material facts in its advertising.

Under its settlement with the Commission, the association is prohibited from making the misrepresentations challenged in the complaint, from misrepresenting any tests or studies, and from providing deceptive advertisements to members. The settlement also requires that future association ads that make safety or health benefits claims for indoor tanning may not be misleading and must be substantiated. Further, the order requires that certain future advertisements from the association contain disclosures. Ads that make claims about the safety or health benefits of indoor tanning are required to clearly and prominently make this disclosure:

"NOTICE: Exposure to ultraviolet radiation may increase the likelihood of developing skin cancer and can cause serious eye injury."

Ads that claim exposure to ultraviolet radiation produces vitamin D in the body, or make other claims about the effectiveness or usefulness of indoor tanning products or services for the body's generation of vitamin D, must clearly and prominently make this disclosure:

"NOTICE: You do not need to become tan for your skin to make vitamin D. Exposure to ultraviolet radiation may increase the likelihood of developing skin cancer and can cause serious eye injury."

For more information about how indoor or outdoor tanning increases the risk of melanoma and other types of skin cancer, read the FTC Consumer Alert *Indoor Tanning* at <http://www.ftc.gov/bcp/edu/pubs/consumer/alerts/ait174.pdf>

The Commission vote to approve the administrative complaint and proposed consent agreement was 4-0. The FTC

will publish an announcement regarding the agreement in the Federal Register shortly. The agreement will be subject to public comment for 30 days, beginning today and continuing through February 26, 2010, after which the Commission will decide whether to make it final. To file a public comment, please click on the following hyperlink: <https://public.commentworks.com/ftc/indoortanningassoc> and follow the instructions at that site.

Copies of the complaint, the proposed consent agreement, and an analysis of the agreement to aid in public comment are available from both the FTC's Web site at <http://www.ftc.gov> and the FTC's Consumer Response Center, Room 130, 600 Pennsylvania Avenue, N.W., Washington, DC 20580.

NOTE: The Commission files a complaint when it has "reason to believe" that the law has been or is being violated, and it appears to the Commission that a proceeding is in the public interest. A consent agreement is for settlement purposes only and does not constitute an admission of a law violation. When the Commission issues a consent order on a final basis, it carries the force of law with respect to future actions. Each violation of such an order may result in a civil penalty of up to \$16,000.

The Federal Trade Commission works for consumers to prevent fraudulent, deceptive, and unfair business practices and to provide information to help spot, stop, and avoid them. To file a complaint in English or Spanish, visit the FTC's online Complaint Assistant or call 1-877-FTC-HELP (1-877-382-4357). The FTC enters complaints into Consumer Sentinel, a secure, online database available to more than 1,700 civil and criminal law enforcement agencies in the U.S. and abroad. The FTC's Web site provides free information on a variety of consumer topics.

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