

February 22, 2011

The Honorable Andrea Stillman
The Honorable Elizabeth Ritter
Co-Chairs, Joint Committee on Public Health
Connecticut General Assembly
Room 3000, Legislative Office Building
Hartford, CT 06106

Re: Support SB 972 and Connecticut Dermatology Society Amendment to Section 19(b)

Dear Senator Stillman and Representative Ritter:

As President of the American Society for Dermatologic Surgery Association (ASDSA), a medical specialty organization representing over 5,400 physician members across the nation, I am writing to urge the Joint Committee on Public Health to pass SB 972 and the Connecticut Dermatology Society's proposed amendment to Section 19(b) to ensure that parents and guardians understand the health risks associated with indoor tanning and to prevent minors from gaining access to indoor tanning without a parent or guardian's informed consent.

Indoor Tanning Puts Connecticut Residents at Increased Risk of Skin Cancer

According to the Environmental Protection Agency, The rate of new melanoma diagnoses—responsible for 75% of all skin cancer deaths—was 31% higher in Connecticut than the national average from 2001-2005 and was the 8th highest in the U.S. An estimated 1,060 Connecticut residents were diagnosed with melanoma in 2008.

As skin cancer surgeons, members of the ASDSA see first-hand the detrimental effects of early exposure to ultraviolet rays. According to a 2009 American Society for Dermatologic Surgery survey, our members performed over 3.1 million skin cancer procedures last year, which is a **fifty-five percent increase over 2005**.

In 2009, the International Agency for Research on Cancer, the cancer division of the World Health Organization, classified tanning beds as "**carcinogenic to humans**" — the agency's highest cancer-risk category, which also includes radon gas, plutonium and radium. Because of the popularity of tanning among young people, both the World Health Organization and the International Commission on Non-ionizing Radiation Protection recommend that the use of indoor tanning should be restricted in anyone under the age of 18.

Total doses of ultraviolet rays from a tanning bed may be as much as five times more than natural sunlight. This means that 20 minutes spent in a tanning salon may be equal to 2-3 hours in the noontime sun, to a 2008 scientific article from *Dermatologic Surgery*.

Indoor Tanning Causes Melanoma & Non-Melanoma Skin Cancers

The American Cancer Society estimated that about 68,720 new melanomas were diagnosed in the United States during 2009. Although melanoma accounts for less than five percent of skin cancer cases, it causes a large majority of skin cancer deaths. As stated in *Recent Tanning Bed Use: A Risk Factor for Melanoma*, "Sun or UV Radiation Exposure is one of the principal causal factors in the development of cutaneous malignant melanoma. A growing body of evidence suggests that not only childhood but also adult exposure is related to risk of

melanoma, even among those who tan well, and that use of tanning beds increases melanoma risk.”

According to two studies presented at the Sixth World Congress on Melanoma, dermatologic surgeons have seen a rise in number of incidences of melanoma in young women. The incidence of melanoma in young women is six to seven times higher than that in young men of the same age, the primary behavioral difference being the use of indoor tanning devices. Likewise, the incidence of second melanomas is also higher. These factors indicate a causative effect between the use of indoor tanning devices and melanoma.

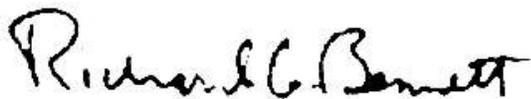
Incidence of Non-melanoma Skin Cancer has Reached Epidemic Proportions

According to a study published in the March 2010 issue of the *Archives of Dermatology*, “The total number of procedures for skin cancer in the Medicare fee-for-service population increased by 76.9% from 1,158,298 in 1992 to 2,048,517 in 2006. The age-adjusted procedure rate per year per 100,000 beneficiaries increased from 3,514 in 1992 to 6,075 in 2006.”

The article goes on to conclude, “There is an epidemic of [non-melanoma skin cancer] in the United States, as illustrated by comparison with the previously published estimates and the 4.2% yearly average increase in cases in the Medicare population from 1992 to 2006...In the face of ongoing increases in skin cancer incidence, continued national research and programs on treatment, education, and prevention are critical.”

For all the reasons stated above, the ASDSA urges you to support SB 972 and the Connecticut Dermatology Society’s proposed amendment to Section 19(b). Copies of any of the referenced studies and articles are available upon request. Should you have any questions please do not hesitate to contact Director of Advocacy and Public Policy Lisle Soukup at (847) 956-9126 or lsoukup@asds.net

Sincerely,



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