

*Dermatology, P.A.*  
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Testimony in Support of HB 2369  
Senate Public Health & Welfare Committee  
Robert Durst, MD  
Fellow of the American Academy of Dermatology

March 16<sup>th</sup>, 2016

Chairman O'Donnell and members of the committee:

Thank you for allowing me to address the committee. I am a practicing dermatologist, and have practiced dermatology in Topeka for the past 42 years. Based on decades of clinical experience, I am committed to preventing skin cancer – which is devastating and deadly. When I received the invitation to speak today, I feel so strongly about the need for this legislation that I rescheduled my patient appointments so that I could speak to you today.

**Skin cancer is the most common type of cancer in the United States, with melanoma as one of the most common cancers diagnosed among young adults.** Ultraviolet (UV) radiation exposure during childhood and adolescence increases the risk for a skin cancer diagnosis as an adult. UV radiation from indoor tanning and other sources is cumulative over time. The earlier a person starts tanning, the greater the risk of getting melanoma and other skin cancers later in life.<sup>i</sup> Use of indoor tanning facilities before the age of 35 increases the risk for melanoma – the most deadly skin cancer – by 59 percent.<sup>ii</sup>

**The use of indoor tanning devices have been directly linked to an increase in skin cancer.**<sup>iii iv</sup> Indoor tanning devices include beds, booths, and sunlamps that emit ultraviolet (UV) radiation. It is estimated that over 400,000 skin cancer cases in the United States are attributed to indoor tanning each year including 245,000 basal cell carcinomas, 168,000 squamous cell carcinomas, and 6,000 melanomas. As a result, tanning devices have been placed in the same carcinogenic category as asbestos, tobacco by the World Health Organization.<sup>v</sup>

**There is no medical need to get a tan.** Vitamin D can be obtained through safe sources such as supplements, milk, cereal, and oily fish.<sup>vi</sup> Skin disorders should be treated under the supervision of a physician using only FDA approved medical devices. There is no such thing as a safe tan. There is no significant benefit to a so-called “base tan.” Tanning is not healthy: tanning occurs only as response to injury, causing damage to the skin, skin cells, and cell's DNA, resulting in skin cancers.<sup>vii</sup>

The science is clear – tanning causes cancer. I respectfully request you act to prevent skin cancer and support HB 2369 as introduced.

Thank you again for this opportunity to testify. I would be happy to answer any questions you have.

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- <sup>1</sup> American Cancer Society, "Melanoma of the Skin". Atlanta: American Cancer Society 2013.
- <sup>2</sup> Boniol B, Autier P, Boyle P, Gandini S. "Cutaneous melanoma attributable to sunbed use: systematic review and meta-analysis". *British Medical Journal*, 2012; 345:e4757. Correction published December 2012; 345:e8503
- <sup>3</sup> Boniol B, Autier P, Boyle P, Gandini S. "Cutaneous melanoma attributable to sunbed use: systematic review and meta-analysis". *British Medical Journal*, 2012; 345:e4757. Correction published December 2012; 345:e8503
- <sup>4</sup> Wehner et al. "Indoor tanning and non-melanoma skin cancer: systematic review and meta-analysis." *British Medical Journal*. October 2012
- <sup>5</sup> Ghissassi, et al. "A Review of Human Carcinogens ~ Part D: Radiation." *The Lancet - Oncology*; 2009: 10.
- <sup>6</sup> Brannon PM, Yetley EA, Bailey RL, Picciano MF. "Overview of the conference "Vitamin D and Health In the 21st Century:an Update". *American Journal of Clinical Nutrition*. 2008;88(suppl.):483S-490S.
- <sup>7</sup> U.S. Department of Health and Human Services. "Surgeon General's Call to Action to Prevent Skin Cancer." Washington, DC: U.S. Dept of Health and Human Services, Office of the Surgeon General; 2014.

  
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**Testimony by Robert Durst, MD  
on behalf of the  
American Academy of Dermatology Association**

**Senate Committee on Health and Welfare  
State of Kansas  
In Support of HB 2369  
Wednesday, March 16, 2016**

Thank you Chairman O'Donnell, and distinguished members of this committee, for the opportunity to provide testimony in support of HB 2369. I am Dr. Robert Durst and I am a board-certified dermatologist from Topeka. I am here representing the American Academy of Dermatology Association.

Today's discussion on HB 2369 to prohibit minors from indoor tanning is very timely in light of recent scientific developments that have added to our understanding of the harmful effects of UV radiation from indoor tanning beds.

The U.S. Food and Drug Administration (FDA) recognize the dangers associated with tanning devices as demonstrated by recent actions on this issue. Most recently, the FDA proposed new regulations that would restrict minors under 18 from using indoor tanning beds and it would require all adults to sign a risk acknowledgement form before using indoor tanning devices. This follows action in 2014, when the FDA finalized changes to its regulation of tanning beds, including a strong recommendation against the use of tanning beds by minors under the age of 18. This order raises the classification for sunlamps and tanning beds to a Class II level, which institutes stricter regulations to protect public health. Additionally, the new order would require tanning bed and lamp manufacturers to label sunlamp products with a visible black-box warning that explicitly states that the sunlamp product should not be used on persons under the age of 18 years.

The causal relationship between UV radiation from tanning beds and the development of skin cancer is based on data from numerous scientific research studies. **And the science is clear – if you use indoor tanning beds, your risk of developing skin cancer significantly increases.** The tanning industry consistently attempts to discredit the large body of scientific evidence available on this topic. It's important to note that several newer studies reconfirm the

link between use of indoor tanning beds and the development of skin cancer and have controlled for other factors that can increase one's individual risk of developing this disease.

A study published online in December 2011 found indoor tanners have a 69 percent increased risk of developing the most common form of skin cancer, basal cell carcinoma, even if a person only used a tanning bed once in their lifetime. More alarming, risk was even higher for those who began indoor tanning prior to age 16. When it comes to the deadliest form of skin cancer, melanoma, research shows a person who has used tanning beds for more than 50 hours is two and a half to three times more likely to develop this form of cancer than a person who has never tanned indoors.

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. Research has demonstrated a rise in incidence of melanoma in young women particularly on their trunk – an area of the body that is not likely to be exposed in day-to-day outdoor activities.

For all of these reasons, no amount of UV exposure from tanning beds is safe. There is no such thing as a safe tan. By definition a tan is evidence of skin damage.

Virtually every young woman I see with skin cancer has a significant history of multiple exposures to sun tanning beds. If she is a young women in her 30's with a skin cancer, she has been using tan beds, usually often on and off for years who started in her early teens.

The tanning industry advocates will argue that one of the most important risk factors in developing skin cancer is sunburn. They will also tell you they do not allow their patrons to burn. This is false. There are several accounts in medical journals of severe cases of burns resulting from use of tanning beds. In addition, even in the absence of a burn, the evidence is clear, if tanning has occurred, DNA damage of the skin has already begun.

National rates of indoor tanning rates for 14 year-old girls is 8.5%, for 15 year old girls it is 13.6%, for 16 year old girls it is 20.9% and for 17 year-old girls it is 26.8%. The tanning industry consistently targets teenage girls in their print and online advertisements and the rate of indoor tanning among adolescent girls is significantly higher than the rate among adolescent boys. A growing body of scientific research has determined that this phenomenon likely explains the recent rise in melanoma incidence among young US women; currently women under the age of 39 have a higher probability of developing melanoma than any other cancer except breast cancer. More people develop skin cancer because of tanning than develop lung cancer because of smoking.

According to a survey conducted in 2011 by the American Academy of Dermatology Association, 43 percent of indoor tanners reported that they have never been warned about the dangers of tanning beds by tanning salon employees. When asked if they were aware of any

warning labels on tanning beds, 30 percent of indoor tanners said no. By age group, younger tanning bed users (ages 14 to 17) were more likely to be unaware of any warning labels on tanning beds than older tanners (ages 18 to 22).

Despite the fact that the United States Department of Health and Human Services and the World Health Organization's International Agency for Research on Cancer have classified UV radiation from tanning devices as carcinogenic and in the same category as cigarettes, a number of younger tanning bed users still think tanning beds are safer than the sun. Specifically, younger tanning bed users aged 14 to 17 are more than twice as likely to think tanning beds are safer than the sun than older tanners age 18 to 22 and more than three times as likely to think that tanning beds do not cause skin cancer.

In 2012, the US Energy and Commerce Committee minority staff released an investigative report detailing the false and misleading health information provided to teens by the indoor tanning industry. The report had five main findings:

1. 90 percent of tanning salons denied the known risks of indoor tanning. Salons described the suggestion of a link between indoor tanning and skin cancer as a myth, a rumor or hype.
2. Four out of five salons falsely claimed that indoor tanning is beneficial to a young person's health.
3. Salons used many approaches to downplay the health risks of indoor tanning, including blaming the use of sunscreen as the reason for rising rates of skin cancer in the US.
4. Tanning salons fail to follow the US Food and Drug Administration's recommendations on tanning frequency of no more than three visits in the first week and a minimum of 24 hours between tanning sessions.
5. Tanning salons target teenage girls in their print and online advertisements.

This report confirms what dermatologists have known for years – the tanning industry manipulates its customers for financial gain. Strong laws are needed to provide oversight of this industry and protect our state's youth.

Further, in late July 2014, the US Surgeon General issued a Call to Action on skin cancer which identifies opportunities for the government, public and private organizations, health care providers and individuals to raise awareness of skin-protection practices. Specifically, the call to action states that that state laws restricting youths from tanning are effective.

The concept of prohibiting use of carcinogenic or dangerous products is not new. Governments often enact laws in the interest of educating the public and trying to preserve the health and wellbeing of its citizens, especially those such as minors who are easily influenced. Our Government restricts minors' use of tobacco and alcohol for this reason. We do not have parental consent permission for the use of cigarettes or alcohol for teenagers. For something that is classified as dangerous a substance as cigarettes, why do we make an exception for

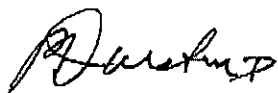
ultraviolet radiation exposure from indoor tanning? We as physicians can only educate the public so much. Our message and recommendations cannot be heard without your help.

In closing, I would like to remind you why prohibiting minors under the age of 18 from using tanning beds is so important. If we wish to have an impact on the future incidence of skin cancer and melanoma, we have to reduce the amount of cumulative exposure our youth have to UV radiation – particularly intentional exposure via commercial indoor tanning.

AADA believes protecting the public, especially adolescents, and requiring appropriate oversight of the indoor tanning industry will have a profound effect on improving public health and reducing overall health care costs. Annually, about \$3.3 billion of skin cancer treatment costs are attributable to melanoma. Of course, this figure does not begin to account for the tragic loss of life from this menacing disease.

I urge you and your colleagues to support HB 2369 in order to reinforce the proposed actions taken on the federal level and increase the level of state protection for adolescents and young adults from the dangers of indoor tanning in Kansas.

Thank you for your consideration of this important issue.

A handwritten signature in black ink, appearing to read "R. Durst". The signature is fluid and cursive, with a large initial "R" and a stylized "Durst".

Robert D. Durst, MD, FAAD