Speaking Notes for Law Amendments Tanning Beds

Introduction

- I am here this evening as the CEO of the Canadian Cancer Society, as a compassionate Nova Scotian and as a mother.
- The mission of the Canadian Cancer Society is the eradication of cancer and the enhancement of the quality of life of those living with cancer.
- We know that Nova Scotia has some of the highest rate of cancer in the country and we are investing in research to better understand WHY.
- · However, research has informed us on many fronts...
- It is a scientific fact and indisputable that exposure to Ultraviolet radiation from the sun and artificial sources pose major public health concerns including the development of melanoma and non-melanoma skin cancers.
- Over 80,000 new cases of skin cancers are expected to be diagnosed in Canada this year and over 1,200 Canadians will die.
- The rates of melanoma in Canada have continued to increase every year from 1997 to 2006 and the time for us to come together as a community to reverse this trend is now.

Why take action now?

- Melanoma is the 2nd most common cancer among young adults and is the 8th in cancer mortality.
- Everyday thousands of Canadians and countless Nova Scotians visit indoor tanning salons and it is suspected that a significant number of indoor tanning patrons are under the age of 35.
- This is particularly concerning because recent studies show that those
 who begin tanning before the age of 35 are 75% more likely to develop
 melanoma in their lifetime.
- In 2009, The World Health Organization through its International Agency for Research in Cancer classified tanning beds as 'carcinogenic to humans'.
- This means that it's not probable that tanning beds cause cancer it is a
 known fact that tanning beds cause cancer.
- We know that no tan is a safe tan and that tanned skin is actually a sign of damage sustained by your skin.
- To quote US Congresswoman, Carolyn Maloney, "Tanning beds are the cigarettes of our time: cancer causing and poor regulated."

- While we deliberate, as a community, about how to manage this public health concern there are Nova Scotians - particularly our youth - who are continuing to engage in this risky behavior and are increasing their risk of developing skin cancer on a daily basis.
- We have an obligation to introduce regulations that we know will positively impact the health - and lives - of Nova Scotians.

The Picture of Cancer in Nova Scotia

- The story of cancer in Nova Scotia is, indeed, a sobering one.
- In 2010, it is anticipated that 6,200 Nova Scotias will be diagnosed with cancer and that 2,750 will die from the disease.
- It is a known fact that Nova Scotians have among the highest rates of cancer in the country. This includes the rates for melanoma skin cancer.
- 250 Nova Scotians will be diagnosed with melanoma skin cancer this year alone and 40 Nova Scotians will die.
- To give you an idea of how this positions Nova Scotia within the rest of Canada, it is expected that there will be 40 cases of melanoma for every 100,000 Nova Scotians compared to 26 cases for every 100,000 Canadians.

- These are statistics. But behind every statistic is a person another Nova Scotian living with cancer - and I would like to tell you just briefly about one of them.
- Dana Tynski is a 38 year old single mother of three children from Sydney,
 Cape Breton.
- On January 30th, 2010, she was diagnosed with melanoma skin cancer and life as she knew it changed in an instant.
- One of the first questions her physician asked her the morning he gave her her diagnosis was "do you tan".
- Although Dana didn't consider herself an avid tanner she instantly recalled her use of tanning beds and responded 'yes'.
- What followed Dana's diagnosis just 11 months ago has been a myriad of doctor's appointments, surgeries, cancer treatments including selfinjections, illness and hope.
- Hope that her life will resume as she knew it and hope that others will be spared from experiencing what she has.
- As Dana explains, "My tan has faded but my scars are very visible and the emotional scars are deep."

- Dana hoped to be here today to address the committee but she's wasn't feeling up to making the trip from Cape Breton.
- She did want us to share this with you.
- And I quote, "Over and over since I was diagnosed with melanoma, I wished I could turn back time. I wished I had never stepped foot in a tanning bed, that I knew more about melanoma and read more about ultraviolet rays and what they can do. What I really wish is that I wasn't so ignorant to think this couldn't happen to me."
- I share this with you now because statistics are important indicators of how cancer impacts us in Nova Scotia but they are only part of the very real story of cancer for the individual's - and their families - affected by this disease.

The facts are in the research

- The Canadian Cancer Society is funding research to better understand why Nova Scotia has this dubious distinction.
- But research has already given us some answers and it is our shared responsibility to act upon these research findings to protect the health and lives - of Nova Scotians.
- This is what research tells us:

- Melanoma is the deadliest form of skin cancer.
- Increased exposure to ultraviolet radiation (UV rays) is the most
 common risk factor for melanoma.
- There is conclusive evidence that UV radiation emitted by indoor tanning devices cause skin cancer.
- Any use of an indoor tanning device is associated with an increase (74%) in the risk of melanoma.
- There is a dose dependent increase in melanoma risk, both in terms of the number of hours and the number of sessions a person has used indoor tanning devices. This means that an individual's risk of developing melanoma increases with their use of indoor tanning devices.
- Some studies suggest that people who use tanning beds earlier in life are more likely to become heavy users.
- In fact, there is a growing body of evidence that shows that frequent tanners have been shown to exhibit signs of psychological and physical dependence on indoor tanning and many frequent tanners report difficulty quitting.
- This condition has been called "tanorexia" by many.

- We know that many of you in the room this evening share the goal of the Canadian Cancer Society: to eradicate cancer
- We are confident we can make significant steps forward in fighting skin cancer by supporting the Tanning Bed Act.

An Intolerable Situation

- The indoor tanning industry has grown into a global, multi-billion dollar business often using the message - a mistruth - that tanning beds are safe and that having a tan is both healthy and attractive.
- The claims put forth by the indoor tanning industry have created a false sense of safety for tanning bed patrons and some common misconceptions about the safety of tanning beds amongst the general public.
- There are marketing campaigns that are specifically targeted towards our youth to promote the use of tanning beds. We often see this during prom season.
- Under the Canadian Competition Act, it is illegal for the tanning bed industry to make false claims about the safety and/or health benefits of indoor tanning.

- Lack of regulation of the tanning bed industry has ultimately left Nova
 Scotians, particularly our youth, vulnerable to the cancer risk related to
 UV exposure.
- Legislation prohibiting the use of tanning beds for those under the age of 19 sends a strong message to ALL Nova Scotians about the risks associated with indoor tanning devices and it will protect our most vulnerable and impressionable segment of the population, the youth of Nova Scotia.

What we'd like to leave you with

- In closing, I'd like to ask you to think about the health benefits this
 proposed legislation will bring to Nova Scotians.
- At the Canadian Cancer Society we see on a daily basis the toll cancer takes on an individual, on families and on our communities.
- The eyes of the country are watching Nova Scotia at this moment. We
 have an exceptionally rare opportunity to 'set the bar' for the rest of
 Canada when it comes to our legislation around the use of tanning beds.
- We have been here before.
- The Nova Scotia Government was very progressive when it passed a legislation prohibiting the ability to smoke in cars with children and we were the first province in the country to do so.

- The rest of the country followed Nova Scotia's lead because it was legislation that made sense for the protection, health and well-being of Canadians.
- · We ask that you act with that same integrity and courageousness now.
- The proposed legislation, 'The Tanning Bed Act', can save lives now and in the future.
- The Canadian Cancer Society strongly supports this legislation and we look forward to its implementation in the near future.

Dana Tynski 59 Coady Street Sydney, NS B1S 2S6

November 29th, 2010

Age: 38

Date of diagnosis: January 30th, 2010

Type of diagnosis: 4mm Nodular Melanoma

My name is Dana Tynski, I am the proud mother of three very active children Justin (14years), Jordan (12 years) and Jillian (10 years). Before I was diagnosed, we spent evenings and weekends at hockey rinks, basketball courts, cheer gyms and going to movies etc. My family, friends and co-workers were in awe of my energy and organization while working full time for Sydney Credit Union. Nothing could keep me away from cheering on my children, nothing until I picked up the phone from my doctors office, I thought my heart stopped.

Early in January 2010, I had two moles removed, one on my upper right leg and one on my upper left thigh,/lower buttock (in a place where the sun did not shine). My family doctor sent them off for testing and the mole on my left thigh tested positive for melanoma. It was a 4mm Nodular Melanoma, this is deep for a melanoma. I sat in the doctors office with my mother in disbelief, as he explained that I would need to see a surgeon and a dermatologist and have more tests done (a Cat Scan and a PET scan). I remember answering the doctors questions, and one was, "do you tan?" I never thought of myself as a big tanner, but then recalled that I had been to tanning beds on occasion. I used tanning beds several times to prepare myself for trips to Cuba in 2008 and 2009. These were the first trips I was able to take, as the children were getting older and it was easier to leave them with family. I was scheduled for another trip to Cuba for March 2010, but had to cancel that trip due to my Melanoma Nightmare that I was to face and am still dealing with. It is a big price to pay for the few 8-10 minute sessions that I spent in the tanning beds. And for what, a tan? Was it worth it? Absolutely not! I would rather be as white as Casper the ghost, than go through this again.

My tan has faded but my scars are very visible and the emotional scars are deep. I have not worked since February 18th, 2010. Thank goodness my employer has been so supportive, and is holding my job until I am well enough to return. Since being diagnosed with Melanoma, I see a dermatologist and have had several more moles removed, starting to feel like swiss cheese now. I had my first surgery in March 2010, in Halifax, NS it was performed by Dr. Carmen Giacamantonio, who I contribute my being here alive today. He did a wide excision around the original mole, the surgery was on my upper thigh, lower buttock and looks like a large backward question mark, its about 4-5 inches. The surgeon did an excellent job, but the scar is far less attractive than the tan I was hoping to get from a tanning bed! During the wide excision surgery, they also removed the sentinel node in my groin area for a biopsy to see if the cancer had travelled. To find the sentinel node, they inject a die with 6 needless around the original mole site and this I found painfully unpleasant. The node was sent to pathology for testing, and again I was left worrying and waiting for results. Unfortunately, I did not get the news I was anticipating, the node tested positive for cancer and I needed to have more surgery.

Back to Halifax, for more surgery. In April 2010, I had an Inguinal Groin dissection (removal of all of the superficial nodes in the left groin area), performed again by Dr. Carmen Giacomantonio my amazing surgeon. For this surgery I was in the hospital over a week to put the recovery time and the extent of the surgery into perspective. I left the hospital after the week with a drain from my stomach into my groin which I had to drain and measure daily. The drain was in 24/7 for several more days and then was removed by the VON nurse that came daily to check the dressing and sutures. It really freaked me out, and I was so glad when it was out.

I thought my Melanoma nightmare was coming to a close, wrong again. I am still going through

treatment. I see Dr. Ron McCormack at the Cape Breton Cancer Centre. Since May of 2010, I have been taking Interferon Alfa 2b, I call it my poison. From May to June, one full month, I went to the C.B. Cancer Centre and they administered the drug through IV Monday through Friday, and it was honestly the hardest thing I have ever done. Each day was harder than the one before, it made me feel so sick, and exhausted. That month is now a blurr, but I do know I missed that full month of my children's life and my own, and it was very hard for them to watch. I finished the month, and just in time because my counts were too low and my body needed a break. I had to go off the Interferon for a week. After the week break, I started giving myself an injections at home, I take it on Monday, Wednesday and Friday until May, 2011, one full year of

treatment. It is now half of the dose that I was taking at the Cancer Centre. I give myself the needle in the stomach, or my right leg. I can't give it in the left leg as the nodes were removed. My left leg is now has a lifetime risk for infection and lymphedema (major swelling). I go for monthly medical massage on the leg and see a physiotherapist weekly to help reduce the risk of lymphedema. I still have swelling in my leg and the left leg measures larger than the right. I wear a full left leg compression stocking from the time I get up in the morning until I go to bed at night. I toss and turn with hot and cold sweats all night, and severe headaches. I have numbness from the knee up in my left leg where muscle and nerves needed to be severed or moved during surgeries. I go for bloodwork weekly because my thyroid is out of whack from the Interferon and to check on my white blood cell count, which also takes a beating from the drug. I have blurred vision at times (photosensitivity) from the drug. I have to stay away from crowds and anyone sick with colds, flu's, etc. because I don't have enough to fight with.

Over and over since I was diagnosed with Melanoma, I wished I could turn back time. I wished I had never stepped foot in a tanning bed, that I knew more about Melanoma, read more about Ultraviolet rays and what they can do, and what I really wish is that I wasn't so ignorant to think this couldn't happen to me, I am dark complected, dark hair, brown eyes and an easy tanner.

So obviously I am a firm believer in banning tanning beds for minors, if it were up to me, I would ban them from all human use. When you actually stop and think about it, it feels like you are in an easy bake oven; would you jump in your oven at home? I would never want someone to go through this, and have to applaud anyone who has.

I would have been glad to make the trip to Halifax and share my story, but I can't just hop in the car and go anymore. I have an appointment today with a surgeon in Sydney today (Nov. 30th) to check a spot around the incission, really it doesn't end. I also have an appointment tomorrow with my excellent physiotherapist (Jackie) at the Cape Breton Regional Hospital.

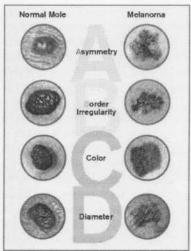
Some good that has come out of my story, is I am still here to tell it, I know that I am one of the lucky ones. If I can keep anyone from going through this Melanoma nightmare I would. This could be your story it you continue pouring UV rays through your body.

I am also very grateful to my wonderful surgeon, Dr. Giacamantonio, my dermatologist, Dr. Yolanda D'Intino, my oncologist Dr. Ron MacCormack my surgeon in Sydney, Dr. MacMullin and of course to the Cape Breton Cancer Centre, I could never express how much heart they share with patients, they are all wonderful amazing people.

Please do not hesitate to contact me if you have any questions or concerns.

Sincerely,

Dana Tynski



Photographo used by permission: National Cancer Institute

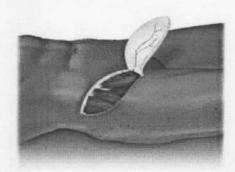
Melanoma



Lymphedema



Wide Excission



Inguinal Groin Dissection

Motion Tanning beds

Motion: Tanning beds

BE IT RESOLVED THAT Doctors Nova Scotia will advocate to governments at all levels to pass legislation regulating the artificial tanning industry, with a focus on banning access to children and youth under 18 years of age.

Global situation:

The incidence of melanoma varies by different regions of the world. One in three cancers worldwide is skin-related. The highest rates are found in countries with fair-skinned populations with strong tanning cultures. Canada falls into this category.¹

The known consequences of excessive UV exposure include:

- · skin cancers;
- · eye damage;
- · premature skin ageing; and,
- reduced effectiveness of the immune system, possibly leading to a greater risk of infectious diseases.²

While overexposure to solar ultraviolet radiation has long been known to increase the risk of skin cancer, until recently, use of artificial tanning equipment was ranked only as a probable cause of skin cancer. In 2009 the International Agency for Research on Cancer (IARC) reclassified artificial UV radiation (tanning beds) to a Group 1 category (carcinogenic to humans).3 The report noted widespread use of UV-emitting tanning devices in many developed countries, especially among young women. Additionally, the report noted consistent evidence of a positive association between the use of UV-emitting tanning devices and ocular

melanoma.⁴ An article published in the Lancet Oncology journal in June 2009, A review of human carcinogens - Part D: radiation, concluded that the use of UV-emitting tanning devices that starts before age 35 increases the risk of cutaneous melanoma by 75 percent. A recent study in Cancer, Epidemiology, Biomarkers and Prevention clearly demonstrated an increased melanoma risk in indoor tanners and even more alarming, an escalating risk with total hours, sessions or years of tanning bed use.

Following this reclassification, a number of health-related organizations established position statements discouraging the use of artificial UV tanning equipment by everyone, particular youth. These organizations include the World Health Organization, Canadian Cancer Society and Canadian Dermatology Association. While exposure to artificial UV radiation from tanning equipment is not recommended for anyone, use by youth is of particular concern. Health Canada's position is as follows: "Federal Provincial Territorial Radiation Protection Committee (FPTRPC) recommends that tanning and the use of tanning equipment, particularly by minors, be discouraged."

Around the world, some jurisdictions have already taken the necessary steps to restrict access to artificial UV tanning

equipment (tanning beds) to minors. This includes but is not limited to:

- United States: California, Texas and at least 29 other states have passed their own legislation governing the use of tanning facilities by minors. California led the way in 2004, banning sunbed use for teens under age 14.6 Texas recently passed the most restrictive law in the country, prohibiting use for all children and adolescents under age 16.7,8,9
- Commission of Health and Consumer Services ruled that all new tanning machines brought into the European Union must reduce UVB to 1.5 percent of their UV emissions, not exceeding an "erythemal-weighted irradiance" of 0.3 W/m2, about 12 on the ultraviolet index scale. This lower UVB intensity should reduce the risk of sunburn, allowing slightly greater margin for error in determining exposure times.
- Europe: France, Belgium,
 Germany, Scotland, Spain and
 Portugal all now restrict sunbed use
 for persons under age 18. In France,
 the regulations also require all UV
 radiation-emitting appliances to be
 declared to the health authority.
 Trained personnel must supervise all
 commercial establishments, and any



claim that they provide health benefits is forbidden. 10,11

- In addition to its recently passed legislation banning under-18s from using sunbeds, Scotland has mandated that all sunbed salons be supervised, with proper information provided to customers.
- Australia has taken a leadership role in restricting access to tanning equipment; all five states in Australia have banned sunbed use for teens.¹³
- November 9, 2009, the Brazilian National Health Surveillance Agency (ANVISA) banned UV cosmetic tanning altogether throughout the country.¹⁴

Canada's situation:

There are approximately 5,000 cases of melanoma and 75,100 cases of non-melanoma skin cancers in Canada as of 2009 (Canadian Dermatology Association, 2009).

Government legislation regarding the tanning industry include Health Canada published guidelines for tanning salon owners, operators and users. One of the guidelines recommends that no one under the age of 16 use a tanning bed (Health Canada 2005). Compliance with this guideline is voluntary and there is no legislation enabling enforcement. The Radiation Emitting Devices (RED) Act (Health Canada 2004) provides some controls on the radiation emissions of the tanning device when the device is manufactured or imported.

Finally, the Competition Act states that businesses are prohibited against making a representation to the public, for the purpose of promoting the sale or supply of a product or any business interest, that is false or misleading. The Competition Act is enforced by the Competition Bureau of Canada, an independent law enforcement agency within Industry Canada's portfolio. Documented examples of non-compliance with the Competition Act include:

promotion of tanning as healthy, promotion of a "base tan" to prevent sunburn, promoting artificial tanning to increase Vitamin D production as a health benefit, and misleading claims regarding declining melanoma statistics in Canada.

Recommendation:

Doctors Nova Scotia should join the work already being done in this area and advocate to governments at all levels to pass comprehensive legislation regulating the artificial tanning industry, with a focus on banning access to artificial UV tanning equipment by those under 18 years of age. The association should continue to raise public awareness of skin cancer prevention by providing evidence-based information through its membership to patients and to families, through its website, promotions, relationships with schools, and by emphasizing the link between tanning beds and increased cancer risk.

If the motion is passed, the association will raise this issue with the provincial department of Health Promotion and Protection and with Health Canada. As well, it will become part of the health promotion priorities for the upcoming year.

Although Doctors Nova Scotia is focusing on the 18 years of age and under demographic, the association recognizes the dangers of tanning beds for individuals of all ages. Measures also need to be taken to protect adult users. Measures could include recommendations put forth in the Sun Safe Nova Scotia's 2005 report, Reducing the incidence of skin cancer in Nova Scotia, which suggests the following be created:

- · a protocol for operating artificial tanning equipment;
- a protocol for standardized customer service and safety;
- · a communication strategy to support regulations; and,
- the establishment of regulations for surveillance and enforcement.

(Endnotes)

- 1 The World Health Organization recommends that no person under 18 should use a sunbed. World Health Organization Updated March 2005.http://www.who.int/mediacentre/news/notes/2005/np07/en/index.html
- 2 The World Health Organization recommends that no person under 18 should use a sunbed. World Health Organization Updated March 2005.http://www.who.int/mediacentre/news/notes/2005/np07/en/index.html
- 3 The Lancet Oncology Report. International Agency for Research on Cancer. Updated July 2009 http://www.ottawa.ca/calendar/ottawa/citycouncil/occ/2009/10-28/cpsc/02%20-%20ACS2009-CCS-CPS-0023%20Document5.htm
- 4 The Lancet Oncology Report. International Agency for Research on Cancer. Updated July 2009 http://www.ottawa.ca/calendar/ottawa/citycouncil/occ/2009/10-28/cpsc/02%20-%20ACS2009-CCS-CPS-0023%20Document5.htm
- 5 Tanning restrictions for minors. A state-by-state comparison. NCSL, National Conference of State Legislatures. Updated January 2010. http://www.ncsl.org/lssuesResearch/Health/anningRestrictionsforMinorsstatelawssummary).
- 6 California bans kids from tanning salons. Reuters Saturday September 25, 2004. Expressindia.com. http://www.expressindia.com/ news/fullstory.php?newsid=36533
- 7 http://www.procprblog.com/tanning-makesskin-cancer-the-most-common-form-in-youngwomen
- 8 Dellavalle RP, Parker ER, Cersonsky N, et al. Youth Access Laws. In the dark at the tanning parlor? *Arch Dermatol* 2003; 139:443-448.
- 9 Texas prohibits indoor tanning for minors. Articlesbase.com August 20 2009. Shared by skininc.com. http://www.articlesbase.com/ health-articles/texas-prohibits-indoor-tanning-forminors-1145300.html.
- 10 Gara R. Sunbeds Cause Skin Cancer, Warns WHO. HEALTH NEWS 17 March 2005. http://health.dailynewscentral.com/content/ view/521/63.
- 11 http://www.opsi.gov.uk/legislation/scotland/acts2008/en/08en05-d.htm
- 12 http://www.opsi.gov.uk/legislation/scotland/acts2008/en/08en05-d.htm
- 13 Solarium ban for under-18s and fair-skinned people, New South Wales, Australia. *Medical News Today*, April 11, 2008. http://www.medicalnews-today.com/articles/103748.php
- 14 Cumberland S, Jurberg C. From Australia to Brazil: sun worshippers beware. *Bulletin of the World Health Organization* 2009 August; 87(8):574-575. doi: 10.2471/BLT.09.030809. http://www.ncbi.nlm.nih.gov/pmc/articles/ PMC2733274



Canadian Medical Association's 2010 General Council Tanning Bed Motions

DM 5-9 The Canadian Medical Association, in collaboration with provincial/territorial medical associations, will call on governments to strengthen labeling requirements on tanning equipment and require signage in tanning facilities that outlines the carcinogenic potential and overall health risks associated with tanning facilities.

Passed with 99 % in favour.

DM 5-10 The Canadian Medical Association, in collaboration with provincial/territorial medical associations, affiliate and associate organization and other stakeholders, will call on all levels of governments to regulate the artificial tanning industry, with a focus on banning access to children and youth under 18 years of age.

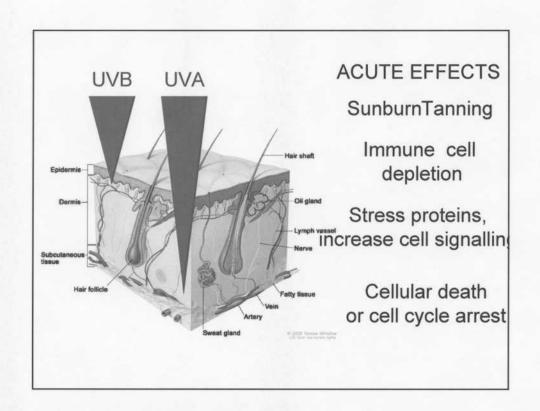
Passed with 98 % in favour

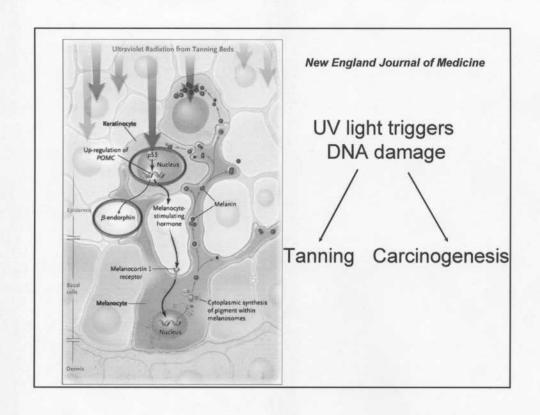
Indoor Tanning: it's worse than you think

Dr Peter J Green MD FRCPC
Associate Professor
Division of Dermatology
Dalhousie University

The case for regulation in NS

- Significant knowledge gap regarding dangers of tanning beds
- Tanning industry not able to self regulate
- Target demographic is young females
- Demonstrated association between tanning beds and melanoma
- Melanoma rates in NS highest in the country





Significance of p53 and tanning response

- Tanning response directly linked to p53 tumor suppressor pathway
- Endorphin release may explain addictive behavior
- Tanning does not occur without DNA damage
- Tanning without risk of carcinogenesis "may be scientifically impossible"

How are tanning beds different from other source of uv?

Dosing in tanning beds

- Amount of UVA and UVB output significantly greater than mid day sun in the summer
- Average UV measured in Washington D.C. at noon in summer
 - UVA 48 W/m2
 - UVB 0.18 W/m2
- · UV measured at a tanning bed in Halifax, NS
 - UVA 280 W/m2 (6 X)
 - UVB 0.27 W/m2 (1.5X)

NB: "High output" UVA beds even stronger

The actual dose of UV received

- Exposure dose = UV output X TIME
- Exposure dose = 280 W/m2 X 20 minutes
 33 Joule/cm2
- Starting dose for UVA at medical facility is is 36 seconds i.e. 1 J/cm2
- Lifetime maximum recommended UVA dose achieved in 15 weeks tanning 3X per week for 20 minutes

Evidence for tanning beds causing melanoma

- Int. J Cancer 2006: Meta-analysis of 7 studies (over 7000 patients) showed indoor tanning before age 35 increased risk of MM by 75%
- IARC* Classifies tanning beds as group 1 carcinogen(2009)

*International Agency for Research on Cancer

More evidence

- Lazovich (2010) published in Cancer Epidemiology, Biomarkers and Prevention
- Involved over 1000 patients with melanoma between 2004-2007
- Tanning beds use increased melanoma risk by 74%
- Greatest risk with more than 50 hours of use, more than 100 session and use more than 10 years

Latest study

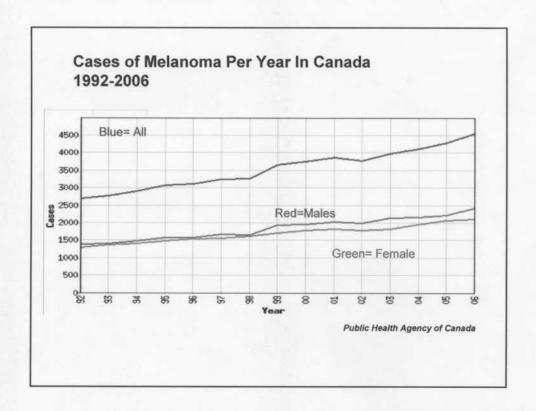
Sunbed use during adolescence and early childhood is associated with increased risk of early onset melanoma: Int J cancer 2010

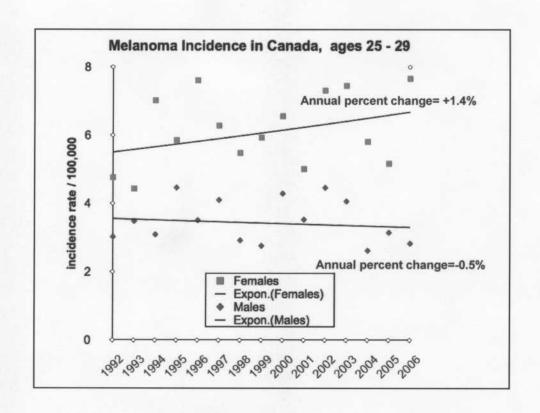
- 604 patients, ages 18-39
- · Increased risk of melanoma with ever use
 - 41% higher risk
- Increasing risk with more than 10 lifetime sessions
 - Double the risk of MM

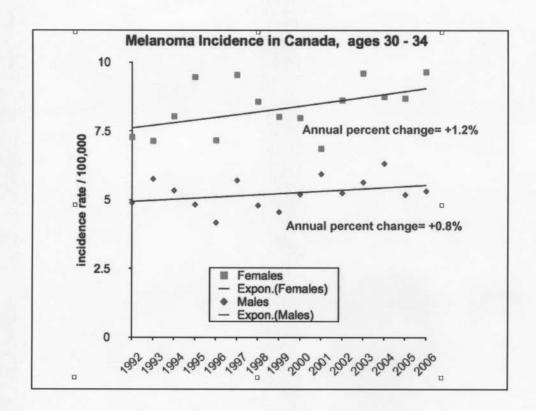
Risk with young age

- Stronger association of developing melanoma with earlier age of first use
- 6 times more likely to have used tanning bed when melanoma diagnosed under age of 30
- When melanoma diagnosed under age 30, 76% of the time attributable to sunbed use

Melanoma In Canada







What about NS?

Rates of Malignant Melanoma per 100 000

	Canada	Nova Scotia
Males	13	20
Females	11	16

Source: Canadian Cancer Society 2009

Take home points

- Tanning beds are a known carcinogen and risk factor for melanoma development
- Teen tanning behavior and vulnerability to UV demand legislated restriction
- Regulation of the tanning industry is a necessary and responsible public health measure

In a patient's words

My name is Michelle. I am a 38 year old mother of 3 beautiful children. I have a wonderful husband, loving and supportive network of family and friends and a very fulfilling career. I also had skin cancer. I had a small mole on my arm that changed very quickly from a small, light brown dot to a black, grey and purple lump the size of a pencil eraser. At my husband's insistance I got a referral to see Dr. Green in his dermatology clinic and shortly thereafter in June 2008 I was diagnosed with melanoma. I am not dark complected, in fact, very fair and had never been able to get a tan - I would burn and it would fade. Several years ago during the early stages of planning a trip to Dominican Republic a friend suggested I try tanning beds and basically guaranteed I would tan and be able to go away with a "good base" and wouldn't burn while there. They were right and to be honest I was thrilled. My tanning continued for the next several years at times attending sessions every other day for 20 minutes at a time. Specifically during these periods I noticed my skin changing. It was becoming "leathery" looking and moles began popping up all over the place. I noticed this particular mole darkening in 2005 and was looked at by Dr. Green. At the time I was told to keep a close eye on it and return should it change shape, color, diameter etc. In late 2007 I became pregnant with my second child and the mole on my arm began to darken and grow. I suppose I didn't pay much attention to it as the adage "it will never happen to me" played in the back of my mind. At 8 months pregnant I had surgery which included general anesthetic. Terrified of all that could possibly happen to my unborn baby I understood that an operation wasn't something my doctors were taking lightly and it wouldn't have been an option during that stage of my pregnancy unless absolutely necessary. My surgery was a success and the margins came back clear. I was lucky but to this day I won't be surprised to have another diagnosis of melanoma in my future.

I recently ran into the owner of the tanning studio where I used to tan. He mentioned that he hadn't seen me in a while and asked if I had moved. I pulled up my sleeve and showed him my battle wound and said, "you won't see me there again". Looking back I find it quite ironic that even the pamphlets in the lounge area praise the use of tanning beds as a way to get vitamin D into your body and they imply that if you don't burn you probably won't be at risk for developing skin cancer.

I wear the large 4 inch scar on my arm as a constant reminder of what my vanity could have cost me. Trying to force a tan on skin that doesn't want to be tanned is something I regret but also learned a valuable lesson from. If asked, I gladly recite my tale and say, "this is what skin cancer looks like". Maybe some will take it to heart, maybe not but I firmly believe my cancer was exacerbated if not caused by tanning booths. And if that is the case if the government has decided to take cigarettes out of the hands of minors because they cause cancer shouldn't the same consideration be given to tanning beds? Although I'm certainly not an expert I can't think of 1 reason for a healthy tan to be considered a necessity.



Home Tanning Units and Medical Devices Were The Real Risk in the WHO-IARC Report: A Closer Look at the Data

The WHO-IARC published a study in 2007 which IARC officials in 2009 claimed established a "limited" and "weak" correlation in a meta-analysis of previous surveys attempting to correlate indoor tanning usage and melanoma incidence. What the IARC working group failed to disclose is that the data from the studies they examined also showed:

- 1. There was no statistical connection between indoor tanning usage and melanoma for people with skin types dark enough to tan. (Grant WB, "Critique of IARC Meta-Analysis of the Association of Sunbed Use with the Risk of Melanoma. Dermato-Endocrinology 1:6, 1-7; Nov./Dec. 2009) The only connection was with people with "Skin Type I" who tan in Europe in salons and in home tanning units for therapeutic reasons but who are screened from tanning in North American facilities.
- 2. Closer analysis of data from the IARC report -- when separated by unsupervised home usage of tanning equipment verses usage in indoor tanning facilities and medical usage of tanning equipment in doctor's offices -- reveals that <u>no statistically significant increase in risk (6 percent) was attributable to commercial tanning facility usage</u>, while larger increases (40 percent and 96 percent) were attributable to home and medical usage of tanning equipment. Here are IARC the data sets:

STUDY	Case Yes	Case No	Control Yes	Control No	Calculated Odds Ratio
Swerdlow 1988			No data or assum	nptions provided	
Walter 1990	71	431	40	498	2.05
Westerdahl 1994					
Chen 1998	96	483	51	417	1.63
Chen 1998 (people <25)	57	483	26	417	1.89
Westerdahl 2000	34	319	38	538	1.51
Veierod 2003					
Bataille 2005	126	113	142	107	0.84

STUDY	Case Yes	Case No	Control Yes	Control No	Calculated Odds Ratio
Swerdlow 1988			No data or assum	ptions provided	
Walter 1990	59	431	55	498	1.24
Westerdahl 1994					
Chen 1998	44	483	44	417	0.86
Chen 1998 (people <25)	14	483	16	417	0.76
Westerdahl 2000	52	319	64	538	1.37
Veierod 2003					
Bataille 2005	189	169	212	161	0.85

MEDICAL 'PHOTOTHER	RAPY' SESSIONS	9-310	A LIE		
STUDY	Case Yes	Case No	Control Yes	Control No	Calculated Odds Ratio
Walter 1990	17	431	10	498	1.96

Data independently confirmed by Dr W. Grant and Dr M. Papas



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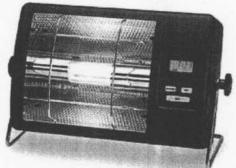
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• 800 Watt face tanner lamp

▲ Design

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- · Convenient table top design
- · Table stand included
- · Durable black powder-coat finish

▲ Special Features

- · Delivered Ready to Use!
- · Operates on 120 Volt household current

▲ Warranty

· 6 month warranty

▲ Size and Weight

- Size: 12"L x 7" W x 9" H
- · Weight: 6 lbs

44 Power

. 120 Volt household circuit

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Buy Now

Buy now & save! \$299.00 \$249.00







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Protective eyewear is required for indoor tanning and must be worn at all times by everyone in the room with a tanning bed in operation.

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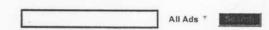
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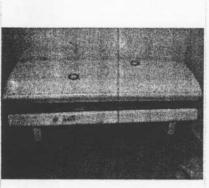
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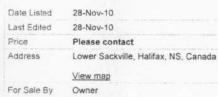
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-3 CUSHION SOFA WITH MATCHING LOVE SEAT SET: \$200.00

-L'INTEGRAL HOME TANNING BED:

comes with remote: \$150.00

Wolf system "Dark Tan" 100w bulbs (20) comes with an extra 20 bulbs and 20 starters: \$500.00

(ACCESSORIES IN PICTURES ARE NOT INCLUDED)

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Tanning Bed

Date Listed 23-Nov-10 \$2,000.00 Address Sydney Mines, NS B1V 1P6, Canada

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Visits: 50



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Slender Quest Body Wraps

Used Tanning Beds

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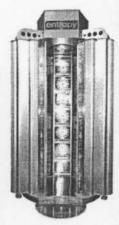
We even offer a financing program to get you started in the tanning bed of your dreams. With flexible payment terms and low monthly interest, owning a tanning bed is far more affordable than you think. Just imagine tanning in the privacy of your own home. You can tan whenever you want at your leisure!

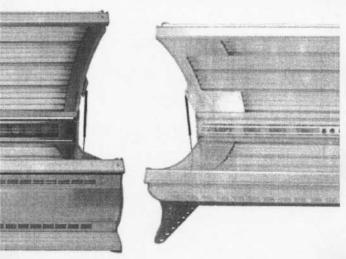
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16 Lamp	\$ 2,395.00*
20 Lamp	\$ 2,995.00*
24 Lamp	\$ 3,495.00*
26 Lamp	\$ 3,995.00*
(Prices are in Canad	dian Dollars)

see fine print below





Tanning beds: w/special bronzers for arms and face RelaxSun 16, RelaxSun 20, RelaxSun 24, RelaxSun 26

Tanning bed w/ rejuvenation for the face and neck: RelaxSun 24 SR please see Skin Rejuvenation Systems for more information

All Skin Rejuvenation (ASR) beds: RelaxSun 16 ASR, RelaxSun 24 ASR please see Skin Rejuvenation Systems for more information

	RelaxSun 16	RelaxSun 20	RelaxSun 24	RelaxSun 26
Bench Lamps 100 watts	8 x 71"	10 x 71"	12 x 71"	13 x 71"
Canopy Lamps 100 watts	8 x 71"	10 x 71"	12 x 71"	13 x 71"
Arm Bronzer Lamps 100 watts	4 x 71"	4 x 71"	4 x 71"	4 x 71"
Face Bronzer Lamps 100 watts	4 x 71"	6 x 71"	8 x 71"	9 x 71"
Skin Rejuvenation Lamps 25 watts	N/A	N/A	N/A	N/A

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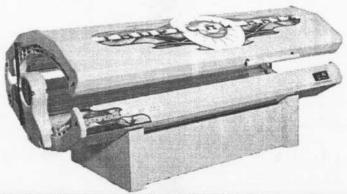
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Home Tanning Bed - Canada

If you live in Canada and want buy our tanning beds...

There are 3 additional charges to your purchase: shipping cost \$100-\$300 (free to USA), custom broker fee \$50, VAT tax of 6% (\$120-\$180)

email us here to get a final quote for shipping to Canadian cities





My name is Rick Houston and I have been in the tanning salon business for years and specialize in Internet marketing of new tanning beds and used tanning salon equipment. I am also the author of a simple how-to eBook called How to Open a Tanning Salon from A to Z! which can give you invaluable insight into opening your own tanning salon with less than a \$20,000 initial investment (and good credit or \$50k without it)! You may call me toll-free 888-999-7577, <a href="mailto:e

Watch the latest videos on YouTube.com

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The Advertising of Artificial Tanning in the HRM

MICHAEL STEVENS FACULTY OF MEDICINE DALHOUSIE UNIVERSITY CLASS OF 2012



Purpose

- 1. To determine what <u>messages</u> were being promoted by the tanning industry in HRM.
- 2. To determine if the messages were <u>targeting a</u> <u>particular demographic</u>.

Methodology

- Seventy five tanning salons were identified through the online yellow pages directory within the Halifax Regional Municipality.
- Three main types of advertising were examined:
 - (1) signage or posters inside the main lobby or outside of tanning establishments;
 - (2) websites of tanning establishments and the links from those websites to other tanning related material; and
 - (3) local radio advertising.

Message #1: Having a Tan is Healthy.

- Several health clubs advertised tanning as part of a healthy lifestyle.
 - Catch phrases included:
 - "[Business information removed] is proud to offer the convenience of tanning right within many of our clubs. After enjoying a great workout why not enjoy a relaxing tanning session. Be active, feel good and look good."
 - Images depicted young people with a "healthy glow".

THE FACTS: Having a Tan is **not** Healthy

"Tanned skin is damaged skin." If there is enough UV exposure to change the colour of your skin and give you a tan, then there is also enough UV exposure to damage your DNA which increases your risk of skin cancer and premature aging.

"There is no safe way to get a tan."

(Canadian Cancer Society, 2010)

Message #2: Base tan provides protection from the sun

- Several tanning salons had exterior signs promoting the idea that "base tans" are important for sun protection before traveling to a sunny destination.
 - o Tag lines included:
 - Get your base tan before vacation!
 - Tan here first before going south!

THE FACTS: Tanning bed use does **not** provide protection from the sun

- At most, a tan is the equivalent to a sunscreen with SPF of just 2-4, which is not enough to keep you safe in the sun (Canadian Dermatology Association, 2010).
- The International Agency for Research on Cancer (2006) found no evidence to support a protective effect of the use of tanning beds against damage to the skin by subsequent sun exposure.

Message #3: Indoor tanning is a good way to increase Vitamin D production.

- Several tanning salons had exterior signs and/or messages on their websites that implied tanning was a good way to get Vitamin D.
 - · Catch phrases included:
 - Winter's here. Boost your Vitamin D!
 - Indoor tanners have been scientifically shown to have 90% higher vitamin D levels than non-tanners.
 - Vitamin D. The way nature intended it.
 - You get more Vitamin D by getting a tan in a nonburning fashion than you would drinking 100 glasses of whole milk.

THE FACTS: Indoor tanning is <u>not</u> a good way to increase Vitamin D production.

- o According to the Canadian Cancer Society tanning beds are not a safe way to get vitamin D.
- There are effective and much safer ways to obtain vitamin D through diet and the use of supplements, neither of which will increase risk of skin cancer. (Canadian Cancer Society, 2010)
- Tanning salons are giving users between six and seven times more radiation than is needed for vitamin D production (Cancer Care Nova Scotia, 2007)

Message #4: Melanoma rates are declining

- One chain of tanning salons claimed that melanoma rates in Canada were declining and that the greatest decline was in the demographic group that most utilize tanning beds
 - Catch phrases included:
 - "Melanoma rates on the decline."
 - "Rates of melanoma in our target demographic, females aged 20-44, have been on a steady decline since 1980."

THE FACTS: Melanoma rates are <u>not</u> declining in Canada

- Skin cancer rates have been increasing steadily in Canada over the past 30 years (Health Canada, 2006).
- Melanoma, has become the third most common form of cancer in young Canadian women (aged 15-34) (Canadian Dermatology Association, 2009).
- Nova Scotia has the highest incidence rates of melanoma in the country for females and the second highest for males (Canadian Cancer Statistics 2009, 2010.)
- 1 in 6 Canadians born in the 1990's will develop skin cancer in their lifetime. Compared to a 1 in 20 lifetime risk for those born in the 1960's (Canadian Dermatology Association, 2010).

Message #5: Tanning does not cause cancer.

- Several tanning salons had signs and/or messages on their websites that implied tanning is not linked to cancer.
 - · Claims:
 - "Melanoma Myth: The dermatology lobby consistently overstates the role UV light may play in melanoma and ignores conflicting data."
 - "There is no evidence that suntan parlours have induced a single melanoma"

THE FACTS: Tanning in moderation **does** cause cancer.

- The use of tanning beds increases the risk of developing melanoma especially if exposure begins in adolescence or young adulthood (Canadian Dermatology Association, 2009).
- In 2009, the World Health Organization published evidence based on research conducted by the International Agency for Research on Cancer that <u>artificial tanning is</u> <u>carcinogenic to humans</u> (El Ghissassia et al., 2009).
- In 2010, a study published in the American Association for Cancer Research Journal provided further evidence that tanning beds are carcinogenic to humans (Lazovich et al., 2010).

The Target Demographic

- Young women!
 - Facebook ads targeted at young women
 - o "Teen Tan Plan" Brochures
 - Depicts teenage girls and mothers entering tanning salon together
 - "16 and under? A parent must come with you during each tanning session. They must sign the attached form showing they are cool with you tanning."
 - "16-17? GOOD NEWS! A parent has to come to [Business information removed] once to sign the attached form. After that it's just you and [Business information removed] pursuing your tan the right way."

The Target Demographic

Radio Advertisement #1:

{V1: paris hilton type, famous, diva, ditzy talk}

- V1: Tanning lotion? Like only 20 dollars! Minute packages? Duh, like half price!
- Seeing that look on my ex's face when he like spots my deep, dark and like super sexy [Business information removed] tan? Cha, totally priceless!
- ANNCR: Get the base tan you need before heading down south. Buy any bottle of lotion and get your minute package for half price! Call [Business information removed].

Summary of Findings

- The study identified five key messages being advertised by the artificial tanning industry in the Halifax Regional Municipality (HRM):
- All five messages were shown to be false or misleading
- 1. Having a tan is healthy
- 2. A base tan provides protection from the sun
- 3. Indoor tanning is a good way to increase Vitamin D production.
- 4. Melanoma rates are declining in Canada
- 5. Tanning in moderation does not cause cancer

Existing Artificial Tanning Regulations

- Health Canada developed guidelines for tanning salon owners, operators and users (Health Canada, 2005).
 - Recommends that no one under the age of 16 use a tanning bed.

Compliance with the guidelines is voluntary!

 No federal or provincial regulation of the retail tanning industry currently exists!

Summary of Findings

- Many tanning establishments in the HRM promoted advertising that focused on young females and in some cases teenagers under the age of 18.
- A disconnect exists between a large component of public opinion that regards a tan as healthy, and evidence-based medicine that has clearly shown that it is not.
- This disconnect, is being perpetuated by misleading advertising by tanning businesses in the HRM.
- It is clear that the artificial tanning industry in the Halifax Regional Municipality is not capable of regulating itself.

Recommendations

- Government in Nova Scotia should follow the recommendations of the....
 - **World Health Organization**
 - **Canadian Cancer Society**
 - **Canadian Dermatology Association**
 - O Doctors Nova Scotia
-and enact legislation that prohibits artificial tanning for minors in the province.

Thank You!

MICHAEL STEVENS FACULTY OF MEDICINE DALHOUSIE UNIVERSITY CLASS OF 2012 From:

<mjcollins@staff.ednet.ns.ca>

To: Date: <sagadoma@gov.ns.ca> 2010-11-30 4:22 PM

Subject:

matt Collins - Letter for Dr Green

My name is Matt Collins. In the winter of 2008 I was going through a stressful time in my life. It had been recommended to me that tanning beds were quite helpful and relaxation and reduction of stress. I took the advice and purchased a package for twelve sessions. I also could have got a deal on some tanning oils and other products that would enhance my ?natural glow? but I was not interested in darkening my skin so much as I was interested in trying to help myself relax.

I went to ten sessions over a period of about twelve weeks. My first session was only seven minutes. None of the sessions were longer than twelve to fifteen minutes. During the process I found that the sessions helped me find a warming calm in the dead of winter. Less than twelve months after the process I found out I had Stage Three Melanoma.

I would ask that all parties seriously consider the importance of passing this act. Nova Scotia consumers deserve the right make informed choices and must be protected in situations where this is not taking place. I am convinced that tanning beds are in part responsible for my diagnosis of cancer. I am also convinced had I been informed of the possible health risks associated with using the beds at the time of purchased I may have made a different choice. Thank-you.

From:

<emeraldtanning@bellaliant.com>

To: Date: <legc.office@gov.ns.ca> 30 November 2010 10:19 AM

Subject:

Nova Scotia Legislation On Tanning

Hi

I'm a Tanning business owner in Sydney, Nova Scotia and feel that this legislation is taking away our decisions and our rights on tanning. Children at the age of 16 can go out and get pregnant or can make the decision to leave their parents home and there is nothing their parents can do, but they are not aloud to get a tan that is being supervised to help prevent burning. If you are at the age of 16 or older you should be aloud to make this decision on your own.

Sincerely W Corbett Emerald Tanning

Gordon D Hebb - Fwd: tanning ban

From:

Legc Office

To:

Hebb, Gordon

Date:

29 November 2010 2:15 PM

Subject:

Fwd: tanning ban

Attachments: tanning ban

questions;

- 1. When is the government going to ban being out in the direct sun light during 2pm to 4pm at the hottest part of the day?
- 2. Why are you preventing a parent who is going down south the right to give their children a base tan so they don't burn?
- 3. What about all the fast food chains that are causing obesity and heart problem going to be banned?
- 4. When did we become a communist country? I want my freedom of choice!!!!

Concerning Bill 102 From: Patricia MacDonald Bruce, Smart Tan Certified, Owner/Operator, of the Sun Center for 25 years.

I am offended that after repeatedly asking for the statistics that these new laws are based on, that as of yet I have not received any. The public have not been shown any studies, but have been lead by false fears fed to the media. Unfortunately the tanning industry is not allowed to promote our services or all of the benefits it provides. I do have customers that are under 19, but demographicly they are a low percentage, and I ask their age and get a parents signature on the concent if 16 or under. I have never had a problem with this approach and the parents will either give their OK or not. Most teens that tan have a medical reason to tan or their parents would rather they tan in a controlled enviornment (timed) rather than over expose out doors. Most young people now do not get the light exposure they did in the past in any form, I contend that this may be the cause of some of the public's heath issues. Even if people go out for short times now they are encouraged to contaminate their bodies with SPFs' chemicals even when they have no chance of burning.

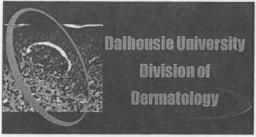
If this legislation is passed will it become criminally negligent for a parent to have allowed their child to get a sun burn? Since tanning is compared to drinking and smoking will the government eventually ban the production of tanning equipment like, tobacco unless licenced to produce; or govern the sale of tanning and open NSTCs like the NSLCs or will this be done at hospitals and dermatologist's offices. Who will profitfrom this legislation? Doctors and Dermatologists for sure, they will have control of treatments that my customers have been refered, by some doctors, to come to me for. They get some of their equipment from the same companies that I get mine from.

I believe that young adults (16 - 18) that can drive cars, hold jobs and get insurance can make their own educated decision to tan if they would like to. By Eighteen you can vote, and are most likely living on your own or at University or College. It is insulting to think that a government wants to take control over our childrens bodily choices, if this is where it starts, where will it end?

I myself have tanned since the age of 21 approximately 2 - 3 times a week. My doctor had no problem with me tanning or with tanning through pregancy. I also have clients who are doctors and nurses, whose families have tanned with me, some being under 19.

There is never going to be a time that a doctor would prescribe a young patient to, go smoke a cigarette or have a drink, there are no benefits....tanning is not the same. Informed doctors have referred under 19 year olds to have light treatments for a multitude of reasons, the right to free speech is limited here due to noncompetition laws. I challenge the government to produce all of the information on every kind of medical condition and cancer with stats for non-tanners, outdoor tanners, indoor tanners, young and older tanners; and then publish them.

What will happen if this bill goes through is a law will be established without any real public consent, because they have not been fully informed. We all deserve to make our own informed decisions, the Nova Scotian and Canadian people should not be treated as if we are uneducated or to be lead without proper debate on laws. Since this is being discussed without time to arrange someone to work for me, and I live about two hours away, it is impossible for me to be there during business hours. I will most likely close my business if this law comes to pass, mainly, I refuse to remain under under these regulations. If all of the proper information is out there, maybe every few years this issue would not be revisited and more money could be spent on our roads so our teens could drive safely. This would benefit all under 19 year olds, not just the few that need or want to tan.



EXPERTISE IN CLINICAL DERMATOLOGY
AND CUTANEOUS SCIENCE

QEII HEALTH CENTRE 1278 TOWER ROAD DICKSON BUILDING - 4C HALIFAX, NOVA SCOTIA CANADA B3H 1V7

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Honorable Ross Landry
Chair, Law Ammendments Committee

November 29, 2010

Dear Mr. Landry and Members of the Law Amendments Committee:

As Head of the Dalhousie University Division of Clinical Dermatology and Cutaneous Science, and on behalf of the other ten Dermatologists in this Division, I would like to express our wholehearted support of the Bill to restrict the use of tanning beds to those over nineteen years of age.

The scientific data proving that tanning bed use increases the risk of skin cancer, particularly melanoma is very strong, as is the data that shows the higher incidence of melanoma in Nova Scotia. It is time to protect our young population from this carcinogen, by restricting access to minors, just as access to tobacco is restricted.

Dr. Peter Green, one of our Division Members, and Chair of the Sun Safe Nova Scotia Coalition, will be speaking directly with your Committee, and his message of risk to individuals frequenting tanning beds has the full backing of all of the Dermatologists in Nova Scotia. In 2009, based on studies from international cancer experts, the World Health Organization upgraded tanning beds to the highest risk category, which means that tanning beds definately cause cancer in humans, just as tobacco smoke and mustard gas do. We also applaud that this Bill would require signage in tanning parlors to better educate individuals over the age of 19 to the cumulative risks of artificial



tanning so that they can make better informed decisions that may implicate their future health.

As Dermatologists, we have all witnessed the tragedy of death from melanoma many times, and one just needs to watch one 24 year old new mother succumb to this terrible disease to feel the need to support any measure that might help prevent another similar case. We always try to be health advocates for our patients, and preventive measures such as this are extremely important.

We hope that your Committee looks at the objective scientific data, and votes this Bill into law. Nova Scotia will be a leader on this issue in Canada, and quite likely trigger similar legislation in other provinces. In addition to Doctors Nova Scotia, the Canadian Dermatology Association and the Canadian Medical Association will no doubt applaud Nova Scotia's leadership in this health initiative.

The Dalhousie Division of Clinical Dermatology and Cutaneous Science strongly supports this Bill, and thanks Minister MacDonald for putting it forward.

Yours Sincerely,

Laura Finlayson

Laura A. Finlayson MD FRCPC FACP

Head; Dalhousie University Division of Clinical Dermatology and Cutaneous Science

Chief of Dermatology Service; QEII and IWK Health Centres Professor of Medicine (Dermatology); Dalhousie University

Bill #106 Handicapped Persons' Education Act (amended)

CHANGE RECOMMENDED TO THE LAW AMENDMENTS COMMITTEE

PAGE 2, subclause 7(2), 2nd paragraph (c) - reletter as (d).

Golden Tan Salon 8927 Commercial St. New Minas, N.S B4N 3E1 902-681-8090

To Law Administrative committee:

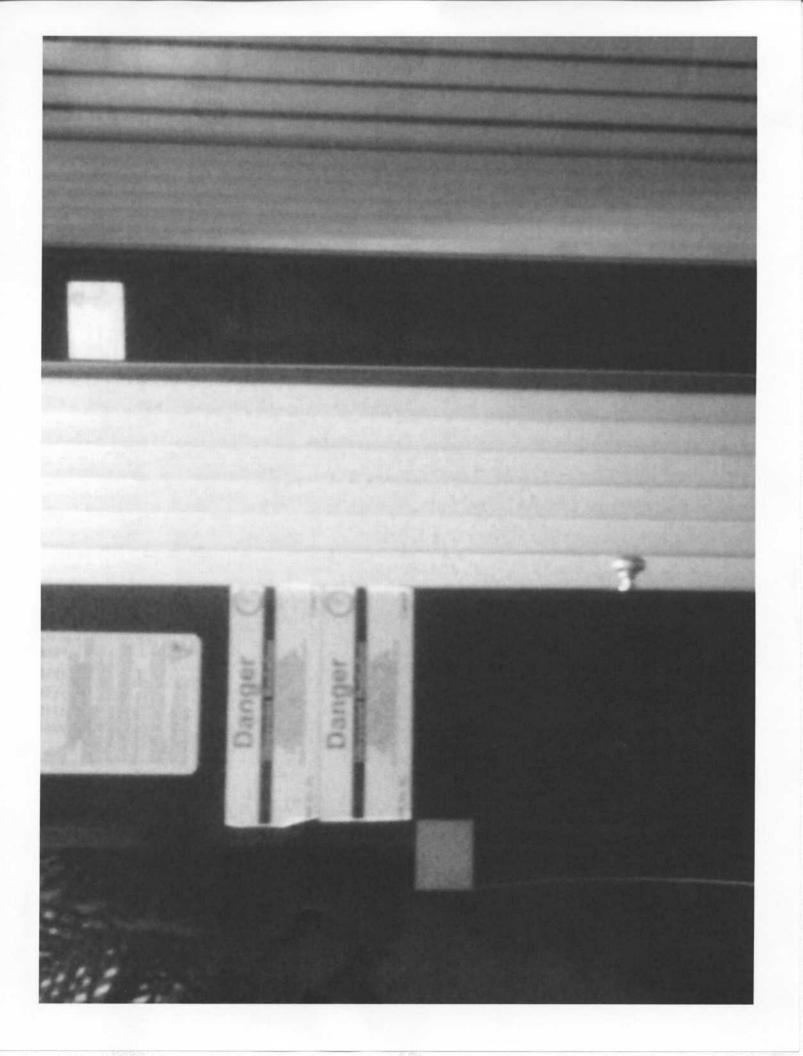
I am writing to you in regards to the proposed Bill 102, which is seeking to ban tanning for anyone under age 19 as well as make other changes to how tanning salons are run day to day. I feel it would be a mistake to make these changes because it should not be government who decides if someone should or should in ottan, this should be up to the individual and in some cases the parents (depending on the age of the person). There are many young adults who work in tanning salons, especially during the busy season and they would no longer be able to have this income as well as the opportunity to get experience on working in a service industry. They learn a tanning beds, besides the smart tan training they receive it teaches them confidence, how to deal with customers, work as a team and I've know some who have told me it helped them decide what to go on to take in college or university because of their experiences working in a salon.

Tanning salons are constantly being portrayed as something bad that people should avoid by individuals who are only looking at one side of tanning. People have used the sun for many reasons for centuries and if you ask someone who has gone south with a base tan they will tell you it helped keep them from burning so they could enjoy their vacation instead of hiding inside the resort. If you think the sun is bad for you, can you image trying to live without it? What we need is balar ce and moderation and I feel that most salons, especially the ones who have gone through smart tan training are well equipped to help customers make a wise choice about tanning. I'm sure well meaning people think they are helping by trying to bring these changes into effect but they must have their heads stuck in the sand if they believe that there are no benefits to moderate, controlled UV exposure.

I hope that you will choose to not pass this bill and work with organizations like smart tan and the joint Canadian tanning association (JCT 1) to help find balance for the tanning industry. Other provinces have found balance in regards to tanning so please don't take a step backwards and prove that we still have a government who will listen to the people and not just the ones with more power.

Sincerely, Kim Young

Kim Young.



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JCTA Skin Typing Form

Name			
Address	City	Postal Code	
E-mail:		Date of Birth / /	
Month Day Year			
Phone: Home:	Busines	s:	
How did you hear about the salon?			
Please complete the following questions to help us create your Skin Type and your specific exposure schedule:			
1. A. What is the natural color of your untanned skin? E. What best describes your genetic heritage?			
(0) Reddish-white(0) Celtic Caucasian			
(2) White-beige (2) Caucasian, light skinned European			
(4) Beige(4) Caucasian, dark skinned European			
(8) Light Brown (8) Caucasian, Mediterra			
(12) Brown (12) Middle Eastern, Indian,			
(16) Black (16) Aborigine, African, Africa		mbrime matematical?	
B. What is your natural hair color? F. Which best describes your Sunbum potential?			
(0) Red, light blonde(0) Always burn without tanning			
(2) Blonde, light brown (2) Usually burn but can tan (4) Brown (4) Occasionally burn but tan moderately			
(8) Dark brown (8) Seldom sunburn and tan easily			
(12) Brownish-black(12) Rarely sunburn and tan profusely			
(16) Black (16) Never sunburn			
C. What is your eye color? G. Which best desc		etential?	
(0) Light blue, light green, light gray (0) Never Tan			
(2) Blue, green, gray (2) Can tan lightly			
(4) Grey, light brown (8) Can tan moderately			
(8) Brown (12) Can get a dark tan			
(12) Dark brown			
(16) Black D. How many freckles do you naturally have			
on your untanned body?			
Now add the points from your seven answers t	0		
determine your total score. The Salon Certified			
give you your Skin Type.			
(0) Many			
(2) Some			
(4) Few			
(8) None			
TOTAL SCORE			
YOUR SKIN TYPE	/oc No //f	type how long ago? years)	
Have you ever had an allergic reaction to su			
If yes, what type of reaction			
Are you taking any medication which might cause you to be particularly sensitive to light?			
Yes No (Check with you pharmaci			
5. Has any medical doctor recommended that			
NOTE: Eye protection is manda	atory. Special	glasses are available	
RELEASE AND INDEMNIFICATION			
I have chosen to use the tanning equipment being offered by this Salon ("Salon") and in consideration of permitting me to			
use the tanning equipment I do fully and unconditionally agree to and acknowledge the following: 1) I am fully aware of,			
		, and aggravation of medical conditions that are, or may be,	
		on that I have been advised to consult with my family	
physician or other health authority regarding my intention to use the tanning equipment, and that I am otherwise healthy			
and capable of using such equipment, 2) I hereby discharge, relinquish, waive, and release Salon and/or its officers,			
directors agents, servants, volunteers, employees, other tanning participants, parent company, subsidiaries and affiliates			
(all of whom are collectively referred to as "Releasees") from any and all loss, damage, expense, injury, accident, and/or liability of any kind or nature whatsoever in connection with my use of tanning equipment, including personal injury or			
death 3) I further indemnify, save, defend, and hold harmless Salon and the Releasees from all claims, actions and/or			
expenses which might arise from any use of the tanning equipment, 4) I hereby sign and deliver this Release and			
	Indemnification to Salon to induce Salon to permit my use of tanning equipment, and I hereby acknowledge that such use is at my own risk and without any representation of any kind or nature having been made by Salon or the Releasees. I		
		TO COMPLY WITH ALL OF THE ABOVE.	
Date: Signature of Participal	nt:	Signature of Witness:	

Skin Type Score

Add up all the points to get the total score and match the TOTAL with the correct skin type listed below. Make sure your client has not made any mistakes.

Score Skin Type Description

0-7 Skin Type I DO NOT TAN THIS PERSON

8-21 Skin Type II Sensitive to sunlight

22-42 Skin Type III Normal sensitivity to sunlight

43-68 Skin Type IV Skin is tolerant of sunlight

69-84 Skin Type V Skin is brown. Very tolerant

85+ Skin Type VI Skin is black. Extreme tolerance

The JCTA would like to thank the International Smart Tan Network for letting the association use parts of the 12th Edition of the Canadian Basic Technical Certification

Manual SKIN

TYPE

CHARACTERISTICS SKIN RESPONSE TO UV

- Unexposed skin is bright white
- Blue or green eyes
- Red or Blonde Hair
- Freckles
- Heritage is English, Irish, Scottish, or Northern European
- Always burns easily and severely
- Peels
- Does not tan

DO NOT TAN THIS PERSON

- Unexposed skin is white
- Blue, hazel, or brown eyes
- Red, blonde, or brown hair
- Heritage is same as Skin Type I or Scandinavian
- Burns easily and severely
- Peels
- Tans minimally or lightly
- Unexposed skin is fair
- Brown eyes
- Dark hair
- Heritage is Central or southern European (Spanish, Greek, or Italian)
- Burns moderately
- Tans average
- Unexposed skin is light brown
- Dark eyes
- Dark hair
- Heritage is Mediterranean, Oriental, or Hispanic
- Burns minimally

- Tans easily and above average with each exposure
- Exhibits IPD (Immediate Pigment Darkening)
- Unexposed skin is brown
- Dark eyes
- Dark hair
- Heritage is East Indian, American Indian, Asian, Hispanic, - Latin American, or African American
- Rarely burns
- Tans easily and substantially
- Always exhibits IPD
- Unexposed skin is black
- Dark eyes
- Dark hair
- Heritage is African American or Aborigine
- Rarely burns Tans easily and profusely Always exhibits IPD