Proponent Testimony –
On Behalf of the Ohio Dermatological Association

HB 329: Prohibit Sun Lamp Tanning Services for Those Under 18
Ohio House Health Committee – December 10, 2019

Chairman Lipps, Vice Chair Manning, Ranking Member Boyd, and members of the Ohio House Health Committee, thank you for the opportunity to provide testimony in support of House Bill 329 today. My name is Shannon Trotter and I am a board-certified dermatologist that practices in Springfield and Canal Winchester, Ohio. I am here representing the Ohio Dermatological Association and the Ohio State Medical Association.

Today’s discussion of HB 329 to prohibit minors from utilizing sun lamp tanning services 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 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.

Studies published in 2012 found that even one indoor tanning session can increase users’ risk of developing melanoma by as much as 20 percent, squamous cell carcinoma by 67 percent and basal cell carcinoma by 29 percent. Indoor tanning is particularly dangerous for younger users and people who begin indoor tanning during adolescence have a higher risk of developing melanoma, the deadliest form of skin cancer. 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 utilized these services.

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.

While in clinical practice, I have had many personal experiences with melanoma and skin cancer related to tanning bed use. I directed the melanoma clinic at the James before going in to private practice. Many of these women reported tanning bed use starting in their teens. Some even had a tanning bed in their house. One of them told me, “I never would have tanned if I would have known the risk. I started at 15. My sister was only 14 and wanted to tan. After she saw what I went through—disfiguring surgeries, treatment at the James, and the threat of losing my own life—she pledged not to tan and educate her friends.” This patient passed away at age 32, three months after we met. This is just one example of how I’ve seen tanning beds linked to skin cancer and its devastating effects on patients.

In late July 2014, the US Surgeon General issued a Call to Action on skin cancer which identified 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 said that state laws restricting youths from tanning are effective. In addition, the World Health Organization (WHO) has advocated for laws to ban access to tanning beds by minors for years.

Also in 2014, the U.S. Food and Drug Administration (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 sun lamps and tanning beds to a Class II level, which institutes stricter regulations to protect public health. Additionally, the order requires 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 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. For something that is classified as dangerous a substance as cigarettes, why do we make an exception for ultraviolet radiation exposure from indoor tanning?

The education on this issue that we as physicians give to the public can only do so much to prevent our youth from being exposed to these dangers. Our message and our recommendations can be strengthened with your help. Skin cancer poses a major public health and safety concern and tanning remains the most modifiable risk factor in its etiology. Social, economic and legislative issues have become tightly intertwined with the complex nature of human behavior in the continued pursuit of an activity that clearly has detrimental effects on one’s health. It is time to decrease the detrimental effects of UV tanning bed radiation on our children’s health.

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.

The Ohio Dermatological Association and the Ohio State Medical Association believes that 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 devastating disease.

22 states now prohibit minors under 18 from using these dangerous devices. I urge you and your colleagues to support HB 329 in order to reinforce the 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 Ohio.

Thank you for your consideration of this important issue, and I would be happy to answer any questions that the committee may have.