

## Testimony Regarding HB329 – Tanning Age Limit Ohio House Health Committee December 10, 2019

Good morning, I am Jeff Stephens, Ohio Government Relations Director from the American Cancer Society Cancer Action Network (ACS CAN). Thank you for the opportunity to speak to you today regarding HB329, which would prohibit children under 18 from using indoor tanning devices. ACS CAN, the advocacy affiliate of the American Cancer Society (ACS), advocates for public policies that will help prevent cancer, including those which reduce the risk of skin cancer. ACS CAN supports prohibiting persons under 18 from using indoor tanning devices and would like to extend our appreciation to Reps. Hillyer and Lightbody for introducing this legislation.

Skin cancer is the most commonly diagnosed cancer in the United States, and rates have been rising for the past 30 years.<sup>1</sup> Over 104,300 *invasive* skin cancers (excluding basal cell [BCC] and squamous cell carcinomas [SCC]) will be diagnosed in the U.S. in 2019, and more than 96,400 of these cases will be melanoma, the most serious and deadliest form of skin cancer.<sup>2</sup> Additionally, over 95,800 cases of *non-invasive* skin melanomas and millions of cases BCC and SCC will also be diagnosed in 2019.<sup>3</sup> In total, over 11,600 men and women are expected to die of skin cancer this year, and over 7,200 of those deaths will be from melanoma.<sup>4</sup> Melanoma is currently the second most common cancer among females aged 15-29 and the third most common cancer among females aged 25-29 in the U.S.<sup>5</sup>

The International Agency for Research on Cancer classifies UV-emitting indoor tanning devices as carcinogenic to humans.<sup>6</sup> In the U.S., more than 6,000 cases of melanoma can be attributed to indoor tanning annually. <sup>7</sup> Unfortunately, the desire for a tanned appearance still causes many people, especially young adults and teenagers, to ignore the serious risks and health warnings and use indoor

tanning devices. The risk of melanoma is about 60 percent higher for people who begin using indoor tanning devices before the age of 35, and risk increases with the number of total hours, sessions, or years that indoor tanning devices are used.<sup>8,9</sup> Similarly, squamous cell carcinoma and basal cell carcinoma are increased by 102 percent and 40 percent, respectively, when a tanning device is used before age 25.<sup>10</sup> A recent study estimated that direct medical care costs for cases of melanoma, squamous cell carcinoma, and basal cell carcinoma attributable to indoor tanning is \$343.1 million annually, with an estimated total economic loss of \$127.3 billion over the lifetime of the individuals affected.<sup>11</sup>

Despite the risks and documented link, use of indoor tanning devices remains common among high school aged girls. Misinformation and deceptive practices from the indoor tanning industry and salons are partly to blame for continued elevated rates of tanning among high school girls, as evidenced by a 2012 congressional committee report and a 2010 Federal Trade Commission settlement with the Indoor Tanning Association.<sup>12,13</sup> Though indoor tanning use has declined in the past several years,<sup>14</sup> in 2017, about 8 percent of high school girls (nearly 13 percent by their senior year) reported recent indoor tanning use,<sup>15</sup> but the percentage varies across the nation. For example, in the last survey conducted specific to Ohio, our state prevalence rates of indoor tanning use in high school students of 17.7% is double that of the national average.<sup>16</sup> Additionally, prevalence rates for Ohio students in 12<sup>th</sup> grade is at a staggering 26 percent.<sup>17</sup>

The high rates of indoor tanning, and the associated harms, have increased awareness and action at all levels of government. In 2014, the Surgeon General released a Call to Action on Skin Cancer calling for an increased effort to reduce exposure to UV radiation, especially through the use of indoor tanning devices.<sup>18</sup> In May 2014, the United States Food and Drug Administration (FDA) reclassified tanning devices from a Class I device (or minimal potential for harm to the user) to a Class II device (or moderate to high potential for harm to the user).<sup>19</sup> As part of the additional restrictions, device manufactures have to include a visible black box warning stating that people younger than 18 years should not use the devices. In addition, one of the Healthy People 2020 objectives is to "reduce the proportion of adolescents in grades 9 through 12 who report using artificial

sources of ultraviolet light for tanning."<sup>20</sup> Finally, 19 states, the District of Columbia, and numerous local governments have passed laws prohibiting the use of indoor tanning devices by persons under the age of 18.

Many U.S. organizations support laws that would prohibit the use of tanning devices by kids under 18, including ACS CAN, the American Academy of Pediatrics, and the American Academy of Dermatology, among others. If properly enforced, laws that prohibit the use of indoor tanning devices for individuals under the age of 18 effectively deter kids from using tanning devices and could help to reduce skin cancer incidence and mortality rates across the country.<sup>21,22,23,24</sup> A 2018 study found that indoor tanning prevalence among female high school students in states with age restriction laws was 47 percent lower than among those not affected by such laws.<sup>25</sup> A Minnesota Department of Health survey found that, since the state's law prohibiting persons under the age of 18 from using indoor tanning devices was passed, the number of 11<sup>th</sup> grade white females using indoor tanning devices decreased over 70 percent – from 33 percent in 2013 to 9 percent in 2016.<sup>26</sup> Additionally, a Centers for Disease Control and Prevention (CDC) study predicts that prohibiting indoor tanning among children younger than 18 years could prevent 61,839 melanoma cases, prevent 6,725 melanoma deaths, and save the U.S. \$342.9 million in treatment costs over the group's lifetime.<sup>27</sup>

Because the science demonstrates that tanning devices cause cancer and that age restrictions can be effective at reducing teen tanning rates, ACS CAN strongly supports HB329 to prohibit kids under the age of 18 from using indoor tanning devices, without any exceptions. To date, 19 states and the District of Columbia have passed similar comprehensive legislation prohibiting the use of tanning devices by persons under 18, without exception, to protect their state's youth. Similar age restrictions on harmful substances and services have been placed on tobacco products and alcohol. Restricting access to indoor tanning device use based on age is no different. Given what is known about the harmful effects of UV radiation from indoor tanning devices, especially among youth, Ohio should pass HB329 prohibiting persons under 18 from using indoor tanning devices. Please feel free to contact me directly if I can provide any additional information or if you have any questions.

<sup>4</sup> Ibid.

<sup>5</sup> NAACCR Fast Stats: An interactive tool for quick access to key NAACCR cancer statistics. North American Association of Central Cancer Registries. http://www.naaccr.org/. (Accessed on 07-2018)

 <sup>7</sup> Wehner MR, Chren MM, Nameth D, Choudhry A, Gaskins M, Nead KT, et al. International prevalence of indoor tanning: a systematic review and meta-analysis. *JAMA Dermatol.* 2014; 150(4): 390-400. doi: 10.1001/jamadermatol.2013.6896.
<sup>8</sup> Boniol B, Autier P, Boyle P, Gandini S. Cutaneous melanoma attributable to sunbed use: systematic review and metaanalysis. *British Medical Journal.* 2012; 345:e4757. Correction published December 2012; 345:e8503

<sup>9</sup> Lazovich D, Vogel RI, Berwick M, Weinstock MA, Anderson KE, Warshaw EM. Indoor tanning and risk of melanoma: a case-control study in a highly exposed population. *Cancer Epidemiol Biomarkers Prev.* 2010;19: 1557-1568.

<sup>10</sup> Wehner MR, Shive ML, Chren MM, Han J, Qureshi AA, Linos E. Indoor tanning and non-melanoma skin cancer:

systematic review and meta-analysis. BMJ. 2012; 345:35909. doi: 10.1136/bmj.e5909.

<sup>11</sup> Waters H, Adamson A. The health and economic implications of the use of tanning devices. J of Cancer Policy. 2018; 17:45-50.

<sup>12</sup> U.S. House of Representatives Committee on Energy and Commerce Minority Staff. (2012, February 1). False and Misleading Information Provided to Teens by the Indoor Tanning Industry – Investigative Report.

<sup>13</sup> United States of America Federal Trade Commission. (2010, May 13). In the Matter of Indoor Tanning Association, a corporation - Docket Number C-4290 Decision and Order. Available at

ftc.gov/os/caselist/0823159/100519tanningdo.pdf.

<sup>14</sup> Centers for Disease Control and Prevention. *Skin Cancer Prevention Progress Report 2018*. Atlanta, GA: Centers for Disease Control and Prevention, US Dept of Health and Human Services; 2018.

<sup>15</sup> Centers for Disease Control and Prevention (CDC). Youth Risk Behavior Surveillance-United States, 2017. *MMWR*. 2018; 67(8).

<sup>16</sup> Ohio Department of Health Youth Risk Behavior Survey, 2013.

<sup>17</sup> Ibid.

<sup>18</sup> U.S. Department of Health and Human Services. The Surgeon General's call to action to prevent skin cancer. Washington, D.C.: U.S. Dept of Health and Human Services, Office of the Surgeon General; 2014.

<sup>19</sup> Federal Register. General and plastic surgery devices: reclassification of ultraviolet lamps for tanning, henceforth to be known as sunlamp products and ultraviolet lamps intended for use in sunlamp products. Published June 2, 2014. Accessed August 2019. https://www.federalregister.gov/articles/2014/06/02/2014-12546/general-and-plastic-surgery-devices-reclassification-of-ultraviolet-lamps-for-tanning-henceforth-to.

<sup>20</sup> U.S. Department of Health and Human Services. *Healthy People 2020: Cancer*. Accessed January 2019.

http://www.healthypeople.gov/2020/topics-objectives/topic/cancer/objectives.

<sup>21</sup> Guy GP, Berkowitz Z, Jones SE, Olsen E, Miyamoto JN, Michael SL, et al. State indoor tanning laws and adolescent indoor tanning. *Am J Public Health.* 2014; 104(4):e69-74.

<sup>22</sup> Mayer JA, Woodruff SI, Slymen DJ, et al. Adolescents' use of indoor tanning: a large-scale evaluation of psychosocial, environmental, and policy-level correlates. *Am J Public Health*. 2011; 101(5):930-8.

<sup>23</sup> Watson M, Holman DM, Fox KA, et al. Preventing skin cancer through reduction of indoor tanning: current evidence. *Am J Prev Med*. 2013;44: 682-689.

<sup>24</sup> Sinclair C, Makin JK. Implications of lessons learned from tobacco control for tanning bed reform. *Pre Chronic Dis.* 2013; 10:120186. doi: http://dx.doi.org/10.5888/pcd10.120186.

<sup>25</sup> Qin J, Holman, DM, Jones SE, Berkowitz Z, Guy GP. State indoor tanning laws and prevalence of indoor tanning among US high school students, 2009-2015. *AJPH*. 2018;108(7), 951–56.

<sup>26</sup> Minnesota Department of Health. Teens, indoor tanning and melanoma. Published January 9, 2017. Accessed on January 2019. http://www.health.state.mn.us/divs/chs/surveys/mss/MDHIndoorTanningFactSheetw\_ref.pdf.
<sup>27</sup> Guy GP, Zhang Y, Ekwueme DU, Rim SH, Watson M. The potential impact of reducing indoor tanning on melanoma

prevention and treatment costs in the United States: An economic analysis. J Am Acad Dermatol. 2016; 1-8.

<sup>&</sup>lt;sup>1</sup> American Cancer Society. *Cancer Facts & Figures 2019*. Atlanta, GA: American Cancer Society; 2019.

<sup>&</sup>lt;sup>2</sup> Ibid

<sup>&</sup>lt;sup>3</sup> Ibid.

<sup>&</sup>lt;sup>6</sup> International Agency for Research on Cancer. The association of use of sunbeds with cutaneous malignant melanoma and other skin cancers: A systematic review. *Int J Cancer.* 2007;120: 1116-1122.