ASA
American Suntanning Association

April 16, 2014

Office of Science Quality
Centers for Disease Control and Prevention
InfoQuality@cdc.gov

This is a submission of an information quality request for correction.

Detailed description of the specific information that needs to be corrected.

The information that needs to be corrected is the following sentence: *"Using a tanning bed is particularly dangerous for younger users; people who begin tanning younger than age 35 have a 59% higher risk of melanoma."* This sentence appears on the CDC's website under the heading "Dangers of Indoor Tanning" in the section of the CDC's website titled "Is Indoor Tanning Safe" at http://www.cdc.gov/cancer/skin/basic_info/indoor_tanning/htm.

The specific reasons for believing the information does not comply with OMB, HHS or CDC guidelines and is in error.

The sentence is scientifically incorrect when applied to US tanning salons that follow FDA-mandated instructions on maximum exposure times. It appears to be based on the 2012 Boniol report "Cutaneous melanoma attributable to sunbed use: systematic review and meta-analysis" (copy attached), which was an update of the 2006 IARC report "The association of use of sunbeds with cutaneous malignant melanoma and other skin cancers: A systematic review" (copy attached). These studies do not provide scientific basis for the referenced sentence.

The 2006 IARC report included a meta-analysis of all known epidemiological studies (23 in all) containing data on melanoma and artificial UV exposure from use of "sunbeds" (defined to mean either sunlamps or sunbeds) at home, in tanning salons, in gyms, in beauty parlors and in medical offices. Most of the artificial UV exposure was in Europe or the U.K. The conclusion was as follows: "First exposure to sunbeds before 35 years of age significantly increased the risk of melanoma, based on 7 informative studies (summary relative risk, 1.75; 95% CI, 1.35-2.26)." This appears to be the basis for the following statement of the CDC on its website: "People who begin tanning [in a U.S. indoor tanning salon] younger than age 35 have a 75% higher risk of melanoma" (copy attached). The 2012 Boniol report was an update of the 2006 IARC report written by the IARC report's principal authors that changed the 75% figure to 87% (subsequently corrected to 59%). Sometime between August 2013 and February 2014 the CDC changed the "75%" in the referenced sentence on its website to "59%" (copy attached).

Apparently following the lead of the CDC, the same incorrect statement is now made by the FDA, the NCI, the EPA, the USPSTF, the FTC and most practicing dermatologists in the country; all agree that use of any indoor tanning salon in the United States by a person under age 35 increases the risk of melanoma by more than 50%. Even highly-qualified medical practitioners are blindly following this incorrect statement without question. Dr. Jeffrey E. Gershenwald, professor, dermatologist and certified oncologist at M.D. Anderson Cancer Center, made the following statement to the Texas Senate on March 12, 2013 in support of a proposed under-18 ban on indoor tanning: "In fact each session in a tanning bed has been estimated to be associated with a 1.8% increased risk [of melanoma]. And if people use tanning beds before the age of

35 the risk [of melanoma] has been estimated to be almost double by 87%." (transcript attacbed).

The comprehensive Gandini 2005 study (copy attached) analyzes all the risk factors for melanoma. It shows that the only non-genetic risk factor for melanoma is UV exposure and that the relationship between UV exposure and melanoma is nonlinear; chronic non-burning UV exposure is associated with reduced risk of melanoma (RR = 0.95; 95% CI: 0.87, 1.04) and sunburns are associated with an increased risk of melanoma (RR = 2.03; 95% CI: 1.73, 2.37). Two of the authors of the Gandini study were also authors of the IARC report, showing that the dual nature of UV exposure was well known to the authors of the IARC report. An examination of the 2006 IARC report and the 7 constituent studies shows the total absence of data on burns from artificial UV exposure, making any determination of risk from non-burning artificial UV exposure impossible. The IARC report itself reveals that 40+% of persons using tanning beds in Europe in the time period studied received UV burns; the probable reason for this high rate of burning is that the unregulated European tanning salons studied permitted self-operation of the tanning beds by customers and no effective limit on exposure times.

Yet now, the CDC says that the 2006 IARC report's statement applies to professionally operated tanning salons in the United States that follow FDA-mandated instructions on maximum exposure times which have been calculated by the FDA to exclude the likelihood of UV burns. This statement of the CDC is not correct.

There are significant differences in the risk of UV burns associated with different types of exposures to artificial UV: using a sunlamp at home vs. using an unregulated self-serve tanning salon in Europe or the U.K. vs. using a professionally operated tanning salon in the United States that follows FDA-mandated instructions on maximum exposure times vs. using a professionally operated tanning salon in the United States that does not follow FDA-mandated instructions on maximum exposure times. Approximately half of the states in the United States have regulations requiring compliance with FDA-mandated instructions on maximum exposure times, and half do not.

At most, the IARC report finds that artificial UV exposure in circumstances where 40+% of those exposed get UV burns increases the risk of melanoma by some amount, and that persons younger than age 35 are more likely to get burned by self-use of artificial UV devices than older people. While acknowledging the equivalence of solar and artificial UV (the IARC report states that "although the contexts of sun exposure and indoor tanning differ, both deliver UV radiation, and their health effects would therefore be expected to be similar"), IARC inexplicably ignored the nonlinear relationship between UV exposure and melanoma (chronic non-burning UV exposure is associated with reduced risk of melanoma and sunburns are associated with increased risk of melanoma) set forth in Gandini as if it was not applicable to artificial UV. Gandini was not discussed at all in the IARC report, nor was the difference between burning and non-burning UV exposure.

Misunderstanding the relationships between UV exposure, whether from the sun or from sun lamps, is not a small matter, and extends well beyond the indoor tanning salon issue. Our government health agencies are urging the U.S. public to reduce its sun exposure when the weight of the science indicates the public should have more, not less, non-burning UV exposure. The U.S. public needs to be accurately informed of the science on something as basic to human health as the risks and benefits of UV exposure.

I have attached critiques of the IARC and Boniol reports by Dr. James J. Schlesselman, as well as Dr. Schlesselman's CV. I believe this matter can be easily rectified by having a CDC epidemiologist who is conversant with the IARC and Boniol reports review these critiques.

The specific recommendation for correcting the information

We recommend that the sentence *"Using a tanning bed is particularly dangerous for younger users; people who begin tanning younger than age 35 have a 59% higher risk of melanoma."* be deleted from the CDC's website.

Description of how the person submitting this complaint is affected by the information error

The American Suntanning Association represents the owners of approximately 1,000 indoor tanning salons in 31 states of the U.S. The information error harms the business of indoor tanning salons by inducing customers and potential customers not to use indoor tanning salons.

The name, mailing address, telephone number and e-mail address of the person making this complaint

The person making this complaint is the American Suntanning Association, which is a trade association of indoor tanning salon owners in the United States. The mailing address, telephone number and e-mail address of the American Suntanning Association is:

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Other – For your information

The American Suntanning Association, in response to Docket No. CDC-2013-0014, made a filing with the CDC on August 29, 2013. On November 14, 2013 Drs. James J. Schlesselman and David G. Hoel (CV attached) met with representatives of the CDC's Division of Cancer Prevention and Control at the CDC's offices in Atlanta and explained to Dr. Mary White of the CDC why the sentence referred to above is incorrect. Dr. Mary White declined to engage in a discussion of the science with Drs. Schlesselman and Hoel, presumably for the reason that the CDC was only collecting comments in response to the referenced Docket and was not in a position at that time to engage in a discussion.

Respectfully submitted,

American Suntanning Association

By: /S/
Barton D. Bonn, President