

Be SunSmart Everywhere!

DID YOU KNOW? Sun exposure adds up day after day, and it happens every time you're in the sun. Damage is permanent and irreversible.

MYTH

FACT

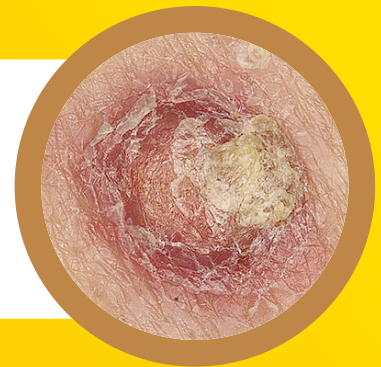
'Sunburn happens only when we go to the beach'	More of us can get sunburnt during day to day activities
'When I'm active outside, the sun doesn't affect me'	During sport, players, officials and spectators can be exposed to excessive levels of UV radiation that can cause skin and eye damage, sunburn and skin cancer
'My skin is strong and I tan easily without burning'	All skin types can be damaged by overexposure to UV rays. Damage is permanent, irreversible and adds up with each exposure to increase the risk of skin cancer
'I have a dark skin, so I don't have to protect my skin'	There is a lower incidence of skin cancers among darker skin tone population. However, melanoma tends to occur on the palms, soles of the feet and mucosal surfaces. Skin cancers in people with darker skin are often diagnosed at a more advanced stage
'Men's skin doesn't damage as easily as women's'	Stats indicate a higher incidence of Basal cell carcinoma among men in SA than women. Melanoma skin cancer death rates in men are on the rise in most countries. There's evidence that suggests men are less likely to protect themselves from the sun
'The UV rays in SA are the same as elsewhere in the world'	Year round exposure to high ultraviolet radiation from the sun together with SA's geographic position makes us especially susceptible to skin cancer
'So now I must avoid the sun completely'	Sunlight is the main source of UV rays, but you don't have to avoid the sun completely. And it is unwise to stay inside if it keeps you from being active, because physical activity is important for good health. But getting too much sun at the dangerous times of day (10:00 and 15:00) are harmful

The Most Common Skin Cancers



Basal cell carcinoma (BCC), or basal cell skin cancer, is the most common form. It starts in the top layer of the skin called the epidermis

Squamous cell carcinoma (SCC) is the second most common type. Begins in the squamous cells, which are found in the upper layer of the skin. Fortunately, SCC is curable in 95% of cases if detected early



Malignant melanoma currently accounts for $\pm 1\%$ of all cancer deaths. Cancerous growths develop when unrepaired DNA damage to skin cells (most often caused by ultraviolet radiation from sunshine or tanning beds) triggers mutations (genetic defects) that lead the skin cells to multiply quickly and form malignant tumours. Melanomas often resemble moles; some develop from moles

Risk Factors

- » Having a lighter natural skin colour
- » Family or personal history of skin cancer
- » Exposure to the sun through work and play
- » History of sunburns early in life
- » Having blue or green eyes, blonde or red hair
- » Having many moles and certain types of moles
- » Having a skin that burns, freckles, reddens easily, or becomes painful in the sun

LOWER YOUR RISK



Avoid the sun
between 10-3pm.



Wear a sunhat
at all times.



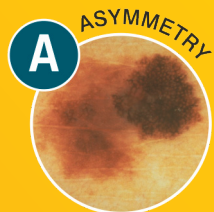
Re-apply
sunscreen every
2hrs.

- » **Avoid direct sunlight between 10am and 3pm** when the sun's rays are most dangerous
- » **Cover up by wearing thickly-woven hats with wide brims and loose-fitting clothes, made of tightly-woven fabric that is cool, but will block out harmful UV rays**
- » **Look out for UV protective beach wear and umbrellas bearing the CANSA Seal of Recognition**
- » **Always apply sunscreen, preferably with a Sun Protection Factor (SPF) between 20 and 50 – preferably SPF 30 to 50 for fair to very fair skin. Apply the sunscreen generously to all exposed skin areas**
- » **Use a sunscreen bearing the CANSA Seal of Recognition. Apply 20 minutes before going outside into the sun. Re-apply regularly (at least every two hours), after towel-drying, perspiring or swimming. Apply liberally to all exposed skin; including the back of the neck, tips of ears, arms, feet and hands**
- » **Look out for the manufacture or expiry date on the sunscreen package. Sunscreen usually expires two years after date of manufacture. Once opened, sunscreen should not be used for longer than one year**
- » **Protect the eyes by wearing sunglasses with a UV protection rating of UV400**
- » **Avoid sunlamps and tanning beds**
- » **Take special care to protect children - babies younger than one year should never be exposed to direct sunlight**

Spot the Spot

Check your skin carefully every month by doing a mole check - ask a family member or friend to examine your back and the top of your head. If you notice any of the warning signs, see a doctor or dermatologist immediately.

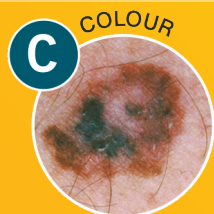
ABCDE Warning Signs



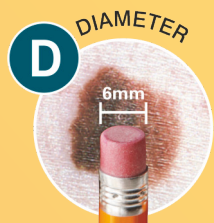
A-symmetry - a mole or mark with one half unlike the other - common moles are round and symmetrical



B-order irregularities - scalloped or poorly defined edges - common moles have smooth and even borders



C-colour variations and inconsistency - tan, brown, black, red, white and blue - common moles are usually a single shade of brown or black



D-diameter - larger than 6 mm



E-evolving - changes in shape, colour or border of a mole



Did you know?

- » CANSA offers mole mapping FotoFinder dermoscope device screening
- » Every client with suspicious skin damage is referred for an intensive skin evaluation using the FotoFinder dermoscope
- » Available at some CANSA Care Centres

UV Exposure & People Living with Albinism

- » Albinism is a genetic condition characterised by minimal or total absence of melanin in the skin, hair and eyes.
- » People living with Albinism experience visual impairment and are highly vulnerable to skin damage induced by the sun.
- » They're at great risk of developing squamous cell carcinoma (SCC). Early recognition of SCC is very important as it's curable by surgery.

IN AFRICA

- » People living with Albinism are often subject to social discrimination because of superstitious beliefs and the stigma associated with albinism
- » They are often shunned by their communities with consequent delay in getting medical treatment
- » In general, public health measures to minimise damage to the skin caused by the sun are often unsuccessful because of poverty, lack of understanding of the problem and lack of compliance to precautions



Precautions should be introduced early in childhood and continue throughout life:

- » Minimise outdoor activities during peak sunlight hours (10:00- 15:00)
- » Wear protective clothing to cover as much of the skin as possible including hats
- » Wear sunglasses to protect the eyes
- » Consideration should be given to ensure their workplace is in a shaded environment
- » Make sure to get regular examinations to check for Squamous Cell Carcinoma, Basal Carcinoma and Cutaneous Melanoma
- » The use of sunscreen for exposed skin areas - sunscreen is available through prescription for people living with albinism from the Department of Dermatology at public hospitals

DID YOU KNOW?

CANSA has successfully lobbied for the National Department of Affordable Medicines to provide substantial and quality sunscreen to people with albinism.



Research • Educate • Support

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072 197 9305 ENGLISH, AFIKAANS
071 867 3530 XHOSA, ZULU, SOTHO, SIWATI

Sunbeds - The Burning Truth



DID YOU KNOW? In 2009 sunbeds and tanning booths were officially classified as carcinogenic to human health (Group 1) by the International Agency for Research on Cancer (IARC)

MYTH

FACT

'I've heard that indoor tanning / sunbeds are safe'

People who indoor tan:

- damage their skin
- get wrinkles, warts, rashes, dark spots
- skin infections
- cataracts in their eyes
- most dangerous of all – increased risk for skin cancer, incl deadly melanoma

'I'm still young and my skin will heal again'

- The first use of sunbeds before 35 increases risk of developing melanoma by 59%
- People who have used a sunbed at least once at any stage in their life have a 20% higher risk of developing melanoma than people who have never used a sunbed

'Using a sunbed helps people generate vitamin D which is essential for bone and muscle health'

Using a sunbed is not an efficient way to generate Vitamin D. In most countries, esp SA, only very brief exposure to sunlight is needed for creating adequate vitamin D levels

'Sunbeds are safer than going out into the sun because it uses mostly UV-A radiation and is more controllable'

It's untrue that UV-A is the safe UVR. Sunbed users can be exposed to higher UVR doses because many devices emit UVR above safety limits

Sunbeds - The Burning Truth



DID YOU KNOW? In South Africa, skin cancer accounts for one-third of all diagnosed cancers and is the cause of about 300 deaths per year. The diagnosis and treatment of all skin cancers, in both public and private health care, is estimated (as at 2016) in excess of R90 million per year.¹

MYTH

FACT

'Getting a 'pre-vacation tan' will protect me against sunburn during vacation'

Research has shown that a sunbed tan does not lower the risk of sunburn from sun exposure and may even increase it by giving a false sense of protection

'Sunbed use gives me a healthy-looking tan right away'

The immediate darkening soon fades, and the skin imperfections are visible again, motivating users to use the sunbed again. This may lead to 'all year tanning' raising the risk of premature ageing and skin cancers

'Sunbed use enhances my sense of well-being and treats seasonal affective disorder (SAD)'

Endogenous brain opioids are created during the tanning session, leading to a sense of well-being and the possibility of tanning addiction. Visible light exposure, rather than UV, is a common therapy for SAD

'My skin is only damaged if I get sunburned'

A tan is a sign that the skin has been damaged from UVR. Tanning without sunburn can still cause premature skin ageing and increase risk of skin cancer through irreparable DNA damage

1. Gordon L, Elliott T, Wright CY, Deghaye N and Visser W. Modelling the healthcare costs of skin cancer in South Africa. BMC Public Health. 2016;16:113: 1-9.