

SunScare

A Crime Report

The 20th Century

SUPER FRAUD

that continues today.

May, 2008

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INTRODUCTION

People are smiling. It's a warm spring day and the sun is shining. Heads are instinctively tilted to soak up the rich glow, to absorb the bounty of warmth, energy and vitality. The air is filled with the aroma of new growth breaking through the wet earth.

Memories of the long cold winter are being replaced by primal voices whispering deep in the soul, arousing sexual desire, fueling the urge to start new life ... and people are smiling.

Wait!! Stop!! Danger, Danger, the U.V. Index is rising.

We must protect ourselves, cover up, and lather on the sunscreen. The sun is really an evil entity that can kill us!

The dermatologists trumpet tales of skin cancer, premature aging and skin damage. The beauty and health magazines unroll an unending carpet of stories of the terrible effects of exposure to the sun. We are advised to apply sunscreen all year long, winter or summer Even when we are indoors.

Really ?? !!

Or have we been scammed?

Have we been deceived by people we trust? Have we been misled by those we rely on to protect our health and well-being?

Why? Why? Why?

SUNSCARE

For more than 25 years a SunScare lobby that consists of a majority of “respected authorities” such as dermatology associations, government health regulators, health care workers and the media has bombarded us with a fear campaign. Their messages contained totally negative information about exposure to the sun or sun lamps. At the same time, a smaller group of scientists, doctors, researchers and epidemiologists have insisted that sunlight is good for us. In particular the ultraviolet portion of the light spectrum was a valuable element in biological benefits to the body. This smaller group readily admitted that there were risks associated with chronic, severe over-exposure to sunlight, but that these risks were manageable with good education programs and **nobody advocates over-exposure.**

Further, this pro-sun group predicted that the risks of health problems due to sunlight deficiency were far, far, far greater than the risks of over-exposure.

That prediction has come true!

Today, we have a worldwide epidemic of Vitamin D deficiency due to a lack of sufficient sunlight in our lives.

If that statement sounds trivial to you, let me put it in other terms.

With the elimination of Vitamin D deficiency we can expect to see the following in CANADA:

PREVENTION - of 140,000 cases of serious chronic diseases each year.
Dr. William B. Grant – Oct.2007

PREVENTION - of 24,000 unnecessary deaths caused by serious chronic diseases each year.
Dr. William B. Grant – Oct.2007

ELIMINATION - of the pain, suffering and disability related to the above.

ELIMINATION - of at least \$9 billion dollars of economic burden caused by the above each year.
Dr. William B. Grant - Oct.2007

ELIMINATION - of the wait times related to our over-burdened Health System. This alone has recently been estimated to add an additional economic burden of \$15 billion dollars each year.
Canadian Medical Association – Jan.2008

A REVERSAL - of the trend to health problems that develop in the womb or during early childhood related to Vitamin D deficiency.
Dr. John J. Cannell – Dec.2007

In this Report I will detail the path of misinformation that includes statements by “respected authorities” that are false, deceptive, misleading and scientifically unsubstantiated.

This is not a Health Story it is a Crime Report!

This report is about the lies that masquerade as scientific fact stating that exposure to the sun is bad for our health. It uncovers an almost inconceivable plot that centers on the fact that a tiny, neighborhood sun tan salon could jeopardize the profits of huge multi-national corporations. These worldwide businesses include pharmaceutical giants, cosmetic manufacturers, sunscreen manufacturers and organizations such as dermatology associations. The revenue of these groups is in the hundreds of billions of dollars per year. SunScare also includes the participation of Health Canada and the Canadian Cancer Society.

In contrast, the Indoor Tan Salons are likely mom-and-pop type operations or possibly a female owner with some part-time employees. Their income can best be described as modest. Sounds impossibly preposterous, doesn't it? But here is a fact confirmed by the archives of the American Academy of Dermatology (AAD). It states that in 1993 there were almost 900,000 visits to dermatologists in the U.S.A. (Plus approximately 100,000 in Canada) for photo-therapy treatment of psoriasis. This treatment used ultra-violet light, sometimes alone, or in combination with medication (photo-chemo therapy). These treatments relieved the symptoms of psoriasis and returned the skin to its normal condition.

By 1998, a scant five-year period, 90% of those visits disappeared. What happened? Were all those people miraculously cured? No, there is no cure for psoriasis. There is only control. The answer comes from statistics gathered by the Sun Tan Industry that indicates that almost one million psoriatic patients in North America are attending their local sun tan salon for **SELF TREATMENT** of their condition. Moreover, they are experiencing comparable or improved results.

This was confirmed at the February 2002 Annual Meeting of the AAD.,, where, contrary to the official negative position of the Association a committee headed by Dr. Christopher S. Carlin gave a poster presentation recommending

that patients use commercial sun tan salons to treat skin conditions. Dr. Carlin stated: "Commercial tanning beds represent a form of light therapy that is widely available and frequently utilized by many psoriasis patients." Was this presentation a reflection of the reality that existed and an acceptance of the fact that this client market would not return to them?

Result – Billions of dollars of lost revenue for dermatologists, further billions in lost pharmaceutical sales.

Let us go to another level. Just imagine that the prevention and possible cure of twenty-five of the most serious chronic diseases of mankind may be as simple as eliminating Vitamin D deficiency. Exposure to ultraviolet light, either from the sun or from a sun bed, is the most efficient and reliable source of Vitamin D.

The list of diseases includes more than twenty different kinds of internal cancers (breast, colon, prostate, ovarian, etc) as well as a dozen seemingly unconnected diseases such as Diabetes I and II, Multiple Sclerosis, Osteoporosis, Infertility, Heart Disease and even Schizophrenia.

It would make sense that the possibility of such wonderful results would unite World Health Authorities in an effort to reverse the past twenty-five years of medical advice to avoid exposure to ultraviolet light. Instead, there is a massive worldwide dispute in the medical community. The dispute begs the questions:

- Would respected businesses lie to protect their profits?
- Would respected authorities support "big money" to the detriment of public health?

THE PROBLEM

Throughout history, medical and health advice has constantly changed to reflect emerging beliefs of the time. Sometimes, the advice was absolutely wrong.

For example:

- 35 years ago it was difficult to find a doctor or health authority that would endorse vitamin supplements. They were dismissed as useless and a waste of money. Today, there is widespread acceptance of vitamins by respected authorities. However there are still pockets of entrenched resistance to the concept of vitamins.
- 30 years ago, the Federal Trade Commission in the U.S.A. (FTC) tried to pass legislation that would deny Fitness Clubs the right to make claims that exercise is healthy and a necessary factor in wellness. If those laws had been passed, Fitness Clubs would only be able to promote the cosmetic effects of fitness programs. Fortunately, these laws were never enacted.
- 60 years ago, cigarette advertisements commonly featured Doctors who recommended various tobacco brands as their favorite smoke. We know today that was appallingly bad information.

Today, we are faced with the realization that beginning in the early 1980's, the most damaging medical advice in history started to evolve with the advice to avoid the sun, the source of 90% of our Vitamin D requirements.

AS A RESULT:

- The “War against Cancer” that was declared in 1975 by President Nixon was not won. In spite of the fact that Oncologists perform miracles every day in diagnosing and treating cancer, prevention of the more than 20 common cancers was just not happening. The number of new cases each year still keeps increasing along with the corresponding deaths and disability.

TODAY, SCIENTISTS HAVE PROVEN THAT VITAMIN D CAN PREVENT CANCER.

- If you do develop cancer, follow the advice of your oncologist **and** make sure your Vitamin D tank is full.
- In total, including the cancers, there was an increase each year of the 25 most serious, chronic diseases of mankind **worldwide**. These include diabetes, heart disease, multiple sclerosis, rheumatoid arthritis, osteoporosis and others. Again, scientists can link Vitamin D deficiency to every one of these conditions.
 - In the early 1980’s the triple childhood epidemics of asthma, diabetes and autism all quietly began and increased at terrifying rates each year. Although the links to Vitamin D deficiency are not yet proven, the evidence again points to an important connection to Vitamin D.

HOW IS IT POSSIBLE THAT SUCH DIVERSE AND UNCONNECTED DISEASES CAN ALL BE LINKED TO LACK OF VITAMIN D?

Vitamin D is not really a vitamin. It is a hormone that in its activated state is the most powerful steroid hormone in the body. It can be activated in **all** parts of the body and does something absolutely remarkable.

IT CONTROLS THE GENETIC SWITCHES THAT GUIDE CELLULAR LIFE.

These switches tell cells when to grow, when to mature, when to divide, when to differentiate (which cells will become a blood cell or a heart cell, or a brain cell, etc.) and most important ... when to die! **(Apoptosis programmed natural cell death.)**

Every single cell in the body is programmed to a certain life cycle and is then replaced by a new cell. For example:

A skin cell has a life cycle of about 28 days. That means that from the time we are born to the day we die, we shed a complete layer of skin every month. We don't notice it because every time we bathe, every time we put on clothes, every time we move or rub against anything, we lose tiny amounts of dead skin of course there is a maturing cell ready to take its place.

To illustrate natural cell death (Apoptosis), the following events happen **every 60 seconds** in the human body:

- Bone marrow will produce 180 million blood cells (and destroy the same amount.)
- The body will shed 10,000 particles of skin.
- In total 300 million cells will die and be replaced.

In the case of cancer, certain cells do not receive the message to be replaced. They become immortal and keep on dividing and growing till they kill us. The solution has been to cut them out surgically or use chemicals or radiation to eliminate them.

WOULDN'T IT BE MUCH EASIER TO MAKE SURE THAT EVERYONE'S VITAMIN D TANK IS FULL SO THAT THE NATURAL PROCESSES AND FUNCTIONS OF ACTIVATED VITAMIN D CAN TRIGGER THE APPROPRIATE GENETIC SWITCHES AT THE APPROPRIATE TIME?

Will optimal levels of Vitamin D in the body eliminate all disease? Absolutely not. There are far too many compounding elements in our lives such as toxins, pollution and chemicals, smoke and many others. However, sunlight (particularly the ultraviolet portion of sunlight) is one of the four basic elements of life. We need air, water, food and sunshine. Without sunlight there would be no life on earth. No animals or plants, or insects or birds or human beings!

WHAT HAPPENED TO MAKE US FEAR THE SUN?

Especially since the history of using sunlight to heal is well documented and extends back for thousands of years. Most civilizations were aware of the value of the sun. Old Italian folklore even includes the message "Where the sun does not go, the doctor does."

When the industrial revolution began, so did the appearance of rickets. Factory towns created crowded housing conditions and a smoke-filled sky, both of which blocked sunlight. Lack of sunlight meant low Vitamin D levels. When doctors realized that children in the country did not suffer from rickets, they treated the city children with a combination of country living and sun lamps.

Other examples of historic use of sunlight are:

- In 1903 the first Nobel Prize in medicine was awarded to Dr. Niels Finsen for his successful use of sun lamps to treat skin conditions.
- Dermatologists have used sun lamps since 1927 to treat psoriasis, acne and eczema.
- Tuberculosis was routinely treated in sanatoriums with extensive exposure to sunlight. This was often done in premises at higher altitudes where ultraviolet light levels are higher.
- Before antibiotics, wounds and other injuries were treated with exposure to sunlight, (even Florence Nightingale knew this).
- Premature babies with jaundice (the build up of bilirubin in the bloodstream) had these toxins removed with exposure to sunlight or sun lamps, and that practice continues today.

Armed with this historic knowledge, the question remains “What happened to make us fear the sun?”

QUI BONO (WHO PROFITS?)

This is a crime report.. As in every crime, there must be a motive. The concept of Qui Bono (Who Profits) was used by the Roman Judge Lucius Cassius Longinus (2nd Century BC) in deciding who was guilty of a crime where financial gain was involved.

The SunScare lobby uses fear as a powerful motivator. Fear of skin cancer, fear of premature aging and wrinkling, fear of health problems. This scare information was guided by a lot of money ... massive amounts of money, obscene amounts of money.

Here is a list of the major groups that profit from SunScare:

► The Cosmetics Industry: The marketing experts of this industry learned a long time ago that people who had healthy looking tans, clear complexions and clean skin, needed only little cosmetic help. On the other hand, if you had pale, pasty skin, blemishes and other skin problems that naturally disappeared in the summer sun. Well, that resulted in billions of dollars of increased profit.

Since cosmetics manufacturers are the major advertisers in women's magazines, beauty and fashion publications, the editorial content of these venues often reflected the wishes of the advertisers. Negative stories of exposure to sunlight were common. Positive stories that told of the benefits of sunlight were almost non-existent.

► The Dermatology Associations: Note that I did not head this section “Dermatologists”. The associations have an official policy of demanding a ban of the Indoor Tan Industry. They have actively campaigned for many years to have sun lamps declared medical devices that could only be used by medical personnel. When asked why this exclusivity should exist, the reply is: “Because we will not sunburn people.” However, the equipment is classified as a Class I Medical Device due to the actual experience of low risk.

In the meantime, individual dermatologists often quietly recommend that patients use commercial indoor tanning facilities for treatment of psoriasis and other skin problems. Dermatologists must have mixed emotions when recommending tan salons since sun beds dramatically reduced their most widespread services treatment of psoriasis, acne and eczema.

This is a case of billions of dollars of lost revenue that the dermatologists would recover **if** sun tan salons were banned – qui bono still applies.

► The Pharmaceutical Companies: If exposure to sunlight resulted in clean, clear, blemish-free skin, free of psoriasis or other skin disorders, there would be no requirements for the ointments, creams, injections, medications or other treatments that would be prescribed. Again we are talking billions and billions of dollars that are involved. Qui bono applies.

► Sunscreen Manufacturers: The sunscreen-marketing experts very cleverly tied the use of sunscreen to preventing skin cancer. These people are wizards at using fear to sell products. The problem is:

SUNSCREENS DO NOT PREVENT CANCER!

You can live in a cave, in the dark and still get skin cancer. Sunscreens are designed to protect you from **sunburn**. The successful tactics of this industry translates into multi-billions of dollars in revenue.

All of the above groups fed off each other's efforts, and the SunScare Campaign continued. Tens of millions of dollars were used to entrench the image that the sun is dangerous. Fear marketing is a powerful motivator and the billions of dollars in profits grew and grew.

WHY? WHY? WHY?

If money is the underlying cause of SunScare, why did reputable authoritative organizations and health authorities join in? They knew (or ought to have known) of the following:

- In 1941 Dr. Frank Apperly completed a research study that was published in the very first edition of the Journal of Cancer. The study revealed that the closer a person lived to the equator, the lower the risk of breast cancer, colon cancer, pancreatic cancer and others.

Sadly, no research funding emerged from this phenomenal news. There is no profit in proving that a free element **sunshine** was of medicinal or therapeutic value.

- In the 1980's, a team of epidemiological brothers - Dr. Cedric F. Garland and Dr. Frank C. Garland conducted research that showed the link between sunlight and prevention of cancer was Vitamin D. Again minimal funds were generated to pursue further research.

- However, by January 2003 with minimal monetary support, 1,021 research papers had been published and filed with Med Line, the central web library of research information. These papers not only enforced the theory of the link between Vitamin D and disease, but they also explained the mechanism by which it worked.

STILL NO VISIBLE RESPONSE FROM THE AUTHORITIES THAT WE TRUST TO ADVISE US.

- Today with several thousand research studies that strengthen the facts of the value of Sunlight and Vitamin D, including some Random Controlled Trials (RCT's) the Gold Standard of Research, there is still no Government Policy in place directed at eliminating Vitamin D deficiency. I repeat ... Health Authorities know (or ought to know) the preceding facts. Even worse ... the public does not know whom to believe!

CONTROVERSY AND CONTRADICTIONS

The world of advice on sunlight exposure or Vitamin D supplementation is full of contradictions. If two or more reputable, respected authorities substantially differ in their advice to the public, how is the average person supposed to know:

- What is scientific fact?
- What is marketing hype?
- What is myth?
- What is speculation?
- What is junk science?

The confusion and mixed messages will not disappear without an authoritative body such as a Royal Commission questioning the parties in conflict. There are many areas of dispute:

- In June 2007, the Canadian Cancer Society issued a press release recommending that all Canadians take 1000 IU of Vitamin D. This is five times the amount recommended by Health Canada. What does the Canadian Cancer Society know that makes them oppose both Health Canada and the American Cancer Society?

- In September 2007, the Canadian Pediatric Society issued a press release stating that all women that are pregnant or breast feeding must take 2000 IU per day of Vitamin D. This is ten times more than Health Canada guidelines. What scientific information does the Pediatric Society have that made them oppose both Health Canada and the American Pediatric Association?

In comparison to the above two examples, Nature has endowed us with the ability to make 20,000 IU in about 40 minutes of sunbathing (20 minutes per side) – after reaching that level, additional production of Vitamin D is neutralized so there has **never, ever been** a case of toxic effects of excessive Vitamin D from ultraviolet light.

- Why are we taught to fear the sun when, during most of the last 100,000 years of modern man's existence, we lived outdoors, worked outdoors and played outdoors – **and we thrived!**

- Why is the public perception that we must protect the young from sun exposure, when we have learned that the most vulnerable times that we are most in need of Vitamin D are:

- During pregnancy, when skeletal structure, neurological systems, body organs, muscular structure, brain development etc., need all the help they can get.
- During breast-feeding, because mothers milk is Vitamin D deficient **because the mothers are deficient!**
- During youth, when growth and development are ongoing.
- Senior Citizens, because they are the ones who suffer the most from serious chronic diseases.

Why were 6,000 schools in Canada supplied with comic books that depicted the sun as an evil entity that can kill them, and the heroes of this saga are sunscreen products? This program was sponsored by Health Canada the Canadian Dermatology Association, the Canadian Cancer Society and L'Oreal Sunscreen Products.

- ` Why do we get the impression that sunscreens will prevent cancer? No promotion or advertisement actually says that sunscreens are protective, but the information connected to sunscreens is filled with innuendo and fear marketing.
For the record, sunscreens cannot protect us against skin cancer – they can only protect us against sunburn.

WHAT ABOUT SKIN CANCER?

Skin cancers can be serious, but for the most part they are easily detectable and seldom fatal. Of the three types of skin cancer, malignant melanoma is the most serious. In its later stages it is almost always fatal. However, in its early stages it can have a 95% survival rate. But wait! There are some strange statistics connected to malignant melanoma:

- Outdoor workers have **less** risk of developing melanoma than inside workers.
- Melanoma is also more common on parts of the body that are not normally exposed to the sun.
- Prior to 1955, melanoma was so rare it was not charted as a separate disease.

Perhaps it is because of these contradictory factors that there is a dispute between Dermatology Associations (who officially blame the sun for all skin cancers) and some of the foremost Dermatologists in the World

- In an editorial titled “The Skin Cancer Cover Up:” Dr. Sam Shuster states “Every summer we’re warned that the sun can kill, in fact most sun produced lesions are benign and not really cancers at all.” Sam Shuster is Emeritus Professor of Dermatology at the University of Newcastle-upon-Tyne, and Honorary Consultant to the Department of Dermatology at Norfolk and Norwich University Hospital. Shuster is described as a clinical scientist of Investigative Dermatology and a legend in that field.

- In an editorial by Dr. Arthur R. Rhodes, in *Skin and Allergy News*, the leading independent newspaper for the dermatologists, he describes three case histories of melanoma that were **not** diagnosed early because they were in sun protected sites and not deemed to be dangerous. One was in the armpit; one on the sole of the foot and one was on the back. All three died. The sad part is ... a medical resident and two Harvard trained physicians were involved. The public health message that melanoma is caused by the sun appeared to be responsible for delayed diagnosis – a potential death sentence for malignant melanoma. Dr. Rhodes is a Professor of Dermatology at Rush Medical College, Chicago.

- In an interview, Professor A. Bernard Ackerman states, “There are so many misconceptions about the risk of skin cancer, that the entire field is just replete with nonsense”. He questions whether the link between sun exposure and melanoma exists. He further claims that there is no scientific confirmation that blistering sunburn early in life sets the stage for melanoma and that no evidence exists to support the fact that sunscreens offer protection against the disease. He points to a report in the *Journal, Archives of Dermatology*, which supports this view. Moreover, says Ackerman, the common wisdom that the “more intense a person’s sun exposure, the greater their risk of melanoma” remains unsupported, with epidemiological data on the subject proving “imprecise and inaccurate.” Professor Ackerman is Director of the Ackerman Academy of Dermatopathology in New York. He has published 625 research papers on aspects of skin care and is the single recipient in 2004 of the prestigious Master Award for outstanding contributions given by the American Academy of Dermatology. The Ackerman Academy is the world’s largest training center for dermatopathology, that examines more than 100,000 specimens and conducts over 4,000 consultations each year. **In May of 2007, Dr. Ackerman published a book titled “The Sun and the ‘Epidemic’ of Melanoma: Myth on Myth!” It is subtitled “Contrary View on Behalf of Patients”.**

Because sunlight is free and is nature's system for making Vitamin D we have to look at these confusing factors.

SUNSCREENS

- An SPF 8 (sun protection factor) sunscreen will block the production of Vitamin D in the skin by 97.5%.
- An SPF 15 will block production by 99.5%.

In other words, the common advice to apply sunscreen one half hour before going outdoors is absolutely wrong, as is the advice to wear sunscreen all year long.

The correct way would be to experience 40 minutes or more of unprotected sun exposure, (fair skin would start with 10 minutes and increase exposure gradually and then apply sunscreen to prevent sunburn caused by extended exposure).

TANS

If sunlight is the preferred method of naturally stimulating Vitamin D production, then it is highly likely that the skin will tan. Years of SunScare tactics have resulted in the erroneous statements:

- That there is no such thing as a safe tan;
- That a tan is a sign of damage;
- That there are no benefits to a tan;

However, the scientific definition of a tan is:

PHOTO-PROTECTIVE FACULTATIVE PIGMENTATION

Or - more simply

PROTECTIVE PIGMENTATION

OR - EVEN MORE SIMPLY

A PROTECTIVE SUNSCREEN

A natural tan is an evolutionary adaptation of the skin that has existed for more than 50,000 years. As mankind emigrated away from the equator to higher latitudes, skin lightened to make it easier to produce Vitamin D from a much weaker sun. This adaptation also allowed skin to darken to prevent sunburn as the sun grew stronger in summer and to lighten in spring and fall when the need for Vitamin D demanded that skin change accordingly.

It is easy to see that a natural tan pre-dated man-made sunscreens as a protective factor. More important, the process of tanning triggers genes in the skin to actively fight skin cancer! (After 50,000 years nature has not abandoned us in this vital protective factor.)

Guardian of the Genome, Dana-Farber Cancer Institute March, 2007.

It is confusing to know that Health Canada only recognizes a natural tan to provide an SPF factor of 2 to 4, and it ignores clinical trials that show that the various stages of development of a tan results in initial SPF levels of 4, building to an SPF of 10 with **gradual** increases in exposure, plus the compounding factor of hornification (the microscopic thickening of the skin that you cannot see or feel) that can produce an SPF of 40!

CONFUSING INFORMATION ABOUT EXPOSURE TO NATURAL SUNLIGHT.

The Public Perception:

- We must avoid the midday sun, it is the most harmful.
- We must only sunbathe when the UV index is below 3 or your shadow is longer than your height.
- Exposing skin early in the day or late in the day will produce all the Vitamin D we need.

The Scientific Evidence:

The CIE (International Commission of Illumination) is a worldwide scientific organization that studies the effects of light on the human body. In September 2006 their annual convention was held in Ottawa. Canada is a member and representatives were in attendance.

One of the presentations was on the action spectrum of sunlight (UVB) in the production of Vitamin D. This is what they revealed:

- Vitamin D is made most efficiently when the sun is “high in the sky”. A simple guideline is to get exposure when your shadow is shorter than your height and the UV index must be above 3.
- The reason we cannot make Vitamin D in winter – when the sun is low in the sky – is that the UVB rays that are needed to produce Vitamin D have to travel through thousands and thousands of extra miles of atmosphere to reach us. This scatters and diffuses the ultraviolet “B” portion of sunlight so that it is incapable of making Vitamin D.

- The same problem can happen in summer. In early morning or late afternoon the sun is also “low in the sky” and the same difficulty exists.

The SunScare message and the scientific evidence are a full 180 degrees opposite each other! The public perception is the result of 25 years of repeated reinforcement of that message. If it is truly wrong, and so deeply entrenched in medical advice, **how is the public expected to accept this conflict of information?**

SUN BEDS - MORE CONFUSING INFORMATION

The Public Perception:

- Sun beds are artificial and dangerous
- Sun bed emissions are far different compared to emissions from natural sunlight.

The Scientific Evidence:

- There is no such thing as artificial ultraviolet light. A photon of light, is a photon of light, is a photon of light. It is indistinguishable from ultraviolet light that is emitted by the sun.
- Sun beds are solar simulators and perform the identical biologic functions as the natural sun. This is confirmed by historic use of sun lamps for more than 100 years.
- Precise measurement of sunlight with a spectroradiometric device, at mid-day, at mid-latitude, at mid-summer (with clear atmospheric conditions), show that the ultraviolet portion of natural sunlight is approximately 95 parts UVA light and 5 parts UVB light! That is exactly the same proportions as ultraviolet light from most sun beds.

- The Federal Government regulates the manufacturers of sun beds through legislation of the R.E.D. act (the Radiation Emission Devices act).
- The RED act ensures that sun beds that have higher emissions have shorter exposure times and units that have lower emissions have longer exposure times. It is “dose”, not “rate of dose” that is important.
- That timers are limited to moderate exposure times depending on the total output, with labels that recommend graduated exposure schedules.
- That all sun beds have secondary timer devices inside the units that will turn the unit off if the primary timer fails
- That all sun beds are CSA approved.
- That appropriate warning labels about over-exposure are prominently featured on every unit.

The Federal Government also encourages all Tan Industry owners and employees to have professional training regarding their service.

Health Canada also allows salons to advertise that sun beds are a natural and efficient method of producing Vitamin D. Sun beds are able to perform this function no matter the time of day, the season, the atmospheric conditions and the latitude.

The above information poses another confounding and confusing situation:

If Federal Health Regulators have mandated all these safeguards, why, why, why do they persistently advise the public that the use of sun beds is dangerous and unacceptable?

WHAT ABOUT VITAMIN D SUPPLEMENTS?

Here again, because there is no unified consensus on **how much** to take, the public receives mixed messages.

Let's start with natural sunlight since it has been our main source of supply throughout the history of mankind. Natural sun can produce 20,000 IU of Vitamin D in about 40 minutes of sun exposure (20 minutes on each side) when the sun is "High in the Sky".

Is that how much we need everyday?

No, since Vitamin D is a fat-soluble vitamin any excess of our daily need can be stored in the body for times when we cannot make Vitamin D. We only use a portion of the 20,000 IU.

Scientists have variously estimated our daily needs at between 3,500 IU and 6,000 IU. Since part of that can be derived from diet (Vitamin D supplement added to various foods such as milk. Vitamin D is rarely found naturally in our food supply) and most of us get **some** sunlight in summer, then Vitamin D supplements of 1,000 IU to 2,000 IU is a very moderate amount. There is much scientific discussion that the safe upper limit be set at 10,000 IU per day, which is still not a worrisome level.

SUMMARY OF VITAMIN D SOURCES:

- The National Institute of Health (U.S.A) lists sunlight as the most important source of Vitamin D.
- Sun beds are solar simulators and it has been scientifically stated that the biologic effects of such exposure would mimic natural sun. Thus, sun beds should be listed as the second most valuable source of Vitamin D.
- For those that prefer not to (or for health reasons cannot) use natural sun or sun beds, then Vitamin D supplements are absolutely necessary for optimal health, and should be recommended as a very inexpensive solution. The Creighton University Study of last summer, (a gold standard research paper) used 1100 IU of supplementary Vitamin D daily to prove that we can reduce the risk of all cancers by 77% in women over 50 years of age.
- Dietary Vitamin D, at its present levels, cannot possibly be sufficient for our daily needs.

THE CRIME

Here, I have documented situations where statements made by Dermatology Associations, Health Authorities, Health Associations and other Medical Associations were: False, misleading, deceptive and scientifically unsubstantiated. Worse, examples of these respected authorities using bad science or twisted bad science to make their case are also documented. A “smoking gun” illustration at each of these items would be appropriate.

This is a huge medical scandal. It could appropriately be called the super fraud of the 20th century that continues today. Health Canada, the Canadian Cancer Society, Public Health Officials, Government at all levels Local, regional, national and international have followed the anti-sun program as blindly as the trusted ministers of the fairy tale “The Emperor’s New Clothes”.

THE PROCESS OF MISINFORMATION

How well do you remember the **DETAILS** of the fairy tale by Hans Christian Anderson called “The Emperor’s New Clothes”, a story of an obsession with fine clothes to the exclusion of all else in his kingdom? Of course, two rogues took advantage of this by pretending to weave a magical cloth to make robes that would be the finest in the land, but there was nothing there!

These rogues did not hide their actions. They openly displayed their empty looms; they brazenly described their unseen creation, the wonderful texture, the fine pattern and the beautiful colors. They emphasized that the cloth possessed the marvelous quality that it became invisible to anyone who was unfit for the office he held, or was incorrigibly stupid.

The emperor, doubting his own competence, sent his most honest minister to survey the progress. The minister denied his own eyes and claimed the cloth to be real. The misinformation then flowed down a succession of levels of trusted ministers of the Emperor with no one challenging the invisible goods.

As each respected member of the court accepted the information, it became harder for the next respected member to question the validity of the existence of the fabric.

Now let's look at real life. Since 1986 the American Academy of Dermatology (AAD) has been using a statement that "80% of lifetime sun (UVR) exposure happens by the age of 18 years".

When a "respected Authority" passes misinformation to another "Respected Authority" there is a natural presumption of credibility and the misinformation is passed along to others. The fact is advertised, promoted and expanded upon, all of which enforces the original misinformation. It becomes accepted as fact. (Vladimir Lenin once stated that if you tell a lie often enough, it will be accepted as fact.)

The "80% by 18 years" statement was used by Government Health Regulators, by Cancer Societies, by Professors in Medical Schools and by Doctors to their Patients. It was cited by authors of medical articles, used on posters for sun awareness and used to advertise sunscreen products.

NOBODY QUESTIONED THE STATEMENT!

Nobody asked:

"How is this mathematically possible?" Or

"How can the exposure rate in the first quarter of life be so dramatically different from the last three quarters?"

To the best of my knowledge, most people 18 years old have spent at least twelve years in school for ten months of each year during daylight hours. Allowing for indoor activities, inclement weather and non-summer seasons, there is not a big window of opportunity for sun exposure.

Then I read Donald L. Smith's exposé of that statement. Don Smith is the Executive Director of the UVIR Research Institute in Arizona, and with dogged persistence he tracked down the original article that spawned the "80% by 18" claim. Smith explained that the genesis for the statement was an article by Stern, et al, titled:

**"RISK REDUCTION FOR NON-MELANOMA
SKIN CANCER WITH CHILDHOOD SUNSCREEN USE".**

**Published in the May 1986 issue of the Archives of Dermatology.
The article stated that:**

"Using a mathematical model based on epidemiological data, we quantified the potential benefits of using a sunscreen with a sun protection factor of 15 and estimate that regular use of such a sunscreen during the first 18 years of life would reduce the lifetime incidence of these tumors by 78%.

In other words, it was a hypothesis of a hypothesis.

Smith continued "It was never stated in this article that 80% of lifetime sunlight exposure comes in the first 18 years of life" what Stern, et al, really said was that if you used a sunscreen with an SPF of 15 during the first 18 years of life, you **might** reduce your lifetime risk of developing a non-melanoma (basal cell carcinoma and squamous cell carcinoma) by 78% (almost 80%). This is far different from saying that 80% of lifetime exposure to UVR comes in the first 18 years of life!

Smith was not the only one looking for answers. From 1999 to 2002, Steve Gilroy, a Vitamin D advocate that was heavily involved with sun tan businesses and associations also wanted to know the source of “80% by 18 years”. He corresponded regularly with Health Canada seeking the facts.

The answer came from a paper presented at the American Society of Photobiology Meeting in Quebec City in July 2002 it concluded that the “80% by age 18” statement was indeed a myth, and that analysis of actual exposure data shows that people get less than 25% of lifetime sun exposure by age 18 years. The paper by Godar, Urbach, Gasparro and Van de Leun, titled “Childhood UV Doses Reality vs. Myth” was presented by Diane Godar, Ph.D. of the U.S. Food and Drug Administration (F.D.A.)

How did the original research paper summary get twisted to the mythical version? Was it a marketing idea? I presume from the title that a sunscreen manufacturer funded it with the cooperation of the dermatology associations. It certainly was a brilliant advertising tool Simply frighten parents by linking skin cancer prevention to childhood use of sunscreen and you sell enormous amounts of sunscreen! Further, you lock in a habit that could continue for a lifetime – what a marketing bonanza!

The sad part of this statement is that it is thoroughly entrenched in the information pipeline even though the statement was discredited over six years ago; it still pops up in articles, medical advice and media stories on a regular basis. Just remember, if you read a story-advising people under 18 years to avoid the sun **or** it contains the “80% by 18 years” statement it means the author is out of date! Whatever else is said becomes questionable.

TO SUMMARIZE THE ABOVE CAMPAIGN:

In 1986 the America Academy of Dermatology (AAD) created a fear campaign by twisting a research paper relating to the use of sunscreen products. It is important to realize that whatever policies are started by the AAD, the CDA (Canadian Dermatology Association) immediately follows. Health Canada and the Canadian Cancer Society agree like friendly puppies and the media do what they are supposed to do – report the findings and conclusions of “Respected Authorities”. The media assume that the information given to them is credible and truthful.

This campaign ended very quietly.

First The CCRPB (Consumer and Corporate Radiation Protection Bureau) a branch of Health Canada, sent **ONE** e-mail to Steve Gilroy in response to his persistent search for the source of the offending statement – they admitted that the information was a myth and would be not be used anymore. A copy of the retraction statement is attached at the end of this report.

The Canadian Cancer Society, after checking with Health Canada, confirmed **to me** that they too would also stop using the misinformation and would notify all ten Cancer Society’s main offices across Canada to also desist. A copy of that letter is also attached at the end of this report.

BUT NOBODY TOLD THE PUBLIC!

In other words, after 17 years (1986 to 2003) of combined efforts of all of the SunScare participants, the advice to avoid the sun in the first 18 years of life is so heavily embedded in the human psyche and the information pipeline that it will never disappear without a massive effort.

Here is what **DID NOT** happen when this campaign was declared a myth:

- No admission of guilt from the Dermatology Associations or Sunscreen Manufacturers.
- No press release or announcements were made to the public apologizing for the false statements.
- No programs were instituted to help the public understand the benefits of sunlight.
- Nobody stopped their other campaigns of sun avoidance.
- Not one dollar was spent to compensate the public for the harm they had experienced.

Here's another real life example:

The objective to increase sunscreen sales to children became even more outrageous with a Canadian School Program called "Healthy Living with Sunshine". This program was a joint effort of Health Canada, the Canadian Dermatology Association (CDA), the Canadian Cancer Society and L'Oreal (the giant cosmetics and sunscreen manufacturer).

The program consisted of a comic book and a package of guidelines for teachers. It was distributed to 6,000 schools in Canada. In this program, sunlight is described as an "Evil Force" and a "Potential Killer" – the hero in this comic book is a sunscreen product!

The instruction to teachers included an experiment that showed the effect of sunlight on a newspaper. Placing the newspaper on the floor in front of a sunny window, covering part of it and then seeing the difference between the sun-exposed portions compared to the protected portion after some time had passed. What blatant brainwashing!! What a disgusting example of exploitation of a youth market for sunscreens. A market that could ensure continued use of products for a lifetime!

Where was the balancing information? Why didn't they place a plant on that newspaper so that children could watch it grow, thrive and be healthy?

Why were they not told:

- Sunlight is one of the four essential elements of life;
- there would be no life on this planet without ultraviolet light; no plants, no animals, no insects, no birds and no human beings;
- there are actually over 100 biologically beneficial effects on the body by exposure to sunlight.
- Why were they not told that sunscreens were created to prevent sunburn caused by over-exposure and that moderate exposure was vital to "healthy living"?

This was not a science-based program; it was a market based, one-sided portrayal that ignored valuable information. Moreover, the omission of beneficial information is CRIMINAL! The public has a moral, ethical and legal right to know the whole truth.

Intelligent, well-educated people on several levels of “Respected Authorities” must have approved this plan. Nobody questioned the omissions; no one voiced the common sense observation that humans had evolved under the sun for millions of years, or asked why moderate exposure was not acceptable.

Nobody Rocked the Boat!!

Here is a more blatant example of scamming the public:

On February 06, 2002 a Press Release instigated by the American Academy of Dermatology (AAD) shot the process of misinformation into the stratosphere. Headlines all across the North American continent simultaneously shouted the news that tanning beds cause skin cancer. Every segment of the media got into the act. It was a news reporter’s ideal story of a popular pastime that could turn deadly. It was shocking and frightening. One all-news station in Toronto blared the news every ten minutes for a whole day “Tanning Beds Cause Cancer” “Tanning Beds Cause Cancer” “Tanning Beds Cause Cancer”. It was hammered into the public mind like a nail into wood. It was a well-coordinated media event designed to scare the public out of indoor tan salons. There was only one thing wrong with the story:

IT WASN’T TRUE!!

The Press Release was based on a research paper published in the Journal of the National Cancer Institute (JNCI), by a team of researchers led by Dr. Margaret Karagas of Dartmouth University Medical School. It was such a flawed, invalid paper that it should have been an embarrassment to all who were connected to it. Here are some of the things that were wrong:

First of all, it was not a peer-reviewed research paper, (it was headlined “A Brief Observation”). If it had been peer reviewed, the omissions, the errors, the lack of hard evidence and other shortcomings would have shown the information to be inconsequential. To Dr. Karragas’ credit, she did state in the paper that the results “Did Not Achieve Statistical Significance in our Data”. The big question is why would a prestigious, respected publication such as JNCI publish such a paper? What influences were brought to bear on them and what association did they have with the issuing of a press release that turned the phrase “Did not achieve statistical significance” into “Sun beds cause cancer”?

Next All of the participants in the study were residents of the New Hampshire area and 95% were sun sensitive!! On a questionnaire completed by these participants, the majority of them stated that on their first summer exposure of one hour, they burned, blistered and peeled. This indicates that most were Skin Type 1 or Skin Type 2 people. Genetically, this fair skinned group are predisposed to have non-melanoma skin cancer rates that are higher than the general population by a ratio of 1 ½ to 2 ½ times, **whether they sun tanned or not!** In other words, the study did not apply to the general population. Next, the authors asked the participants about co-confounding factors such as smoking habits or radiation exposure such as x-rays or mammograms. Smoking doubles the risk of skin cancer, and radiation therapy can increase risk also. However, the answers were not referred to or commented on, possibly because the information might have negated their conclusions.

Next, the authors failed to mention the important fact that 63% of the participants had used a tanning device prior to 1975. Since commercial tan salons did not exist in North America before 1979 and were not commonly available until the mid 1980’s, the study does not apply to tanning salons, as they exist today. Also, the technology of tanning devices prior to 1979 was dramatically different from modern equipment.

In conclusion, Dr. Karagas' paper was "used" by the SunScare lobby to unreasonably frighten the general public. The media was "used" as the vehicle to deliver this message of fear. The media has to share part of the blame for this misinformation. All they had to do is read the original paper and they would have noted the "did not achieve statistical significance" phrase. Instead, they relied on "Respected Authorities" to be truthful and scientifically accurate.

AND THEY WERE NOT!

Here again, I caution you to remember, if you read a story advising you to avoid the sun, or they quote the Margaret Karagas article of 2002, or if they state that sun beds cause melanoma it means the author is out of date and is using information that has been discredited. Whatever else is said becomes questionable.

Incidents like this, and other reports that advise you to avoid the sun (and there were many,) were being challenged by the Indoor Tan Industry with more and more conviction and aggressiveness. The Indoor Sun Tan Trade Magazines and industry leaders became more diligent about examining the credibility of the SunScare lobby's attempts to mislead the public. As the conflict continued, more and more salons, employees and clients were given information and facts that refuted the negative news.

But the negative news continued – the public was only presented with part of the information regarding exposure to ultraviolet light. Over the past several years, many industry leaders and I have regularly written letters of complaint to many "Respected Authorities" asking them to correct misinformation, errors and omissions. We asked for balanced information that would more accurately educate the public about the risks and benefits of exposure to ultraviolet light. However, the misinformation continued.

Here is what happened on June 02, 2003. The Canadian Dermatology Association and L'Oreal Canada paid for an eight page supplement in the National Post, a major Canadian newspaper. They had the support of the Canadian Cancer Society and Health Canada. The supplement was titled "Sun Care" and was subtitled "A Joint Venture Supplement with the Canadian Dermatology Association". It was further subtitled "A Safe Day in the Sunshine".

It appeared to be a cooperative effort of the newspaper, the Canadian Dermatology Association, Health Canada, the Canadian Cancer Society and L'Oreal, as part of their annual attack on sun tan salons and unprotected exposure to sunlight.

In reality, it was a massive advertising piece to sell sunscreen! Almost half the total space was devoted to sunscreen products that were manufactured by L'Oreal. Additionally, it was a promotion vehicle for the dermatologists. **I was so angry. I was ready to burst a blood vessel.** It was not the attempt to sell sunscreen, I was furious because the information contained many, many statements that were false, deceptive, misleading and scientifically unsubstantiated.

I immediately composed a letter to the parties involved: Here is what I wrote:

June 02, 2003

Canadian Dermatology Association
774 Echo Drive, Suite 521
Ottawa, Ontario.
K1S 5N8

Attention: Dr. Kirk Barber, President

Re: Joint Venture Supplement “Sun Care” National Post – 2003

Dear Sir:

YOU SHOULD BE ASHAMED OF YOURSELF

The Canadian Dermatology Association and its members are respected professionals that offer valuable services. The associated sunscreen manufacturers that are involved in this joint venture supplement are also highly respected suppliers of quality goods that are of value to the Canadian public. Further, you are a “respected authority” whose statements are accepted automatically as being the very best information possible. The public trusts you and expects that such information could never be disputed

WHY WHY WHY

Would you jeopardize that trust, risk losing that respect by making statements in this supplement that are false, deceptive, misleading and scientifically unsubstantiated?

Item #1

- ▶ **Absolutely False “80% of lifetime sun (UVR) exposure happens by the age of 18 years.**

Since 1986, the AAD, CDA and various cancer organizations, media and government authorities such as Health Canada have repeatedly used this statement to warn the public of the danger to the young of sun exposure.

Nobody in the past 17 years has questioned how this was mathematically possible!

Please Read my letter to Health Canada dated August 12, 2002 along with Don Smith’s exposé of that statement. These letters together with requests from the

Joint Tanning Associations in Canada resulted in an announcement from Health Canada admitting that the statement was wrong and was to be removed from all government documents.

(Copy of retraction statement enclosed)

Item #2

► **Absolutely False “A Tan is a sign of damage”.**

Genetic scientists tell us that we are more alike than different and that skin color is an adaptation that our bodies use to allow us to benefit from the sun most efficiently in diverse parts of the world to make Vitamin D₃. These genetic detectives have scientifically traced DNA of people from all parts of the world to a small group of tribes that existed in central Africa about 100,000 years ago. As these early civilizations migrated to less sunny parts of the world, their skin lightened. It also adapted to darken (tan) or lighten in response to available levels of sun (summer and winter).

See article “Genome Points to Single Human Race”)

In other words, the only difference between a black man and me is a few color cells and some melanin. Can we say that a black man, an Asian or an Indian is damaged because they are darker?

Joe Levy’s article “Damage Control” very clearly reports on the Indoor Sun Tan Industry Point of View. I have highlighted the section on muscle “damage” that occurs when we exercise. Do we have the right to advise people not to exercise because of this technical fact? Would it benefit the general health and well being of the public to publicize this information?

(Also enclosed Don Smith’s exposé “Lie #3 A Tan is a Sign of Damage”.)

How about Dr. Zane Kime’s research that explains how UV light creates Vitamin D₃. Cholesterol in the skin is destroyed to make the pre-vitamin that becomes Vitamin D₃. Do we call this damage? An interesting side bar to this information is the fact that creating Vitamin D₃ naturally with UV light will reduce cholesterol in the blood..

Do we call it damage when billions of body cells die each day in the process of living and growing?

Do we call it damage when we vaccinate a person by injecting a disease into them?

I could probably add dozens of more examples but I would like to get to the point of my letter, which is this:

A suntan is a totally natural development. Our skin is only doing what it has been programmed to do over millions of years – to adapt and survive,

and it does a marvelous job. The natural ability and resources our bodies have to help us live healthy and productive lives continually amaze me.

Item #3

- ▶ **Absolutely Misleading “Tanning devices have 2 to 5 times more UVA than natural sunlight”.**

(See enclosed comparison of sun beds and sunshine)

The important point here is that the proportion of UVA output and UVB output (the balance of the light mixture) is very similar – approximately 5 parts UVB light with approximately 95 parts UVA light mixed with visible light. The dose of a full session on a tanning bed is 4 MEDs (minimal erythemal dose), and fair skinned people would only get a partial session as they build their tolerance to UV light A tan.

A day at the beach would give the body about 32 MEDs of exposure.

Item #4

- ▶ **Absolutely Deceptive “Sun Exposure actually suppresses the immune system in the skin and reduces the body’s ability to defend itself”.**

I guess a partial truth is not really a lie, but it is deceptive. Here is the complete story: UVB (280 nm – 320 nm) and UVA 2 (320 nm – 340 nm) are immunosuppressive, UVA 1 (340 nm – 400 nm) is immunostimulatory. The effect of a balanced mixture of light such as in natural sunlight or in a tanning device is a result that is slightly positive Immunostimulatory. **If it was otherwise, we would all be dead!**

Here is the good news. A natural suntan will screen part of the UVB light that hits the skin, making the overall result even less immunosuppressive.

Here is the bad news. Sunscreens that block UVA will decrease the processes that are immunostimulatory.

Item #5

Absolutely Scientifically Unsubstantiated “The oldest and youngest in the population may need to pay special attention to protection”.

In fact, it is the oldest and the youngest that are most in need of Vitamin D₃. Mother nature must have planned that we receive this essential nutrient from the sun since she does not commonly provide it in food. The young need it to absorb calcium, magnesium and phosphor, to build strong bones, healthy bodies, improve

muscle strength and increase resistance to disease. The old need it to prevent osteoporosis, resist cancer and improve overall health.

Item #6

▶ **The Glaring Error of Omission**

There is not a hint of positive effects of ultraviolet light in the eight (8) pages of this supplement. A balanced educational process would include statements like:

- ▶ All living things need sunlight
- ▶ Sunlight is one of the four essential elements of life
- ▶ 90% of our Vitamin D₃ requirements come from sunlight
- ▶ Sunlight prevents cancer

This brings me to an area that disturbs me greatly. I have double circled an item on page JV 6 “The CDA teamed up with the Canadian Cancer Society and Health Canada to create the Healthy Living with Sunshine project for elementary schools.” Am I to understand that this team is responsible for the attached item from 1999 – Comic books in schools with guidelines for teachers?

(See attached news item from National Post)

This is the most disgusting example of exploitation of a youth market I have ever seen. Sunlight is one of the four essential elements of life (there would be no life on earth without ultraviolet light).

In this article, Sunlight is described as:

“Evil Forces” and “A Potential Killer”

The Hero in this Comic Book is Sunscreen Products!

The instructions to teachers include an experiment that shows the effects of sunlight on a newspaper How about placing a plant on top of that newspaper to show how it grows, thrives and is healthy?

In light of the worldwide growing epidemic of Vitamin D₃ deficiency

(See attached file Vitamin D₃ Deficiency)

the past 20 years of sun bashing must now be replaced with responsible, balanced messages that warn people of the dangers of under-exposure along with the risks of over-exposure.

Here is how it can be done:

The need for sunscreens is real and should continue for reduction of the risks of over-exposure. These cautions should be accompanied by instruction and education that points out the value of exposing skin to the sun for short periods of time without sunscreen to facilitate the creation of Vitamin D₃ and to strengthen the immune system **Then start applying the sunscreen.**

This kind of honesty and openness will breed respect and trust.

Deception will breed contempt!

The Indoor Tan Industry is currently the only body that warns of the risks of both over-exposure and under-exposure. We will be pleased to cooperate with any groups that would like access to our knowledge and experience.

Item #7

► **Absolutely Biased – The emphasis on skin cancer.**

There is no doubt that sunlight may be a contributing factor to the development of skin cancer in cases of chronic, severe over-exposure. However, let us look at the credibility of this opposing statement – “Sunlight Prevents Cancer”.

The thread of credibility starts in 1941 when Dr. Frank Apperley published a research paper that stated:

The closer you get to the equator:

.... the less breast cancer

.... the less colon cancer

.... the less pancreatic, ovarian and prostate cancer

.... and the fewer deaths from all cancers.

I first learned of these facts in 1991 when I attended an Indoor Tan Industry Convention in Chicago and listened to a lecture by Dr. Frank Garland. He and his

brother Dr. Cedric Garland – both epidemiologists, had just completed ten (10) years of research that included 25,000 human blood samples and the medical records of the entire U.S. Navy!

Dr. Garland stood on the stage and addressed an audience of 4,000 suntan salon owners and said: “I have news for you. Breast cancer, colon cancer, pancreatic cancer, etc., are all linked to **lack of sunlight.**” He then spent the next two (2) hours explaining that the “link” was Vitamin D₃ made in our bodies by ultraviolet light.

What an astounding revelation! Is it credible? The thread continues with more than 1,021 scientific papers by January 2003 indexed in the U.S. National Library of Medicine (Medline) Database on the roll of Vitamin D₃ in cancer control and prevention, including analyses of the mechanism.

(See attached file “Sunlight Prevents Cancer”)

One final statement Sun tan beds were created as photo-therapy units for health and wellness and the prevention of disease. Suntan units are classified by the F.D.A. as a Class One Medical Device. Doctors have used ultraviolet light since 1927 to treat skin conditions such as psoriasis, acne and eczema. In fact during the 1930’s before antibiotics the only cure for skin tuberculosis was sunlight and sunlamps. Hospitals routinely treat premature babies with ultraviolet (in incubators) for the treatment of jaundice and now it may be a great weapon in preventing cancer and bone disease.

The Canadian public needs to know how you will address these problems.

I look forward to your reply.

Yours truly,

Maurice (Mo) Shpur

Attachments

Copies to:

Jochen Zaumseil	President	L’Oreal Canada
Raymond L.Cornelison Jr.	President	American Academy of Dermatology
Julie White	Chief Executive Officer	Canadian Cancer Society
Robert Bradley	Director	CCRPB Health Canada
Ann McLellan	Minister of Health	Federal Government of Canada
Tony Clement	Minister of Health	Provincial Government of Ontario
Colin D’Cunha	Dir. Minister of Health	Provincial Government of Ontario
Izzie Asper	Executive Chairman	CanWest Global Communications
Stephen Harper	Leader	Alliance Party of Canada
Rob Merrifield	Health Critic	Alliance Party of Canada
Lillian Morgenthau	President	Cdn. Assoc. for the Fifty-Plus
Joyce Gordon	President & CEO	Osteoporosis Society for Canada
Murray Lewis	Editor in Chief	Reader’s Digest of Canada
Roy Romanow		

and many other health regulators, politicians and health organizations.

Additionally personal cover letters were added to many of these such as Mr. Joachen Zaumseil, President of L'Oreal Canada as follows:

June 24, 2003

L'OREAL CANADA
2115 Crescent Street
Montreal, Quebec.
H3G 2C1

Attention: Mr. Joachen Zaumseil, President

Re: Joint Venture Supplement "Sun Care" – National Post June 2003

Dear Mr. Zaumseil:

The attached letter (with attachments) to the Canadian Dermatology Association spotlights an extremely serious health situation for Canadians. It also highlights a conflicting role for manufacturers of sunscreen products. On the one hand the need for sunscreens is real and valuable and must certainly continue to be a part of outdoor living. On the other hand, there are two serious problems associated with the incorrect use of sunscreens.

1. UVB sunscreens block the natural production of Vitamin D in the body.
2. UVA sunscreens interfere with the process of stimulation of the immune system.

Vitamin D production and immunomodulation are the effect of millions of years of evolution and cannot be ignored. Fortunately, there is an answer that will give Canadians the best of both worlds. Protection from over-exposure and protection from under-exposure. It is not a simple task but it must be done. We must educate the public to the values of short periods of time without sunscreen and then to apply their SPF products.

I hope you will accept these letters in the spirit that they are written – to protect and maintain the health of Canadians.

May I please have your comments?

Yours truly,

Maurice (Mo) Shpur

After a period of time, I mailed follow-up letters again requesting a response. I received a total of two responses from this effort. One from the Canadian Cancer Society – as follows:

September 18, 2003

Mr. Maurice Shpur
Uvalux International Inc.
120 West Beaver Creek Road, Unit #16
Richmond Hill, Ontario
L4B 1L2

Dear Mr. Shpur,

Thank-you for providing us with a copy of the letter sent to the Canadian Dermatology Association on June 24, 2003.

The Canadian Cancer Society provides Canadians with accurate information about topics that have relevance to cancer including how to minimize the risk of developing cancer. We are committed to ensuring that the information we provide is solidly grounded in scientific evidence and where scientific evidence is insufficient or inconclusive our advice follows the precautionary principle and recommends prudence.

There is a great deal of published, peer-reviewed research on all aspects of cancer control and UV exposure is no exception. As we all know, very few scientific studies report identical results. There are well-recognized ways to address these differences and these are captured under the umbrella of “evidence-based decision-making”. Through this approach all of the available studies are considered, their results are weighted through a process that evaluates their methods for rigor and conclusions are drawn that are based on the total body of relevant science. We are satisfied that the Canadian Dermatology Association positions that you quote are based on this type of evidence-based process. They are also congruent with the findings of other agencies around the world that have cancer as a focus and that are skilled in applying the type of evidence review that I have described. We have no reason to doubt their validity.

We have confirmed the retraction of the statement that “80% of lifetime sun (UVR) exposure happens by the age of 18 years” and will be updating our material accordingly. A copy of the letter confirming this statement will also be sent to the Society’s 10 Divisions.

Thank you for sharing your concerns with us.

Sincerely,

(signed) Barbara Whyllie
Director, Cancer Control Policy.

cc: Julie White, Chief Executive Officer
Michele Albagli, Executive Director Canadian Dermatology Association.

I then responded as follows:

Wednesday October 29, 2003

CANADIAN CANCER SOCIETY
10 Alcorn Avenue, Suite 200
Toronto, Ontario.
M4V 3B1

Attention: Ms. Barbara Whylic
Director, Cancer Control Policy

Re: Truth of Information

Dear Ms. Whylic:

Thank you for your letter of September 28, 2003 and your action regarding the statement that “80% of lifetime sun (UVR) Exposure happens by the age of 18 years.”

You also state that you have no reason to doubt the validity of information that is given to you by the Canadian Dermatology Association.

When a “Respected Authority” breaches their trust with the public by misinforming them two things happen:

- 1st Other “Respected Authorities” repeat the information without checking the validity and the media repeat the same information without question.
- 2nd The public, bombarded with massive amounts of negative news, have difficulty accepting the credibility of opposing information.

A perfect example is the research paper released on October 15/03 titled “A Prospective Study of Pigmentation, Sun Exposure and the risk of Malignant Melanoma in women”.

Copy included in attached file

The media across the continent claimed “Tanning Salons cause an increase in Melanoma” a vastly different conclusion than that appearing in the research paper itself.

In the professional response to this situation please note the quote from Dr. Howard Cyr, Senior Research Bio-Physicist at FDA/OST. He reiterates his insistence that there is no definitive link between sunlight or tanning beds and malignant melanoma. He also

explained why melanoma appears on areas of the body that are never exposed to sunlight (including arm pits and the soles of the feet). No wonder the public is confused!

There is further rebuttal to the “Melanoma/Sun Bed” statement in the package of information that was sent to you regarding the Canadian Dermatology Association supplement. There is a section labeled “What About Melanoma’ with a revealing paper by Dr. Arthur R. Rhodes, a Professor of Dermatology at Rush Medical College in Chicago. Also a summary of research shows **no** link between sun beds and melanoma.

Also included in that package is a comparison of UV Light emission from sun beds and the sun. Please note that manufacturers of sun tan units are mandated by laws governing manufacture of such units to ensure that a maximum of four MEDs (minimum erythema dose) of exposure is allowed by the timers. New, un-tanned customers would get even less exposure as they develop their tans and increase their resistance to sun burn. As a comparison: A day at the beach would give a person about 32 MEDs. of exposure.

Special Note: Outdoor workers (who receive 32 MEDs of exposure every sunny day) have fewer skin cancers than indoor workers.

Here is the important news, and the reason we need your help.

“SUNLIGHT IS THE KEY TO PREVENTING CHRONIC DISEASE”

**See news release attached re
“National Institutes of Health symposium on Public Health”**

Scientists tell us that more than 150 **times** more people die each year from the effects of under-exposure to sunlight, as opposed to each one that might die from chronic severe, over-exposure.

Health Canada is aware of these facts, (or should be) and refuses to change their position of only giving information on the negative aspect of sun exposure. Health Canada even supports programs for teaching school children that the sun is an evil entity that could kill them and that they have to use sunscreens! (It almost appears like they are a marketing arm of the cosmetics and sunscreen industries).

How about teaching children that all living things need sunshine and that all life on this planet depends on the four essential elements of life: We need Air, Water, Food and Sunlight. Without sunlight (especially the ultraviolet portion of sunlight), there would be no plants, no insects, no animals and no humans – no life on earth.

Further, research reports are coming in from all over the world about young people with low bone **density levels** – and increased incidents of broken limbs, forecasting even larger problems for aging populations and the effects of Vitamin D₃ deficiency. Some predictions include: “There will not be sufficient hospital space in the world to handle these problems unless the trend is reversed.”

The fact that Health Canada refuses to address the risks of under-exposure to UV Light is a growing scandal.

An honest information process would include:

- The risks of over-exposure
- The benefits of UV Light
- The risks of under-exposure

Since so many internal cancers are influenced by exposure to sunlight and the ability of Vitamin D₃ to regulate cell growth, there has to be a change in information about UV exposure. I hope that the Bethesda Symposium will prompt **all** “Respected Authorities” to embrace a policy of recommending moderate, regular exposure as a health lifestyle.

The Canadian public’s health and quality of life depends on “Truth of Information”.

May I have your comment?

Yours truly,

Maurice (Mo) Shpur

cc: Julie white, Chief Executive Officer
Michele Albagli, Executive Director Canadian Dermatology Association.

The other response was a telephone call from the legal council of L'Oreal, Mr. Martin Dupras, requesting a copy of the original letter. (I wonder what happened to the original letter), I responded with this:

Tuesday November 04, 2003

L'OREAL CANADA
2115 Crescent Street
Montreal, Quebec
H3G 2C1

Attention: Mr. Martin Dupras
General council

Re: Truth of Information

Dear Mr. Dupras:

As per your telephone call of September 16, 2003, I mailed you a package of information that included:

- Copy of a letter to the Canadian Dermatology Association
- Copy of a letter to Mr. Joachen Zaumseil, President of L'Oreal Canada
- File of information supporting my statement that the Canadian Dermatology Association made statements that were false, deceptive, misleading and scientifically unsubstantiated.

When a "Respected Authority" breaches their trust with the public by misinforming them, two things happen:

- 1st Other "Respected Authorities" repeat the information without checking the validity and the media repeat the same information without question.
- 2nd The public, bombarded with massive amounts of negative news, have difficulty accepting the credibility of opposing information.

A perfect example is the research paper released on October 15, 2003 titled "A Prospective Study of Pigmentation, Sun Exposure and the risk of Malignant Melanoma in women".

Copy included in attached file

The media across the continent claimed “Tanning Salons cause an increase in Melanoma” a vastly different conclusion than that appearing in the research paper itself.

In the professional response to this situation please note the quote from Dr. Howard Cyr, Senior Research Bio-Physicist at FDA/OST. He reiterates his insistence that there is no definitive link between sunlight or tanning beds and malignant melanoma. He also explained **why** melanoma appears on areas of the body that are never exposed to sunlight (including arm pits and the soles of the feet). No wonder the public is confused!

Also included in the package I sent you are:

- A section labeled “What About Melanoma” with an eye-opening paper by Dr. Arthur R. Rhodes, a Professor of Dermatology at Rush Medical College in Chicago.
- A summary of research showing **no** link between sun beds and melanoma.
- A comparison of UV light emission from sun beds and the sun. Please note that manufacturers of sun tan units are mandated by laws governing manufacture of such units to ensure that a maximum of four MEDs (minimum erythemal dose) of exposure is allowed by the timers. New, un-tanned customers would get even less exposure as they develop their tans and increase their resistance to sun burn. As a comparison: A day at the beach would give a person about 32 MEDs of exposure.

Special Note:

Outdoor workers (who receive 32 MEDs of exposure every sunny day) have fewer skin cancers than indoor workers.

Here is the important news:

“SUNLIGHT IS THE KEY TO PREVENTING CHRONIC DISEASE”

**See news release attached re
“National Institutes of Health symposium on Public Health**

Scientists tell us that more than 150 times more people die each year from the effects of under-exposure to sunlight, as opposed to each one that might die from chronic severe, over-exposure.

Health Canadian is aware of these facts, (or should be) and refuses to change their position of only giving information on the negative aspect of sun exposure. Health Canada even supports programs for teaching school children that the sun is an evil entity that could kill them and they have to use sunscreens! (It almost appears like they are a marketing arm of the cosmetics and sunscreen industries).

How about teaching children that all living things need sunshine and that all life on this planet depends on the four essential elements of life: We need Air, Water, Food and Sunlight. Without sunlight (especially the ultraviolet portion of sunlight), there would be no plants, no insects, no animals, and no humans – no life on earth.

Further, research reports are coming in from all over the world about young people with low bone density levels – and increased incidents of broken limbs, forecasting even larger problems for aging populations and the effects of Vitamin D deficiency. Some predictions include “There will not be sufficient hospital space in the world to handle these problems unless the trend is reversed.”

The fact that Health Canada refuses to address the risks of under-exposure to UV Light is a growing scandal.

An honest information process would include:

- The risks of over-exposure
- The benefits of UV Light
- The risks of under-exposure

My observation is that L’Oreal is caught between the “Respected Authorities” (the Canadian Dermatology Association, Health Canada) and the opposing scientific information that has been developing over the past 15 years (actually since Dr. Frank Apperley’s 1941 research publication).

The Canadian Public’s health and quality of life depends on change in policies. I hope you will factor this additional information into your response to my letter to L’Oreal Canada.

Yours truly,

Maurice (Mo) Shpur.

Nothing more was heard from L’Oreal. Apparently, after 25 years of telling people to avoid sunlight, nobody was willing to admit that the advice was wrong.

No one in authority at any of these respected organizations was willing to concede that the growing mountain of medical research, showing the benefits from sunlight had any credibility.

THE EFFORTS TO HIDE THE TRUTH CONTINUED.

At this point (2003) all efforts to initiate a dialogue with **any** participants in the SunScare lobby had failed. They continued their advice to avoid the sun.

THE CAMPAIGN TO BAN TAN SALONS

For as long as I can remember, there have been calls to ban tanning salons, to close them down completely, to eliminate them and only allow doctors to offer ultraviolet light treatment of medical conditions (**or you could go outside and get sunlight for free**).

The idea was formalized in early 1995 when the American Academy of Dermatology (AAD) met with F.D.A. officials to ask that tanning salons be outlawed and closed down. The American Medical Association (AMA) supported the AAD in this action. The AMA had passed a resolution in December 1994 calling for stiffer regulations for this “unnecessary” business. Each year the SunScare lobby continues to urge “Respected Authorities” to join them in the call to close sun tan salons.

Let me remind you that whatever campaigns are started by the AAD, (The American Academy of Dermatology) the CDA, (The Canadian Dermatology Association) immediately follows. Health Canada, along with the Canadian Cancer Society agree like friendly puppies and the media join in without question.

Again in June 2003, Dr. Spencer of the AAD met with members of the Food and Drug Administration’s office of Science and Technology (FDA/OST), the department responsible for governing regulatory policies relating to radiation-emitting devices, including tanning equipment and individual sun lamps. When a complete ban on sun lamps was demanded by Dr. Spencer and his colleagues, Senior Research Biophysicist at FDA/OST, Dr. Howard Cyr, reiterated his insistence that there was no definitive link between sunlight or tanning beds and malignant melanoma.

At best, there could be an argument made that UVA might be a catalyst for common Basal and Squamous cell skin cancers, but **nothing specifically indicting sun beds as a causal factor could be found.** In support of this, Dr. Cyr mentioned the Australian 2002 “Stum, et al” study that positively connected melanoma to a genetic mutation, which explained why melanoma lesions appeared on areas of the body never exposed to sunlight. The AAD has chosen to ignore those studies.

On another occasion, Dr. Cyr noted that a ban on sun tan salons must be “associated with substantial deception or an unreasonable and substantial risk of illness or injury.” That criteria does not exist!

Furthermore, the F.D.A. regulates sun tan equipment as a medical device under Section 201 (h) of the food, drug and cosmetic act. It defines a medical device as anything that:

- Is used for diagnosis, cure, mitigation treatment or prevention of disease or condition.
- Affects the structure and function of the body;
- Does not achieve intended results through chemical reaction;
- Is not metabolized.

Medical devices are categorized as Class I (low risk), Class II (medium risk) and Class III (high risk).

Classification of Indoor Tanning Units was reduced a few years ago from Class II to Class I. The main factor in this change was the fact that risk was extremely low **by experience**. Then the regulations were amended to prevent sun tan salons from advertising **anything** that mentioned benefit or therapeutic value. **Even if it were true!** Only the cosmetic value could be marketed. Although Canada does not use this system of classification a sun bed does not cease to be a medical device just because it crossed a border.

In other words, Friedrich Wolff, the inventor of modern sun lamps was absolutely right when he tried to create photo-therapy lamps that would benefit the body for health and wellness and the prevention of disease. The side effect of exposure was a tan, and the side effect became the primary marketing success of this technology. Of course, the primary effect still remained.

WHY?

Why would the AAD want to close down tan salons?

The Indoor Tan Industry is a roadblock in the path of the SunScare message that all sun exposure is bad, (unless it is administered by a doctor).

Attacking the Indoor Tan Industry became a great moneymaking sport:

- The Dermatology Associations led the charge. The official Policy of the Canadian Dermatology Association (CDA) and the American Academy of Dermatology (AAD) was that all sun tan salons should be banned.

They spearheaded Sun awareness campaigns that were designed to scare people out of the sun and out of the sun tan salons. They used every scare phrase they could:

“There is no such thing as a healthy tan.”

“A Sun Tan is a Sign of Damage.”

“There is no such thing as a Safe Tan.”

“Sun exposure increases your risk of skin cancer, aging, wrinkling etc.”

Press releases were given to news wire services that proclaimed that skin cancer incidents doubled every ten years and the sun was to blame.

I particularly recall a large feature story in a major Canadian newspaper that followed this theme. Over and over this phrase was repeated through the whole story – “Skin cancer doubles every ten years and the sun is to blame.” As a person heavily involved in the Indoor Tan Industry at that time, I read this story with a heavy heart – was it true? Was this business really a hazard to good health? Was I harming rather than helping? I silently rationalized that the feedback I received from clients and associates was a resounding “No”! There was so much credible, positive evidence from scientists that conflicted with what I was reading in the news story.

Then – I came to the last paragraph of the article. It said, “The only place that skin cancer was not increasing was with outdoor workers”. Allow me to repeat that The only place that skin cancer was not increasing was with outdoor workers. How could that be? It didn’t make sense. I re-read the article several times looking for the additional clues, but there was just one contradictory sentence. The story was obviously initiated by the Dermatology Associations, as they were repeatedly quoted. Were they aware of the contradiction? Were they aware of the experiences of indoor sun tanning?

- Health Canada was next in line to attack Indoor Sun Tanning and sunlight exposure. The information given to the public mimicked the statements made by the dermatologists. Warnings to avoid sun tan salons and to avoid sun exposure unless you were fully covered with SPF (sun protection factor) sunscreens.

At the end of this report I have attached two versions of an information sheet from health Canada titled "Tanning Under Lights". Each has a total of eight so-called facts that are false, deceptive, misleading or scientifically unsubstantiated. They are identical to the facts that were challenged in letters to the Canadian Dermatology Association (pages 37 to 40).

EXCEPT FOR ONE PORTION!

In the version that was available to the public from 2000 to 2007, it states that UV rays may be linked to a serious type of skin cancer called malignant melanoma. When the same fact sheet was modified in May, 2007 **the statement was removed!!**

Is this an admission that they have been providing false facts to the public for more than 7 years?

The change was made quietly, without fanfare, with no explanation.

- With no retraction announcements
- With no apologies
- With no press releases.

There is no way the general public can be aware of this change!

▪ SunScare campaigns were enthusiastically followed by cosmetics companies, pharmaceutical companies, and manufacturers of any product that blocked sunlight such as UV protective eye glasses and tinted windows. Of course, cancer organizations were on side, faithfully repeating the mantra of sun avoidance.

The attacks on sun exposure and sun tan salons were often dramatic with pictures of young clear-skinned women (rarely men), that were labeled “before” followed by photographically altered pictures of the same faces showing haggard, wrinkled images that were labeled “after”.

Other scare strategies included case histories of people that had skin cancer. These were often described in heart-breaking detail with dire warnings to avoid the sun – or lather yourself with sunscreen.

OFFICIAL RECOGNITION THAT WE ALL NEED MORE SUN EXPOSURE

Commencing in 1990, a trickle of scientific research papers were published that revealed the need for ultraviolet exposure to the human body. By January 2003, this trickle had turned into a stream with 1,021 published research papers registered with MEDLine. By 2006 this had turned into a river of information. Authorities took note of Dr. David Hanley's Research Paper (University of Calgary) that 97% of Canadians were Vitamin D deficient for part of each year, and that 30% were chronically deficient all year long.

Further, it was revealed that One Billion people worldwide were deficient. The sheer volume of scientific information triggered conferences on Sunlight, Vitamin D and Health. These conferences were attended by Medical Health Authorities, Government Officials, Scientists and Cancer Organizations.

Press releases were issued by:

- The Australasian Group of Dermatologists, Medical Associations, Orthopedic Surgeons, Cancer Societies and others.

- The Canadian Cancer Society, American Cancer Society, Health Canada and others.

- The World Health Organization (W.H.O.)

All of the above stated that we all need more exposure to the sun. However, after two years of conferences and admissions of the need for more sunlight, none of the above has come up with a clear and reasonable recommendation of how much sun to get. Many, out of fear of skin cancer only recommend Vitamin D supplements rather than ultraviolet light.

Moreover, all the SunScare campaigns continued unabated. The mixed message reaching the public was:

- We all need more sun.
- The sun is still harmful.

The organizers of the Toronto Conference on Sunlight, Vitamin D and Health (March 2006) promised to deliver a clear unified statement to the public that would serve as a guide to correcting Vitamin D deficiency. That was two years ago!!! We continue to be without a Government Policy that addresses this problem.

2007 WAS A BANNER YEAR

The river of information regarding the benefits of Sunlight and Vitamin D had become a flood. There were a greater number of scientific research papers published than ever before. News stories of the emerging evidence of the essential value of Vitamin D appeared around the country on a daily basis. This included more RCT's (Random Controlled Trials) the Gold Standard of Research Projects.

They re-affirmed the remarkable ability of Vitamin D to reduce the risk of the most serious, chronic diseases of mankind by huge percentages! This preventive effect is vital for optimal health and well-being

TREATMENT

Most of what has been stated in this report is related to prevention. The case for treatment of disease is much less clear. Hopefully, as the successes of prevention become obvious, far, far more research funds will be available to the scientists and researchers, who have brought us **so far**, with **so little** funding. They need the financial freedom to pursue the next step – **proof of treatment**.

CONCLUSION

The World Health Organization (WHO) defines health as “**The State of Complete Physical, Mental and Emotional Well Being and not merely the Absence of Disease or Infirmary**”.

Sunlight is uniquely positioned to fulfill this definition.

- It is a factor in preventing many diseases.
- It quite possibly is a factor in the treatment of many diseases.
- It is already recognized as a way of treating depression, improving mood, eliminating “the Winter Blues” lifting our spirits and positively altering our outlook on life.
- More than all that, it puts a spring in our step and a smile on our face.

Much research has already been conducted on the association of brain development in the later stages of fetal growth and the condition of schizophrenia.

It seems like such a simple solution ... get more free sunshine, and change the health and well being of all Canadians so dramatically. The first step is to clarify the facts about **all** aspects of Vitamin D. That will take an authoritative body such as a Royal Commission to examine the SunScare fraud and report to the public.

- What is scientific fact?
- What is marketing hype?
- What is myth?
- What is speculation?
- What is junk science?

Will you help make this happen?

There are a number of Vitamin D advocates, scientists and researchers that are available to discuss this information, answer your queries, and guide you in formulating questions that should be asked by a Royal Commission. This can be done at your convenience in Ottawa.

Would you like to investigate the Vitamin D subject further? I recommend the following books:

The UV Advantage	Dr. Michael F. Holick
Solar Power for Optimal Health	Marc Sorenson
The Sun and the “Epidemic” of Melanoma: Myth on Myth!		
		A. Bernard Ackerman, M.D. and Renata Joffe, M.D.

also visit the website: www.vitamindcouncil.com

I have one last quote:

“GO OUTSIDE AND PLAY IN THE SUN, IT’S GOOD FOR YOU.” MOTHER

IT IS TIME TO END THE SUNSCARE CAMPAIGNS!

It is time to formally accuse:

- Health Canada
- The Canadian Cancer Society
- The Canadian Dermatology Association
- L'Oreal Canada

Of individually and collectively betraying the public's trust with statements that are false, deceptive, misleading or scientifically unsubstantiated, to the detriment of the health and well-being of all Canadians.

They have continuously refused to acknowledge the scientific data that negates the SunScare Campaigns. Furthermore, they ignore the risks of **under** exposure of ultraviolet light.

It is time - to initiate a Royal Commission to investigate the SunScare fraud that has resulted in widespread Vitamin D deficiency.

On May 09, 2008, Health Canada declared a study of Vitamin D deficiency would start in late 2008 Would take a year to complete ,, and would take further time to evaluate and implement.

This announcement is acknowledgement of the problem but will not address the fraud that caused the deficiency!

It is time – to initiate education programs that guide the public to experience sunlight in a moderate, non-burning fashion.

It is time - to massively fund additional research that will address the issues of **treatment** of chronic diseases using Vitamin D.

It is time - for **you** to participate and demand the moral, legal and ethical right to honesty from the appointed authorities we trust to inform and guide us.

It is time - to send a letter or e-mail to the House of Commons Standing Committee on Health, stating your support of a Royal Commission to investigate the fraud of SunScare.

Addressed to: Ms. Carmen DePape, Clerk
Standing Committee on Health
6th Floor, 131 Queen Street
House of Commons
Ottawa, ON. K1A 0A6 e-mail: HESA@parl.gc.ca

With a copy to: Ms. Joy Smith, Chairman
Standing Committee on Health
House of Commons
Ottawa, ON. K1A 0A6 e-mail: smith.j@parl.gc.ca

Would you like to do more? Please send the same letter to:

The Right Hon. Stephen J. Harper
Prime Minister of Canada
House of Commons
Ottawa, ON. K1A 0A6

With a copy to: The Hon. Tony Clement
Minister of Health
House of Commons
Ottawa, ON. K1A 0A6

ATTACHMENTS

- ▶ Retraction statement by Health Canada - Re: “80% by 18” myth.

- ▶ Confirmation by Canadian Cancer Society that they will remove any reference to the myth.

- ▶ Health Canada fact sheet – “Tanning Under Lights” (2000-2007) stating a link of sun beds to malignant melanoma – 1 page.

- ▶ Health Canada fact sheet “Tanning Under Lights” (2007-2008) with link to malignant melanoma removed – 2 pages.

RETRACTION BY HEALTH CANADA

Please be aware that all mentions to the 80% value will be removed from our Federal Government documents. At the American Society for Photobiology Meeting in Quebec last July, this "myth around the 80%" was clarified by Dr. Diane Godar from CDRH, FDA. She pointed out in her presentation that the this myth originated from a paper (Stern et al., Archives of Dermatology, May 1986) that concluded diligent use of sunscreens during first 18 years of life could reduce the lifetime incidence of non-melanoma skin cancer by 78%. This conclusion with the fact that SCC is dependent of cumulative dose mistakenly led others to believe people were getting 80% of UV before 18. They actually get around 25%.

This statement was actually based on a misinterpretation of data.

I hope this will be to your satisfaction,

Pascale Reinhardt
Photobiologist,
CCRPB, Health Canada



Canadian Société
Cancer canadienne
Society du cancer

September 18, 2003

Mr. Maurice Shpur
Uvalux International Inc.
120 West Beaver Creek Road, Unit #16
Richmond Hill, Ontario
L4B 1L2

Dear Mr. Shpur,

Thank-you for providing us with a copy of the letter you sent to the Canadian Dermatology Association on June 24, 2003.

The Canadian Cancer Society provides Canadians with accurate information about topics that have relevance to cancer including how to minimize the risk of developing cancer. We are committed to ensuring that the information we provide is solidly grounded in scientific evidence and where scientific evidence is insufficient or inconclusive our advice follows the precautionary principle and recommends prudence.

There is a great deal of published, peer-reviewed research on all aspects of cancer control and UV exposure is no exception. As we all know, very few scientific studies report identical results. There are well recognized ways to address these differences and these are captured under the umbrella of "evidence-based decision-making". Through this approach all of the available studies are considered, their results are weighted through a process that evaluates their methods for rigor and conclusions are drawn that are based on the total body of relevant science. We are satisfied that the Canadian Dermatology Association positions that you quote are based on this type of evidence-based process. They are also congruent with the findings of other agencies around the world that have cancer as a focus and that are skilled in applying the type of evidence review that I have described.

We have no reason to doubt their validity.

We have confirmed the retraction of the statement that "80% of lifetime sun (UVR) exposure happens by the age of 18 years" and will be updating our material accordingly. A copy of the letter confirming this statement will also be sent to the Society's 10 Divisions.

Thank-you for sharing your concerns with us.

Sincerely,

Barbara Whylic
Director, Cancer Control Policy

cc: Julie White, Chief Executive Officer
Michele Albagli, Executive Director Canadian Dermatology Association

10 Alcorn Avenue, Suite 200, Toronto, Ontario M4V 3B1
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TANNING UNDER LIGHTS

If you think going to a tanning salon is a safe way to tan, think again! By learning the facts about tanning now, you can protect yourself from skin cancer later in life.

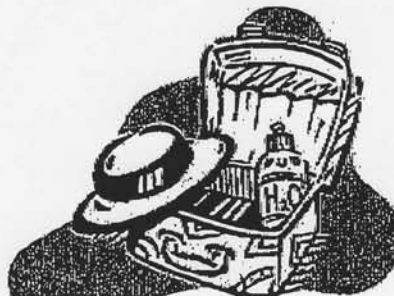
There is no safe way to tan. A tan from the sun's rays or under lights in a tanning salon will damage your skin.

Do you know what a tan is? It's when melanin (a substance inside your skin) turns dark. This happens when your skin is exposed to ultraviolet (UV) rays. Two kinds of UV rays can cause tanning: UVA and UVB. When your skin turns darker, it is telling you that damage has been done.



People at tanning salons may tell you their lights are safe. The fact is, their lights may give off 5 times as much UVA as the sun. Did you know that UV rays may be linked to a serious type of skin cancer called malignant melanoma?

Safety Tips



- Try to find other ways to look tanned. You can apply a cream that will colour your skin and give you the appearance of a tan.
- Feel good about your real skin colour.
- Getting a tan under the lights **BEFORE** you go south in the

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Tanning Under Lights

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 HC Pub: 4596

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If you think going to a tanning salon is a safe way to tan, **THINK AGAIN!**

By learning the facts about tanning now, you can protect yourself from skin cancer later in life.

There is no safe way to tan. A tan from the sun's rays or under lights in a tanning salon will damage your skin.

Do you know what a tan is?

It's when melanin (a



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substance inside your skin) turns dark. This happens when your skin is exposed to ultraviolet (**UV**) rays. Two kinds of **UV** rays can cause tanning: **UVA** and **UVB**. When your skin turns darker, it is telling you that damage has been done.

People at tanning salons may tell you their lights are safe. The fact is, their lights may give off five times as much **UVA** as the sun. Did you know that **UV** exposure is linked to skin cancer and is responsible for sunburn, eye damage and premature skin aging?

UV rays from tanning lamps have the same effects as **UV** from the sun!

Safety Tips



Try to find other ways to look tanned. You can apply a cream that will colour your skin and give you the appearance of a tan.

- Feel good about your real skin colour.
- Getting a tan under the lights **BEFORE** you go south in the winter will **NOT** protect your skin in the tropics. Use a broad spectrum sunscreen with at least **SPF 15** when you travel south.
- If you still want to use tanning lights, always protect your eyes by wearing goggles (eye protectors) that must be available from the salon.
- Try to convince your teenagers not to use tanning salons.

TO ORDER MORE COPIES:

Tel.: 613-954-0609,
 Fax: (613) 952-2551,
 E-mail: hecs-sesc@hc-sc.gc.ca

FOR MORE INFORMATION,
 contact the Consumer and Clinical Radiation Protection Bureau of Health Canada at **613-954-6699**.

Date Modified: 2007-05-10