“Many issues and beliefs affect individual sun safety advice”

Skin cancer is the most common cancer in the UK, with more than 100,000 new cases recorded every year. The incidence of all types has been rising steadily over the past decade, as social changes have increased ultraviolet radiation (UVR) exposure from both sunbathing and artificial sources.

UVR is a human carcinogen, acting as a promoter and inducer of skin cancer; it also damages the skin and causes premature ageing. However, UVR from the sun also carries a number of health benefits; it gives people an increased sense of well-being, allows them to synthesise vitamin D and provides opportunities to socialise and undertake physical activity.

Primary prevention and early detection are key to addressing this public health emergency. The 2012 Sun Awareness Week in May and the Mole & Sun Advice Roadshow form a two-pronged campaign running from April to September annually, which combines prevention and detection advice. It encourages people to self-examine regularly for skin cancer, teaches them about the dangers of sunburn and excessive tanning, and discourages them from using sunbeds.

Unlike other health campaigns, in which the negative health impact and limited health benefits of targeted activities are evident – for example, with anti-smoking messages – sun safety health messages have to address the fashion for the perceived healthy look of tanned skin, attitudes towards prolonged sun exposure and self-protection against skin cancer.

On a national level the message raises and maintains public awareness, and increases knowledge of the risks of exposure to natural and artificial UVR. It tries to influence attitudes and prompts people to change behaviour to protect themselves.

The problem arises when the health education discussion is at an individual level. The difficulty is to balance advice against the many variables, such as where exposure occurred, the time of day, the weather conditions and skin type, as these all contribute to the overall effect.

The preferred option is to advise against excessive sun exposure that would cause sunburn or heavy tanning, as this allows people to benefit from reduced sun exposure and minimises the most harmful effects of UVR, decreasing the cumulative sun and UVR exposure. However, advising that “heavy tanning” should be avoided could suggest light to moderate tans are acceptable.

A targeted, balanced approach has to be adopted, whereby interventions to tackle the social and practical barriers to using any type of protection acknowledge the common misconception that a suntanned appearance is attractive and healthy.

My experience is that the general public are receiving the message about the dangers of sun exposure, but the benefits give rise to a conflict that individuals have to manage for themselves. However, it is up to health professionals to ensure their patients have the right information to remain safe in the sun. NT

Michael Dean is a surgical and skin cancer clinical nurse specialist, Wirral University Teaching Hospital Foundation Trust

Rain won’t stop play as patients tan abroad

Despite our lack of sunshine, talking to patients about sun risk is essential, as increasing numbers will be fleeing these rain-soaked shores to countries where intense rays will present a significant risk to health.

The first in our two-part series on skin cancer (page 18) gives an overview of the most common types of this condition, with illustrations showing how each one presents.

Back home, invaluable work carried out in NHS Midlands and East, a cluster strategic health authority, aims to eliminate all grade 2, 3 and 4 pressure ulcers by the end of the year. Turn to page 14 to see how the safety thermometer was used to measure incidence and how nurses act as champions, with a role that includes sharing best practice and ideas, coaching each other and ensuring that motivation and enthusiasm are maintained.

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