INFORMATION LEAFLETS FOR PARENTS / CARERS OF A CHILD
SUN SAFETY FOR CHILDREN FOLLOWING A TRANSPLANT

Introduction

In the past it was considered that a sun tan made you look healthy and attractive. Modern scientific information, however, has shown many unhealthy effects of sun exposure such as early aging of skin and skin cancer.

Children who receive a transplant are more likely to develop skin cancers including melanoma, a rare but deadly form of skin cancer. The reason is not surprising: In order to reduce the chances of their bodies rejecting a transplanted organ as a foreign invader, patients are prescribed immunosuppressive drugs. But the immune system is also the body’s defence against cancer, and other, less lethal forms of skin cancer are known to be more common in those taking such drugs.

The good news is that skin cancers and melanoma are easily treatable if they are caught early – which means that if, as a transplant patient, you are especially vigilant about looking for unusual moles, the first sign of disease, you can reduce the risk considerably. It is important to check your skin once a month.

Remember

1. **Beware of reflective surfaces!** Sand, snow, concrete and water can reflect more than half of the sun’s rays onto your skin, sitting in the shade does not guarantee protection from sunburn (remember water offers minimal protection from UV radiation and reflections from water can enhance your UV radiation exposure). Take extra precautions when at high altitudes as you are more likely to burn.

2. **Remember to use sunscreen on overcast days** (up to 90% of ultra violet radiation can penetrate light clouds) and sunburn can occur even on a cloudy summer day

3. **Windy days** can also lead to sunburn. Remember windburn is sunburn

4. Should you develop an allergic reaction to your sunscreen, change sunscreen product? There are many products on the market today.

5. Concerns have been raised recently about the link between sun avoidance and vitamin D deficiency. These risks can be minimized with adequate intake of vitamin D through your diet or supplements.

6. Small amounts of exposure to hands, arms and face may help boost your Vitamin D levels. However your personal skin type, geographical location, time of day and weather conditions can influence this. This should be discussed with the medical team.

7. The UV index tells us what level of radiation is reaching the earth’s surface. The higher the UV index, the greater the risk of skin and eye damage

*Department of Dermatology*
Sun Protection

- Sunny days are to be enjoyed, however we know that extensive or inappropriate exposure to the sun’s rays is harmful to the skin.
- Some children are at a high risk for skin cancer i.e. fair skinned children who have had a transplant or are on drugs that weaken the immune system. **These children should always apply a very high protection which is designed for children and is 50+ or above in protection factor.**
- Children whose skin problems are aggravated by ultraviolet light i.e. Lupus Erythematosus and Vitiligo should be extra vigilant.
- When a child gets sunburn this leads to a greater risk of skin cancer in later life. Skin damage however can be avoided. It is important that children, especially babies and toddlers are protected from the sun as they have sensitive skin which can burn easily.
- Tanned skin is damaged skin

**Helpful Measures to Minimise Damage from the Sun’s Rays include:**

1. **Minimise sun exposure** during peak hours, which is usually between 11am and 3pm, when the sun is strongest. Try to plan your outdoor activities for the early morning or late afternoon.
2. **Seek shade** and/or use an umbrella to protect yourself.
3. When it is not possible to stay out of the sun keep yourself well covered. **Wear a hat,** a hat with a 4 inch brim can reduce UV light to the face by over 70% and ideally **long sleeves and trousers**.
4. Sun glasses can provide additional protection.
5. Choose tightly woven materials for greater protection from the sun’s rays. **UV swim suits** are particularly useful for young babies and children.

**Sunscreen Products**

1. Are another useful measure to protect against the sun,
2. No sunscreen can give you “complete block” or “100%” protection.
3. **Sunscreen products are only as one of many measures to protect against the sun.**
4. Apply sunscreens ideally 30 minutes before exposure and reapply every two hours.
5. If a product is applied correctly a sun protection factor (SPF) of 30-50 suffices to protect a person with normal skin from sunburn. The correct application of the product is important to ensure the protection indicated on the sunscreen bottle is achieved. **The overall message in relation to sunscreen use is “MORE IS BETTER”**
6. Pay particular attention to ears and lips (lip balm with protection), neck hands and feet, which are frequently forgotten. Sunscreen should be reapplied after swimming, perspiring heavily or towel drying since products differ in their water resistance.
7. Sunscreen products which protect against both UVA and UVB radiation are best (your pharmacist will be able to guide you).

Recent improved labelling will also help identify the sunscreens that have good UVA and UVB protection. UVA rays do not usually cause sunburn however it does cause premature ageing of the skin and skin cancer. **We recommend sunscreens with an SPF of 30 or more printed on the label for all ages.**

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<thead>
<tr>
<th>Labelled category</th>
<th>Labelled sun protection factor</th>
<th>Recommended minimum UVA protection factor*</th>
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<tbody>
<tr>
<td>“Low Protection”</td>
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<td>“10”</td>
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<td>“Medium Protection”</td>
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<td>“High Protection”</td>
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<td></td>
<td>“50”</td>
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<tr>
<td>“Very High Protection”</td>
<td>“50 +”</td>
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* If the product meets the recommended minimum UVA protection it will have this symbol on the packaging.

Further information can be obtained at:
- [https://www.cancer.ie/](https://www.cancer.ie/)

**Remember:** Ask your nurse if you are unsure about anything about your child’s care.

### Additional Information

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