

Summer Check Up

Summer is a time for sun, swimming, sports, hiking and camping. Summer is also a time for cuts and scrapes, insect bites and stings, sunburn and the miseries of allergies. Before the season starts is a good time to check your first aid kits and medicine cabinet. Ensure they are well stocked for summer ailments including allergies, that you have plenty of sunscreen for yourself and your children, and that you are ready for a safe and active summer.



Allergies

Seasonal allergic symptoms include congestion (stuffy nose), sneezing, runny nose, itchy throat, nose and eyes, red, watery, runny eyes, and some allergy sufferers may develop dark circles under their eyes. If you notice that your symptoms occur about the same time every year, this could be a clue to the presence of pollen allergy.

In Canada, seasonal allergy occurring

- late April-May is usually caused by tree pollen,
- May-mid – July is usually caused by grass pollen
- late August - Fall is usually caused by weed pollen, such as ragweed

The best way to prevent allergy symptoms is to avoid what you're allergic to (the allergen). In the case of pollen allergy, this may be hard, since pollens are carried far and wide in the air. You can access pollen counts in your geography district on the Weather Network at: <http://www.theweathernetwork.com/features/pollen/index.htm>

Tips for hay fever sufferers

- Avoid outdoor activities in pollen season

- Keep windows shut
- Air conditioning can reduce amount of pollen indoors
- Shower or bathe before bed to remove pollen
- Plan to take your holidays in another part of the country during pollen season.
- Consider over the counter anti-allergy medications during pollen season, such as antihistamines which help to prevent or lessen the allergic reaction. Ideally they should be taken before you are exposed to the allergens to minimize symptoms. However, once symptoms begin, antihistamines can help you to cope and may aid in preventing continuing symptoms. Newer antihistamines like Allegra (fexofenadine), Claritin (loratadine) and Reactine (cetirizine) are less likely to cause drowsiness than the more traditional ones like Benadryl (diphenhydramine). Sometimes one antihistamine will work better than another on an individual basis. So if you do not get results after a few day trial of one, talk to your pharmacist about what you might try next. Do not take more than one antihistamine at the same time. There are topical antihistamines that can for example be used in the eyes and nose. Livostin (levocabastine) comes in eye drop and nasal spray. Patanol (olopatadine) is another anti-allergy eye drop. The drops and sprays require a prescription.
- Cromolyn sodium may also be of benefit to some people. It must be started before exposure, must be taken on a regular consistent basis and takes a while to begin its preventive properties.
- We suggest that you either avoid decongestants or use them very sparingly.
- The most popular prescription medications contain topical corticosteroids. They are very safe and effective when used appropriately.
- As all medications, including ones not requiring a prescription may have side effects, please read the directions carefully or consult with a pharmacist.
- Allergy shots (hyposensitization) may be effective for people who have very specific allergies.

References:

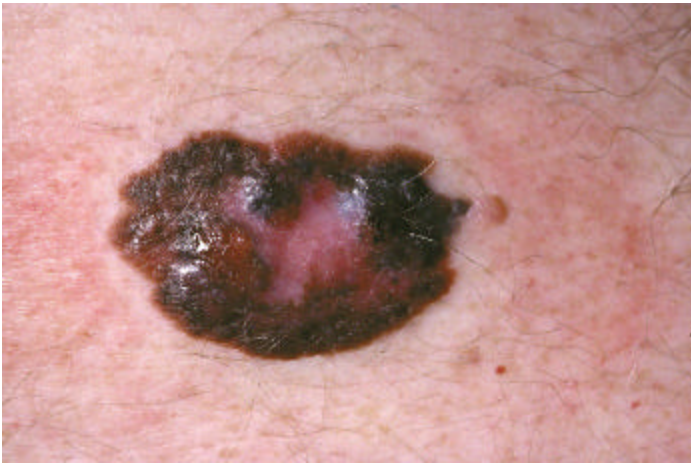
College of Family Physicians of Canada. “Hayfever and other allergies. Things you can do to control your symptoms” (at www.cfpc.ca)



Summer Skin Health

Many people, especially teenagers, still associate a tan with health and beauty. However, repeatedly exposing your skin to the sun's ultraviolet (UV) rays can lead to prematurely aged, leathery, coarsened skin, wrinkles, and can increase your risk of developing skin cancer.

In general for most people getting outdoors and doing healthy active things is good. In almost every instance, it's possible for most people to limit sun exposure to safe levels.



Skin Cancer

Skin cancer is the most serious long-term consequence of summer sun exposure. There are three main types of skin cancer: basal cell cancer, squamous cell cancer and melanoma. The first two types are the most common but are not usually as life-threatening as melanoma.

People most at risk of skin cancer are those who have had severe frequent sunburns in the past; those prone to burn rather than tan; fair-haired, light eyed, fair skinned and those with freckled skins.

Examine your skin regularly for signs of skin cancer and contact your doctor if you notice any changes in moles or skin lesions. As cancers can develop in places that you cannot see, like your back or even between your buttocks, it's a great idea to have a relative or friend perform a 'spot check' on you at least once a year. No part of your skin is immune from cancer. Digital cameras are great for recording moles and other skin lesions so that you can recognize changes over time.

Know the ABCDEs of malignant melanoma and see your doctor if you notice:

Asymmetry – one part of the mole is different from the rest

Border – irregular, blurry or undefined



Color - varies from one area in the mole or lesion to the other

Diameter – mole or lesion more than 6 mm across (size of a pencil eraser)

Elevation – when a mole is raised above the surface and has a rough surface

You should also see your doctor if there has been any accelerated or unusual growth in an existing skin mole, freckle or lesion or if something new appears that looks unusual; any lesion that bleeds or is painful.



Protect your skin from the sun

The best way to avoid developing skin cancer is to protect yourself from over-exposure to the sun and sunburn. Sun protection will help prevent premature skin aging and wrinkling. Protection from the sun should begin in infancy.

- Avoid exposure to the sun in the summer between the hours of 11 am and 4 pm. Engage in sports and other outdoor activities earlier in the morning or later in the afternoon
- Avoid tanning, or at least avoid tanning for long periods of time, especially between 11 am and 4 pm.
- Try and stay in the shade as much as possible when outdoors
- Wear broad brimmed hats (6 inch brim) and light coloured long sleeved shirts, trousers and gloves made of tightly woven fabric. (One trick is to hold fabric up to a light bulb; if it blocks the light then the weave is tight)
- If you must be in the sun, be sure to wear broad-spectrum sunscreen (one that protects against both Ultra Violet A(UVA) and Ultra Violet B(UVB) rays with a Sun Protection Factor (SPF) of at least 15 on all areas of the skin that are exposed. (See sunscreen below)
- Avoid sunlamps and tanning salons. Sunlamps increase skin aging and increase risk of cancer.

- Consider sunless sun tanning products and bronzers, or skin tan makeup for a healthy looking skin without the risk. But be aware that such products don't contain sunscreen
- Check your radio, television or Internet weather reports daily for the UV index. The lower the index the longer you can safely remain in the sun.
- Hikers should be aware that UV radiation increases at high altitudes (4% for every 1000 ft of elevation)
- Insect repellents may reduce the effects of sunscreen. If you are using both products, apply sunscreen twenty minutes before going out in the sun and the repellent just before. Combination repellent/sunscreen products are not recommended. According to the Centre for Disease Control (CDC) combination repellent/sunscreen products are not recommended because the instructions for the safe use of DEET and the instructions for proper use of sunscreen are different. Insect repellents require less frequent application than sunscreens. Hence in order to keep yourself protected from the sun you may be using an excess amount of DEET which could be harmful.



Protect your babies and children

- Never let children play or sleep outdoors in strollers, playpens or carriages unless they are in the shade and will remain in the shade and/or are appropriately protected with sunscreen or clothing and of course are being appropriately supervised.
- It is very important to keep your infants and children covered. Their skin may be much more sensitive than yours.
- Be especially diligent about putting sunscreen on your children; make sure your teens are also protected
- Don't let your children play for long periods in the sun
- Do not let your teenagers use sunlamps.



Sun and Drugs

Many drugs can cause photosensitivity, a severe sunburn reaction to UV rays, when the person taking the drugs spends even a few minutes in the sun. Common offenders include:

Antibiotics including: tetracyclines (doxycycline, tetracycline) fluoroquinolones (ciprofloxacin, ofloxacin), sulfonamides

Anti-inflammatories (NSAIDS) including ibuprofen, naproxen

Diuretics (water pills) including: furosemide, bumetanide, hydrochlorothiazide

Retinoids (for severe acne): isotretinoin

Hypoglycemics (for type II Diabetes) including: Sulfonylureas (glipizide, glyburide)

Other drugs including: Amiodarone, Diltiazem, Chlorpromazine, Quinidine, Hydroxychloroquine, Coal tar, Enalapril, Dapsone, Terbinafine

Fragrances in cologne, perfume and skin care products including: musk ambrette and 6-Methylcoumarin

And paradoxically some sunscreens including: PABA (para-aminobenzoic acid), cinnamates, benzophenones and salicylates can cause photo allergic reactions.

Ask your pharmacist or doctor if any medications you are taking may increase the risk of sun sensitivity. For a list of drugs that may be associated with sun problems go to Health Canada website, "Guidelines for Tanning Salon Operators" at <http://www.hc-sc.gc.ca> or go to <http://www.emedicine.com/derm/topic108.htm> for a medical journal review article

Sunscreen

For maximum sun protection choose a broad-spectrum sunscreen that offers protection from *both* UVA and UVB rays (read the label carefully). According to the Canadian Cancer Society, choose a sunscreen that has at least an SPF of 15. Sunscreens are labeled with a sun protection factor (SPF). The SPF is a relative index, indicating how long skin with sunscreen can be exposed to the sun before reddening and burning, as compared to skin without sunscreen. A sunscreen with an SPF of 15, for example, means that with this sunscreen your skin can be exposed to the sun's rays 15 times longer without burning than if you had no sunscreen on. If, wearing no sunscreen you would likely burn in 20 minutes, with sunscreen SPF 15, you can stay in the sun 15 times longer, or 300 minutes, without burning. **An SPF of 15 is not *stronger* than an SPF of 8; the higher number merely means you can stay out longer.**



Splash the sunscreen

- Splash the sunscreen on liberally on all exposed skin, taking extra measure to protect exposed sensitive areas that are susceptible to burns like your feet, hands, nose, ears, back of neck, back of arms and bald head.
- Health Canada recommends application at least 20 minutes before going out in the sun and a reapplication 20 minutes after going out so that the sunscreen stabilizes on your skin and provides you with maximum protection
- Splash sunscreen on about every two hours. This reapplication ensures that you will be protected for your original time outside. Sunscreen wears off due to factors such as sweat and wind and thus it is necessary to reapply. For example if you burn normally in 20 minutes and have put on an SPF 15 sunscreen, by reapplying every two hours you should be protected for the entire 300 minutes.
- Splash on more sunscreen after swimming, excessive sweating, or towel drying.

Treatment for Sunburn

With the effective sunscreens on the market today, nobody should get a sunburn. However if you do get sunburned:

- Lie in a cool dark place if you have a headache.
- Soothe sunburn pain with soft cool cloths
- Take frequent cool baths or showers
- Applying lotions containing aloe vera or topical steroid ointment (1% hydrocortisone cream) can bring down swelling and pain. Do not use any anesthetic creams or sprays as they can cause allergic reactions
- Drink fluids to prevent dehydration
- Sunburn pain can also be relieved with acetaminophen (Tylenol)

References:

WebMD. Health. Sunburn. (<http://my.webmd.com>)

Health Canada. Air and Sun. “UV index”; “Preventing skin cancer”; “Sunscreens”; (all from <http://www.hc-sc.gc.ca>)

American Family Physician. Skin cancer. Reduce your risk with safe sun guidelines. AFP. 2002. 66.2.

Mayo Foundation for Medical Education and Research. Sun exposure and skin protection: an interview with a Mayo Clinic specialist. 2003. (<http://www.mayoclinic.com>)



Sunglasses

UV rays may harm the eyes. Good, though not necessarily expensive sunglasses that reduce both UVB and UVA can reduce the risk of long-term damage, as well as making your eyes more comfortable. Check the label on the sunglasses you plan to purchase to



make sure they block both UVA and UVB. Also check that your sunglasses comply with American National Standards Institute standards that have been adopted by Canadian Standards Institute.

Sunglass care:

- To protect your sunglasses carry your sunglasses in a case.
- Don't leave your sunglasses out in the hot sun, such as on the car dashboard, as heat can damage the lenses
- Sunglass lens coatings are delicate. Keep a lens tissue or soft cloth handy for cleaning lenses. Sunscreen stains can be removed with cleaning solution (mild dish detergent and water) and gently polished with a soft cloth.
- Some types of polarized lenses are made of laminated plastic and can be damaged by water, especially salt water. Keep them dry, rinse salt water off with fresh water. Don't let glasses stay wet for long periods of time.

Reference:

Health Canada. Air and Sun. Sunglasses. (<http://www.hc-sc.gc.ca>)

Mountain Equipment Co-op. Caring for sunglasses. 2004. (<http://www.mec.ca>)



Insects

It is surprising how few of the many thousands of species of spiders, insects, beetles and bugs that are found in Canada actually bite or sting people. We can be grateful for this. We can also be grateful that our arthropods are relatively small and gentle compared to those of some other lands. In Australia for example, there are killer spiders as big as golf balls that will chase a person.

However there are nasty insects out there, including mosquitoes, black flies, wasps, hornets and bees. Don't let insect bites and stings spoil your summer fun.

Avoid flying insects

- Stay away from beehives, wasp and hornet nests.
- Do not throw rocks or spray water at wasp, hornet or bees nests.
- Stay calm and move slowly when around stinging insects.
- Do not use perfumes or heavily scented products outdoors (perfumes, colognes, soaps, cosmetics)
- Avoid swampy areas of the bush
- Always wear long sleeved clothing, pants, shoes and socks in the bush.
- Insect repellents can repel mosquitoes and black flies (see below)

Treatment: Insect bites and stings

Insect stings and bites are usually minor, but some people experience more severe reactions, such as intense itching, redness, swelling and hives.

- Stay calm. Remove yourself from the area where you got stung so you don't get stung again.
- If stung by a bee, locate the site of the bite and remove the stinger (looks like a splinter) carefully with tweezers or the side of a credit card or knife. Do NOT squeeze the stinger, which is where the venom pump is located.
- Wash sting area with soap and water or alcohol wipes
- If the bite or sting is painful, apply cold compresses (such as ice cubes in a washcloth)
- Pain reliever such as Tylenol can reduce pain.
- Swelling and itch may be helped with calamine lotion, baking soda paste, topical steroids or antihistamines.
- People who have experienced severe reactions to insect stings (see below) should carry an EpiPen, which contains epinephrine and can counteract severe allergic reactions. Talk to your doctor. It is important that both you and your family know how to use the EpiPen.

NOTE: Allergy to insect stings, especially bee stings, can cause fatal anaphylactic reactions in some people. Call 911, if the bee stung person is experiencing severe symptoms following a sting such as: swollen face, lips, tongue and/or throat, has sudden feeling of doom or dread, shortness of breath, trouble breathing, problems speaking, generalized hives or faints.





Mosquitoes and West Nile Virus

Mosquitoes have never been popular in Canada and have become even less so over the last few years with the spread of West Nile virus. West Nile virus infects birds, and mosquitoes can spread the virus from sick birds to humans. Fortunately, most people who contract the disease show no symptoms. Some people develop a flu-like illness, with headaches, muscle aches, rash and swollen glands. Most mild illnesses last 3 to 6 days. Less than 1% of people infected with West Nile virus become seriously ill.

Those most at risk of serious illness are people over age 55 and those with weakened immune systems, such as patients on immunosuppressive drugs and people with AIDS. Symptoms of a more serious illness include: stiff neck, severe headache, confusion, and sensitivity to light. Seek medical attention if you develop these symptoms after getting bitten by a mosquito. The incubation period (time between a mosquito bite and the development of symptoms) is 2 to 15 days. If you have any of the symptoms listed above, do not forget to tell the doctor assessing you that you've had mosquito bites.

Keep mosquitoes from breeding around your house; protect yourself and your neighbors

The best way to protect yourself and reduce risk of contracting West Nile Virus is to avoid mosquito bites. Thus the spread of West Nile virus can best be controlled by controlling mosquitoes. Mosquitoes lay their eggs and breed in stagnant water that has been standing for more than 4 days. Keep the area around your home, your garden and swimming pool clean, tidy and well-maintained. Dump rain water that has accumulated around your home. Identify potential mosquito breeding grounds around your house, such as

- uncovered garbage bins, lids, rubbish heaps
- old toys, flowerpots, garden equipment
- plastic wading pools, swimming pools

- eaves, gutters, drains
- birdbaths- clean birdbaths twice a week
- ponds - keeps ponds clean and use an oxygenator
- repair leaky faucets, hoses
- repair screen doors and windows.

Insect repellents

The most effective insect repellents available contains DEET. (see below) Other products available and approved by Health Canada include: P-menthane 3,8 diol, soybean oil, citronella and lavender. All of these products must be used with due care.

How to use insect repellents safely

- Read the label carefully before using insect repellents. Follow instructions on the label noting any restrictions that may apply to children and the amount of time the repellent will last. Reapply only as directed.
- Never apply a product called INSECTICIDE to your body.
- Apply the repellent sparingly to exposed skin and clothing. If biting does occur with a small amount applied, apply a little more.
- DEET can damage some synthetics like spandex, acetate, rayon and some natural materials such as leather thus it is wise to wear lightweight clothing made of cotton and apply the repellents on the clothing itself.
- Do not get in eyes, if product does get in eyes, flush with cool water.
- Do not use on sunburned, damaged, irritated, cut or wounded skin.
- Don't spray near food.
- Use only in well ventilated areas, never in a tent.
- Wash skin with soap when repellent is no longer needed. Remember to wash any clothing in which repellents were sprayed before wearing it again.
- Keep insect repellent away from children.
- Supervise children when applying repellent.
- Never spray repellents directly onto the face. Instead spray on hands and then apply sparing amounts to the face avoiding the eyes and mouth.
- When applying to the face of children, do not put repellent on the hands of children as this can lead to repellent getting into eyes and mouth. Instead, the adult should spray a small amount onto their hands and apply sparingly to children avoiding the eyes and mouth.
- If you suspect that you are reacting to the repellent, wash area immediately with soap and contact your doctor. Take the product with you to the doctor's office.
- If you are concerned about sensitivity to repellents, apply the repellent to a small area of your skin. After 24 hours observe for any possible reaction that may have occurred.



Products approved by Health Canada

- DEET provides excellent and long lasting protection. The DEET concentration (see below) will give you an estimate to the length of time the product protects against mosquitoes. DEET containing products are generally safe if instructions on the package are carefully followed. Do not use DEET on children under 6 months of age.

Other approved products include:

- P-menthane 3,8 diol. This product provides up to two hours protection; it cannot be used on children under three; can be applied twice daily
- Soybean oil. Some insect repellents containing soybean oil have been registered; such products provide 1 to 3.5 hours of protection from mosquitoes.
- Citronella and lavender – check that products are registered and approved by Health Canada. Citronella can protect against mosquito bites for 30 min to two hours, lavender protects for about thirty minutes. These products cannot be used on infants and toddlers under age two. May be skin sensitizers and allergic reactions may occur

DEET concentration

25%	5 hour protection
20%	4 hours
7%	2 hours
5%	1.5 hours

Purchase the product that best suits your lifestyle, activities and age.



Restrictions on using products containing DEET

Infants less than 6 months: Do not use DEET, use mosquito nets or keep infants indoors before dawn and after dusk when mosquitoes are most active.

Children 6 months - 2 years. Use the least concentrated product (10% DEET or less) apply sparingly and not to be used on face or hands. Maximum one application per day. Avoid prolonged use.

Children 2 years to 12 years. Use least concentrated product (10% or less) Do not apply more than three times per day. Avoid prolonged use

Adults and children over 12 – Products containing a concentration of DEET up to 30% can be used; Follow guidelines above. Do not use for prolonged period of time.

References:

City of Toronto. West Nile Virus. Fact Sheet. Spring. 2004. www.toronto.ca/health
Health Canada. Safety tips on using personal insect repellents. http://www.hc-sc.gc.ca/english/westnile/insect_repellents.html

