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Marathon runner and skin cancer survivor, Deena Kastor

## An Athlete's Skin Exposed

Learn how to minimize one of your largest sporting health risks—sun damage to your superexposed skin.

By KRISTY HOLLAND

**I** just finished an adventure race and I have a blister. I've extracted a tick from my armpit, a poison ivy rash is erupting on my neck, and my blood-streaked legs are proof that scrub oak rips indiscriminately through both clothing and the fragile outer layers of my skin.

When it comes to skin care and sports, it's often these urgent, bloody, and uncomfortable issues that cause me to act—or react—to protect my largest organ. By comparison the sunburned strip of skin on my shoulder isn't much of a priority. But, according to Neil Fenske, MD, professor and chair of the Department of Dermatology and Cutaneous Surgery at the University of South Florida, it should be. "It's not just severe burns; cumulative sun exposure is a factor in how soon you'll see evidence of sun damage: spots, discolorations, and pre-cancers."

In the United States, melanoma—the most deadly form of skin cancer—is the second most common cancer diagnosed in women age 20 to 30. And though melanoma is still a larger risk for men than for women overall, the risk for women age 19 to 39 has more than doubled in the past 30 years to almost 14 cases per 100,000 people.

Olympic marathon runner Deena Kastor has made her contribution to that statistic. "Unfortunately the sun is a job hazard for me," she says. "I am probably outside for four to five hours a day while living and training at 8,000 feet altitude, and some summer days I feel the sun is just sitting on my shoulder." Deena's cancer wake-up call came

in 2001, when two skin biopsies tested positive as basal cell carcinoma. Since then she sees a dermatologist quarterly, has had more than 200 stitches to close up the holes left by cancer removal, and has been lucky to catch three melanomas before they became life-threatening. "I am not proud to say that I've lost count of how many times I have had cancer removed," she says.

Since her diagnosis, the 39-year-old has become more diligent about more than just her visits to the dermatologist; she's restructured her routine to include sun protection. She carefully applies a broad-spectrum sunscreen with a high sun-protection factor (SPF) and reapplies regularly; she wears a cap, sunglasses, and long-sleeved or protective clothing; and she even runs on the shady side of the street when it's an option.

The American Academy of Dermatology recommends avoiding sunlight between 10 a.m. and 4 p.m., being extra diligent around ultraviolet-reflecting water or snow, and avoiding tanning beds. Dr. Fenske adds that broad-spectrum sunscreens are an important part of protection as well: "SPF only indicates a lotion's protection against UVB rays that are responsible for the burning and reddening of the skin's upper layers," he says. Long-wave UVA rays—the type that makes tanning beds both effective and dangerous—are linked more closely with melanoma and the deeper skin damage that causes wrinkles. "I also recommend using a sunscreen with Mexoryl, a chemical block that absorbs the broadest spectrum of UVA rays, or a physical sunscreen using

micronized zinc. It goes on white and it's not cosmetically elegant," he says, "but it works."

The American Academy of Dermatology also recommends at least annual self-exams and regular dermatological exams, especially for people with fair skin, a family history of skin cancer or pre-cancer, or a history of blistering sunburns; also at higher risk are individuals with large, numerous, or asymmetrical moles.

Last year Dr. Fenske led the first-ever skin cancer screening for the University of South Florida's Athletic Department and was surprised that so many of the coaches had never sought dermatologic care. "They had found 101 reasons not to," he says. "But once we pointed out the damage, it got their attention and motivated some of them to get their pre-cancers treated." Skin cancer is highly treatable if caught early on—the five-year survival rate for people whose melanoma is detected and treated before it spreads to the lymph nodes is 99 percent.

The U.S. Food and Drug Administration is working on a new sun-block rating system that will make it even easier to identify the protection level of broad-spectrum sunscreens, and technology can also lend a hand toward protection. A recent study from the Harvard Medical School found that text-message reminders increased daily sunscreen use significantly. There are also text-message reminder services such as [www.txtmymeds.com](http://www.txtmymeds.com) that allow you to schedule a free, daily reminder to apply sunscreen.

The sun is a hazard that Deena and many outdoor or extreme athletes can't avoid. You certainly won't find me biking in the rain or climbing west-facing pitches after dark. I love to finish a run, dripping with sunscreen-slicking sweat. The peaks in my backyard increase my UV exposure by double-digit percentages, and, if given the chance, I'd kill for an entire day on the water, which bounces UV rays back toward my skin, effectively doubling my exposure. What am I supposed to do? Follow Deena's lead.

## Vitamin D-ception

While running the Olympic marathon in Beijing last summer, U.S. distance runner Deena Kastor broke her foot. "Blood test results proved that I had plenty of calcium in my system," she says, "but almost no vitamin D to absorb the calcium into my bones."

Vitamin D is necessary for calcium and phosphorus absorption, and the body creates the nutrient through a synthesis process that starts when UV rays hit exposed skin. Deena's aggressive sun-protection regimen had, essentially, starved her body of the nutrient that is necessary for calcium and phosphorus absorption and made her bones brittle.

"The tanning industry is jumping on [this vitamin D controversy] as a way to encourage tanning," says Neil Fenske, MD, of the University of South Florida's Department of Dermatology and Cutaneous Surgery. Dr. Fenske claims that a very little bit of sun exposure—10 to 30 minutes two to three times per week—is more than enough to satisfy the body's nutritional requirement.

Though some research has indicated that vitamin D may also help reduce the risk of some internal cancers, the American Academy of Dermatology is clear that the risks of tanning, inside or out, aren't worth the skin cancer risks. It strongly recommends getting vitamin D from supplements and food sources such as fortified cereal, oily fish like salmon and tuna, and fortified milk, cheeses, and yogurt. Contrary to the claims of some tanning parlors—and even a few outspoken doctors—the message is very clear: Despite your need for vitamin D, tanning isn't safe.

