

Summer Safety

Sunburn

As a child many of us got frequent, blistering sunburns while playing outside all day. Then in our teens or college years, it was cool to be tanned. "Everyone wanted a tan, and I thought tanned skin looked beautiful". "But it's not beautiful when you're older and you've had melanoma."

Everyone is at risk for skin cancer, but especially people with light skin color, light hair or eye color, a family history of skin cancer, chronic sun exposure, a history of sunburns early in life, or freckles, according to the American Cancer Society. Rays from artificial sources of light such as tanning booths also increase the risk of skin cancer.

What you can do: Remember to limit sun exposure, wear protective clothing, and use sunscreen. Sunscreen should be applied 30 minutes before going outdoors and reapplied at least every two hours. Use water-resistant sunscreen with a sun protection factor (SPF) of 15 or higher. The FDA regulates sunscreen as an over-the-counter (OTC) drug and is working on a proposed rule that will specify testing procedures for determining levels of UVA protection in sunscreen products. It will also include labeling for UVA protection to complement existing SPF labeling for UVB. So in the future, consumers will be able to choose a sunscreen based on both UVB and UVA protection levels. Sunscreen is formulated to protect the skin against the sun's ultraviolet light (UV), not to help the skin tan.

Some medications can increase sensitivity to the sun. Examples are tetracycline antibiotics, sulfonamides such as Bactrim, non-steroidal anti-inflammatory drugs such as ibuprofen, and some fluoroquinolones. Cosmetics that contain alpha hydroxy acids (AHAs) may also increase sun sensitivity and the possibility of sunburn. Examples are glycolic acid and lactic acid. It is important to protect your skin from the sun while using AHA-containing products and for a week after discontinuing their use.

According to the American Academy of Dermatology (AAD), along with regularly using sunscreen, it's smart to wear wide-brimmed hats and seek shade under a beach umbrella or a tree. Sunscreens alone may not always protect you. And don't forget sunglasses, which protect the sensitive skin around the eyes and may reduce the long-term risk of developing cataracts. People who wear UV-absorbing contact lenses still should wear UV-absorbing sunglasses since contact lenses don't completely cover the eye.

If you do get a sunburn, use a cold compress, and if you don't have that, a pack of frozen vegetables will work. Over the counter pain relievers may also be helpful. Mild and moderate cases may be helped by topical corticosteroids such as hydrocortisone. Severe cases may require oral steroids such as prednisone.

Be on the lookout for moles that change color or size, bleed, or have an irregular, spreading edge--all potential signs of skin cancer.

Bites From Mosquitoes and Ticks

Many people have never seen a tick and many people who have come in contact with a tick get Lyme disease. A small red rash that turns into a large rash that looks like a bull's-eye. Other classic Lyme disease symptoms, such as muscle aches and stiff joints.

Ticks are usually harmless. The biggest disease threat from tick bites is Lyme disease, which is caused by the bacterium *Borrelia burgdorferi*. The bacteria are transmitted to humans by the black-legged deer tick, which is about the size of a pinhead and usually lives on deer.

Blood test can confirm Lyme disease. If in a wooded area, protect yourselves with proper clothing by covering your exposed limbs and be sure to check yourself for ticks when you get back from you walk.

Another insect-borne illness, West Nile virus, is transmitted by infected mosquitoes and usually produces mild symptoms in healthy people. But the illness can be serious for older people and those with compromised immune systems. severe illness. The symptoms are flu-like and can include fever, headache, body aches, and skin rash.

What you can do: If you're spending time in tall grass or woody areas, use insect repellent with DEET to ward off mosquitoes and ticks. But insect repellent should not be used on babies, and repellent used on children should contain no more than 10 percent DEET.

Check yourself and your children for ticks before bedtime. If you find a tick, remove it with tweezers, drop it in a plastic bag and throw it away. You don't have to save the tick to show it to doctors. People who want to get a tick tested for diseases or other information could check with their local health departments, but not all of them offer tick testing. Clean the area of the tick bite with antiseptic. Early removal is important because a tick generally has to be on the skin for 36 hours or more to transmit Lyme disease.

Over the counter antihistamines, such as Benadryl or Claritin, can bring itch relief. Topical anti-itch cream on the affected area also may help, especially for children. You may also want to keep their nails short. "Some kids scratch bites, break the skin, and then get a bacterial infection.

Bee Stings

What you can do: To keep bees away, wear light-colored clothing and avoid scented soaps and perfumes. Don't leave food, drinks, and garbage out uncovered. Treat a bee sting by scraping the stinger away in a side-to-side motion with a credit card or fingernail, and then washing the area with soap and water. Pulling the stinger or using tweezers may push more venom into the skin.

For any bug bite or sting, ice or a cold compress and over the counter pain-relieving creams or oral medications can help.

Because bees puncture the skin with their stingers, there is a risk of tetanus infection. After getting the regular series of childhood tetanus shots, adults should have a tetanus booster shot every 10 years.

Watch for signs of allergic reaction to stings, which typically happen within the first few hours. And seek medical attention immediately.

HOME REMEDIES:

Excellent –

Paste of vinegar/baking soda/meat tenderizer – the acid /base interaction with the vinegar and baking soda fizzes and the meat tenderizer breaks down the toxins.

Best –

Toothpaste – neutralizes the acid in the bee's venom.

Ice - 20 minute application slows down the venom and cancels out pain. Reapply as needed.

Heat Illness

During heat illness, the body's cooling system shuts down. Body temperature goes up, which inhibits the ability to sweat. Mild symptoms of heat exhaustion include thirst, fatigue, and cramps in the legs or abdomen. Left untreated, heat exhaustion can progress to heat stroke. Serious heat-related symptoms include dizziness, headaches, nausea, rapid heartbeat, vomiting, decreased alertness, and a temperature as high as 105 F or more. In severe cases, the liver, kidneys, and brain may be damaged.

The risk of heat illness goes up during exertion and sports and with certain health conditions such as diabetes, obesity, and heart disease. Alcohol use also increases the risk.

People ages 65 and older and young children are especially vulnerable to heat illness.

What you can do: Air conditioning is the No. 1 protective factor against heat illness. If you don't have air conditioning, spend time in public facilities, such as libraries and malls that have air conditioning. Reduce strenuous activities or do them during early mornings and evenings when it's cooler. If you're outside for long stretches of time, carry a water bottle, drink fluids regularly, and don't push your limits. People who play sports should wear light, loose-fitting clothes and drink water or sports drinks before, during, and after activity. If you see someone experiencing heat illness, have the person lie down in a cool place and elevate

the legs. Use water, wet towels, and fanning to help cool the person down until emergency help comes.

Burns From Fireworks and Grills

What you can do: Stick with public firework displays handled by professionals.

Children should always be closely supervised when food is being cooked indoors or outdoors. Be aware that gas leaks, blocked tubes, and overfilled propane tanks cause most gas grill fires and explosions. "Teach children to cover their faces, stop, drop, and roll if their clothes catch fire.

Generally, minor burns smaller than a person's palm can be treated at home. But burns bigger than that, and burns on the hands, feet, face, genitals, and major joints usually require emergency treatment. "For a minor injury, run cool water over it and cover it with a clean, dry cloth. Don't apply ice, which can worsen a burn. Don't apply petroleum jelly or butter, which can hold heat in the tissue. Consult your family doctor if a minor burn does not heal in a couple of days or if there are signs of infection, such as redness and swelling.

Foodborne Illness

Summer is prime time for weddings, picnics, graduation parties, and family cookouts. And feeding the large groups involved can make food safety especially challenging.

Typical signs of foodborne illness include nausea, vomiting, cramps, and diarrhea. In serious cases, high fever, bloody stool, and prolonged vomiting may occur. Young children, pregnant women, older people, and those with compromised immune systems are hit hardest.

Bacteria, whether in food or in the air, grow faster in warmer weather. Don't just worry about the potato salad or egg dishes. You have to be careful with any food, including melons and lettuce.

What you can do: It seems so basic, but not everyone does it. Wash hands well and often with soap and water, especially after using the bathroom and before cooking or eating. Also wash surfaces when cooking, keep raw food separate from cooked food, marinate food in the refrigerator, cook food thoroughly, and refrigerate or freeze food promptly. The FDA suggests never leaving food out for more than one hour when the temperature is above 90 F. Any other time, don't leave food out for more than two hours. "Keep hot food hot and cold food cold," Wash off fruits and vegetables with cool running water. Also, scrub fruits with rough surfaces like cantaloupe with a soft brush.

When you are packing food for a picnic, place cold food in a cooler with plenty of ice or commercial freezing gels. Cold food should be held at or below 40 F and the cooler should be stored in shade. Hot food should be wrapped well, placed in an insulated container, and kept at or above 140 F.

Those hit by a foodborne illness must stay hydrated so they could try chewing on ice chips or sipping clear fluid after vomiting has stopped. In the next day or so,

eat only light foods such as bananas, rice, applesauce, toast, crackers, and soup. Seek emergency treatment if severe pain accompanies the illness, if vomiting doesn't stop in a couple of hours.

Poison Ivy, Poison Oak, and Poison Sumac

Rashes from poison ivy, oak, or sumac are all caused by urushiol, a substance in the sap of the plants. Poison plant rashes can't be spread from person to person, but it's possible to pick up a rash from urushiol that sticks to clothing, tools, balls, and pets.

What you can do: According to the American Academy of Dermatology, while "leaves of three, beware of me," is the old saying, "leaflets of three, beware of me" is even better because each leaf has three smaller leaflets.

Wash garden tools regularly, especially if there is the slightest chance that they've come into contact with poison ivy. If you know you will be working around poison ivy, wear long pants, long sleeves, boots, and gloves.

Hikers, emergency workers, and others who have a difficult time avoiding poison ivy may benefit from a product called Ivy Block, made by EnviroDerm Pharmaceuticals Inc., of Louisville, Ky. It's the only FDA-approved product for preventing or reducing the severity of rashes from poison ivy, oak, or sumac. The over the counter lotion contains bentoquatam, a substance that forms a clay-like coating on the skin.

If you come into contact with poison ivy, oak, or sumac, wash the skin in cool water as soon as possible to prevent the spread of urushiol. If you get a rash, oatmeal baths and calamine lotion can dry up blisters and bring relief from itching. Treatment may include over the counter or prescription corticosteroids and antihistamines.

Copied in part from an article by Michelle Meadows

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