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      Title: An Analysis of Public Sunscreen Distribution in the United States During the COVID-19
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      Pandemic
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 To the Editor: The COVID-19 pandemic may have significantly affected consumer preferences and societal behavior regarding sun protection and skin cancer. We present a pandemic-era follow-up to previous research in the Journal of the American Academy of Dermatology<sup>1</sup> on public-use sunscreen from IMPACT Melanoma, a prominent nationwide sunscreen distributor and nonprofit organization for skin cancer prevention/education

IMPACT Melanoma's 2020-2021 distribution records were retrospectively analyzed and compared to 2018-2019. Healthcare facilities, public health departments, governmental organizations, parks/recreation centers, educational institutions, nonprofits, and private businesses ordered both sunscreen dispensers and cases of different sunscreen types for public use (**Table 1**). Every sector showed decreases in overall orders of sunscreen dispensers (-58%) and cases of sunscreen (-68%). Total parks/recreation and nonprofit organization orders (the most common in 2018-2019) decreased in 2020-2021 by 78% and 42%, respectively. Despite nationwide supply chain disruptions, sunscreen remained available for distribution, with hybrid sunscreen most frequently ordered (no chemical and physical sunscreens were ordered in 2020-2021, perhaps due to their growing unpopularity as discussed previously by Eason et al<sup>1</sup>). Total hybrid sunscreen orders grew by 41%, driven primarily by hospitals, which also ordered more sunscreen dispensers and ike y experienced increased volume at facilities and outreach events (e.g. vaccination drives) during COVID-19. In total, Wyoming, Maine, South Dakota, and Massachusetts received the most dispensers and sunscreen by state population in 2020-2021 (**Figure 1**).

With social distancing, mask mandates, stay-at-home orders, and popularity of outdoor activities in flux, it remains unclear how COVID-19 has affected cumulative ultraviolet (UV) exposure. However, reduced public access to sunscreen is concerning, and corroborates broader pandemic patterns of falling retail consumer sunscreen sales.<sup>2</sup> Furthermore, declining Google search volumes for sunburns<sup>3</sup> and precancerous/cancerous UV exposure-related dermatologic conditions<sup>4</sup> could suggest waning consumer interest in sun protection and consequent sun damage, as well as decreased public perception of UV exposure risk. Required mask-wearing in public settings may contribute to reduced sunscreen use, as combining masks with sunscreens can cause skin irritation, pruritus, and occlusion.<sup>5</sup> Additionally, some may equate mask use to sufficient sun protection, although masks confer unknown and variable UV protection.

Further research should directly investigate changes in individuals' sunscreen application behaviors. While limited by our 2-year periods of organizational distribution analysis, our

findings highlight worrisome trends that may be suggestive of increased sun-damage risk, and warrant additional investigation. Consumer research has suggested that the pandemic has eroded consumer attitudes around sun protection, and a large fraction now only use sunscreen on an asneeded basis (e.g. long beach vacations or special occasions). Dermatologists can encourage greater awareness about sun protection for everyday outdoor experiences, indoors, and during colder months, regardless of COVID-19-induced changes and mask-wearing. IMPACT Melanoma's touch-free automated sunscreen dispensers and extensive virtual/online outreach programs will be advantageous. Even so, melanoma rates continue to rise and the pandemic's long-term effects are yet to be seen. As sunscreen application and UV exposure data becomes available in the near future, further examination of UV-associated skin cancer by state or region may be useful in informing outreach efforts and policy.

Table 1: Comparisons of Sunscreen and Dispenser Distribution Records from IMPACT Melanoma between 2018-2019 and 2020-2021 by Purchasing Organization Type.

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			Physical*	Chemical**	Hybrid***	All	
Organization		Sunscreen	Sunscreen	Sunscreen	Sunscreen	Sunscreen	
Type	Year	Dispensers	(Cases^)	(Cases)	(Cases)	(Cases)	All Items
Total _	2018-2019	890	208	874	316	1398	2288
	2020-2021	372	0	0	444	444	816
	% Change	-58	-100	-100	41	-68	-64
Healthcare^^ _	2018-2019	36	189	13	11	213	249
	2020-2021	96	0	0	142	142	238
	% Change	167	-100	-100	1191	-33	-4
Public Health Department -	2018-2019	131	2	59	101	162	293
	2020-2021	12	0	0	19	19	31
	% Change	-91	-100	-100	-81	-88	-89
Government _	2018-2019	68	11	42	10	63	131
	2020-2021	40	0	0	26	26	66
	% Change	-41	-100	-100	160	-59	-50
Parks & Recreation	2018-2019	316	0	399	30	429	745
	2020-2021	82	0	0	82	82	164
	% Change	-74	0	-100	173	-81	-78
School or - University -	2018-2019	48	3	17	14	34	82
	2020-2021	10	0	0	10	10	20
	% Change	-79	-100	-100	-29	-71	-76
Nonprofit – Organization –	2018-2019	165	0	110	86	196	361
	2020-2021	88	0	0	123	123	211
	% Change	<b>-47</b>	0	-100	43	-37	-42
Private Business	2018-2019	126	3	234	64	35	161
	2020-2021	44	0	0	42	35	79
	% Change	-65	-100	-100	-34	0	-51

Table 1 Notes:

110 Color Key: Lowest % Change

Highest % Change in 2020-2021 vs 2018-

111 2019

\* Physical (Mineral) Sunscreen: BrightGuard Natural Sunscreen (Active Ingredients: Titanium Dioxide 6% and Zinc Oxide 6%).

- 114 \*\* Chemical Sunscreen: Coppertone Sport Sunscreen (Active Ingredients: Avobenzone 3%, 115 Homosalate 8%, Octisalate 4.5%, and Octocrylene 6%). 116 \*\*\*
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- Hybrid Sunscreen: Hybrid Sport Sunscreen (Active Ingredients: Octyl Methoxycinnamate 118 7%, Titanium Dioxide 1.25%, Zinc Oxide 1.25%, and Octyl Salicylate 1.0%). 119
- ^ Case contains 4 individual 1-liter bags of sunscreen. 120
- ^^ Healthcare facilities included hospitals, clinics, nursing homes, and cancer centers. 121
  - Figure 1: Total Sunscreen Dispensers and Cases of Sunscreen Distributed by IMPACT Melanoma by State Per 1 Million Population in 2020-2021.
- 125 Figure 1 Note: State resident population based on United States Census Bureau 2020 data. 126
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