Sun Protection for Babies and Infants

Cancer Council Tasmania recommends that babies under 12 months are not exposed to direct sun whenever UV reaches 3 or above. A baby's skin is very sensitive and can burn easily. The greater the sun exposure received during childhood, the higher the risk of developing skin cancer in later life.

Be SunSmart

Check the SunSmart UV Alert in the weather section of the newspaper, as a smart phone app, from the Bureau of Meteorology or at www.cancertas.org.au to find out the UV level and times of the day when sun protection is needed.

Whenever the UV alert reaches 3 or above, use a combination of:

1. **Sun-protective clothing**
   - Cover as much of the baby's skin as possible with cool, loose-fitting clothes with a dense weave that have an ultraviolet protection factor (UPF). The higher UPF, the better the UV protection. For beach or pool, choose sun protective swimsuits with a UPF50+, a hat and sunglasses.
   - Alternatively children can wear shirts and shorts over traditional bathers. These fabrics may not provide as much protection when wet, but they will provide protection.

2. **Sunscreen**
   - Use clothing rather than sunscreen to cover your child’s skin, and apply sunscreen to the small areas of skin not covered such as the face, ears and back of hands. The Australian College of Dermatologists state sunscreen is safe to use on babies. Many brands also have formulations for babies or toddlers.
     - Use a SPF30+ broad-spectrum, water-resistant sunscreen. Apply 20 minutes before going outside and reapply every two hours.
     - Children with naturally very dark skin (skin types 5 and 6 – Fitzpatrick skin type chart) may not need to apply sunscreen. This is a decision for families to make. However, regardless of skin type, all children should wear a hat to protect their eyes.

3. **Wearing a hat**
   - Hats should shade the face, neck, eyes and ears and be made from a closely woven fabric.
     - For young babies, choose a fabric that will crumple easily when they put their head down.
     - Consider the hat’s size and comfort, the amount of shade it provides to the face, if it will obstruct vision, hearing or safety.
     - Hats that can be adjusted at the crown are best.
     - Caps and visors are NOT adequate, they leave the ears and back of the neck exposed.
4. **Seek shade**

If outdoors, babies should be kept in the full shade, make sure the shadow cast is dark. Shade does not provide 100% protection, UV can be reflected and scattered particularly from surfaces such as sand, water, concrete and glass. So it’s important to still wear a hat, protective clothing, sunscreen and sunglasses.

- In the car, hang a shade visor over the door window
- When buying a pram or stroller, check the hood can be moved to block the sun.

5. **Sunglasses**

If practical, slide on sunglasses. Sunglasses are available for children and babies. Check the swing tag for the Australian Standard number AS/NZS 1067:2003 (category 2, 3 or 4) and are close-fitting wrap-around style for greatest protection. Sunglasses sold as toys or fashion spectacles may not provide protection from UV radiation.

**Be a role model**

Slip, Slop, Slap, Seek and Slide to protect yourself, and model sun protective behaviours. Research shows that if adults use sun protection, children in their care are more likely to do the same.

**Vitamin D**

Babies initial stores of vitamin D come from their mothers, they are at risk of low vitamin D if their mother has low levels. Premature infants have low vitamin D stores. Breast milk is considered the best food for babies, but it does not usually contain much vitamin D. It is recommended that breast fed babies with risk factors for low vitamin D, be supplemented with daily vitamin D (eg in infant multivitamin drops) from birth to 12 months. Infant formula in Australia is fortified with vitamin D. If concerned about a baby’s vitamin D levels, speak with a doctor.

**Nappy rash**

Recommendations for nappy rash include exposing the inflamed area to the open air as much as possible, but not to the direct sun. Exposing a baby to direct or indirect sunlight can put them at high risk of sunburn and skin damage and should be avoided.

**Jaundice**

Neonatal jaundice generally only causes concerns in about 10% of infants. Treatment needs to be under medical supervision in a controlled environment. Exposing infants to direct sunlight is not an appropriate treatment and may cause sunburn and skin damage.

*This information is based on the Cancer Council Australia Position Statement*

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