THE FAMILY PHARMACIST

A QUICK READ FOR YOUR OTC NEED!

VOLUME 5, ISSUE 2

JULY, 2024

By Bob Jaeger, BS Pharm

SUMMERTIME PRECAUTIONS

Summer means more outdoor activity for all of us. And with the fun comes some things to think about to keep yourself and your family safe.

Bug Bites and Repellents. Biking, hiking, camping, and other outdoor activities invite those little critters we all love to hate. The ones that bite, sting, suck, and burrow into our skin, hair, and clothing. Prevention is key. Safety and effectiveness are the major concerns when choosing a bug repellent. That said, there are limited choices when it comes to what to apply to your body, clothing, and equipment to minimize the risk of infestation with summertime pests.

Bug repellents are applied to the skin. Read the labels to see what pests they repel (ticks, mosquitos, etc.). *DEET* is still the gold standard. Very effective and relatively safe, DEET has over 60 years of safety data. Rare toxicities are linked to improper use, such as accidental ingestion. DEET 10% to 30% is safe in pregnancy and down to infants 2 months of age. A product with 10% to 30% DEET (OFF! Deep Woods,® and many other brands) is adequate for protection. Higher concentrations of DEET may last longer but a product over 50% offers no additional protection.

Some people don't like the way DEET smells or feels. *Picaridin (icaridin)* is another repellent ingredient that is sold under various brand names (Sawyer,® Off!,® Avon®) and can be applied to the skin. It's odorless, not oily, and won't harm plastics or some fabrics like DEET can. Picaridin seems to work as well as DEET and can also be used in pregnancy and down to age 2 months. However, when used in children, stick to a maximum of 10%. Picaridin has also been reported to be less irritating to the skin than DEET.

Other effective repellents are oil of lemon eucalyptus (in Cutter® Lemon Eucalyptus), and IR3535® (as in Coleman SkinSmart®). The table below rates the effectiveness of natural bug repellents. Some products may not be well studied, only protect against mosquitos (but not ticks), aren't recommended in very small children, and might damage fabrics. Read labels carefully for which pests are covered and precautions.

Some products combine a sunscreen with a bug repellent. Avoid these because a sunscreen needs to be applied more often than a repellent. If you need both, apply the sunscreen first, and then the repellent. Reapply sunscreen as directed.

Stay away from repellent bracelets or ultrasonic devices to protect against mosquitos. They're not effective.

If you're a camper or hiker, you may also need to treat your gear. Apply the insecticide *permethrin* (as in Sawyer® Clothing, Gear, & Tent Trigger Spray, etc.) to fabrics, clothing, backpacks, tents, etc. Don't apply *permethrin* to your skin.

Drugs and Sun Sensitivity. Another summertime precaution involves drugs you may be taking. Warmer weather and sun exposure raise questions about photosensitizing meds. What should you look for, which medicines cause it, and how can you lower your risk of a bad reaction?

Photosensitivity reactions happen when ultraviolet light (from the sun) reacts with a medication you are taking. Some patients with certain diseases, like lupus or rosacea, are at higher risk. A photosensitivity reaction may look like an exaggerated sunburn. Doctors refer to this condition as a "phototoxic" reaction. These reactions to the sun that can occur when taking certain drugs can be dose-related, that is, it may depend on how much of the medication you are taking. A reaction can develop within minutes to hours of sunlight exposure.

Common suspects are antimicrobial drugs and cardiovascular medications. But even over-the-counter (OTC) drugs like Aleve® (*naproxen*) have been reported to be responsible.

To reduce the risk of a reaction, use protective clothing and a broad spectrum sunscreen (UVA and UVB protection). See *Suncreens* in the June 2021 issue of familypharmacist.org.

If you need to be in the sun, check with your pharmacist about which of the medicines you take that might cause a photosensitive reaction. If you're on one of the culprits, you can ask your doctor to stop or switch the drug, or to possibly lower the dose. If that's not possible, make sure you take preventive measures (sunscreens, etc.).

If you experience a photosensitive reaction what should you do? The following may help: 1) Apply cool compresses 2) use a locally applied cortisone cream or an oral antihistamine, depending on how severe your symptoms are, and 3) contact your doctor if an eczema like condition develops a day or two after light exposure and spreads beyond sun-exposed skin. This may be a more serious allergic reaction known as *photoallergy*. If you do develop a photosensitive reaction it may take weeks to months for the reaction to clear.

NATURAL PRODUCTS USED AS BUG REPELLENTS*	EFFECTIVENESS
Lemon eucalyptus oil (mosquitos), soybean oil (mosquitos)	Likely Effective
Citronella oil (mosquitos)	Possibly Effective
Vitamin B1 supplement (thiamin)	Ineffective
Andiroba oil (mosquitos), black cohosh (insects), calendula (mosquitos), cassia cinnamon (mosquitos), catnip (mosquitos), celery (mosquitos), clove (mosquitos), cocoa (insects), garlic mosquitos), graviola (insects), holy basil (insects), jojoba (mosquitos), lavender (insects), lemon balm (insects), lemon eucalyptus oil (ticks) neem oil (insects), oregano (insects), patchouli oil (mosquitos), pennyroyal (insects), peppermint (mosquitos), rue (insects), sesame (insects)	Insufficient Evidence to demonstrate effectiveness

**Table modified from NatMed Pro Database report ®2024 Therapeutic Research Center, Stockton, CA*

References on File

—End Of Document—