MOLES

Everyone has moles, sometimes 40 or more. Most people think of a mole as a dark brown spot, but moles have a wide range of appearance.

At one time, a mole in a certain spot on the cheek of a woman was considered fashionable. Some were even painted on. These were called “beauty marks.” However, not all moles are beautiful. They can be raised from the skin and very noticeable, they may contain dark hairs, or they may be dangerous.

Moles can appear anywhere on the skin, alone or in groups. They are usually brown in color and can be various sizes and shapes. The brown color is caused by melanocytes, special cells that produce the pigment melanin.

Moles probably are determined before a person is born. Most appear during the first 20 years of a person’s life, although some may not appear until later in life. Sun exposure increases the number of moles.

Each mole has its own growth pattern. At first, moles are flat and tan, pink, brown or black in color, like a freckle. Over time, they usually enlarge and some develop hairs. As the years pass, moles usually change slowly, becoming more raised and lighter in color. Some will not change at all. Most moles will slowly disappear, seeming to fade away. Others will become raised so far from the skin that they may develop a small “stalk” and eventually fall off or be rubbed off.

This is the typical life cycle of the common mole. These changes occur slowly since the life cycle of the average mole is about 50 years. Moles may darken with exposure to the sun. During the teen years, with birth control pills, and pregnancy moles often get darker and larger and new ones may appear.

Different types of moles:
Recent studies have shown that certain types of moles have a high-than-average risk of becoming cancerous. Some may develop into a form of skin cancer known as malignant melanoma. Sunburns increase the risk of melanoma. People with many more moles than average (greater than 100) are also more at risk for melanoma.

Moles are present at birth in about 1 in 100 people. They are called congenital nevi. These moles may be more likely to develop a melanoma than moles which appear after birth. When a congenital nevus is more than eight inches across, it poses greater risk for developing melanoma.

Moles known as dysplastic nevi or atypical moles are larger than average (usually larger than a pencil eraser) and irregular in shape. They tend to have uneven color with dark brown centers and lighter, sometimes reddish, uneven borders or black dots at the edge. These moles often run in families.

People with dysplastic nevi may have a greater-than-average chance of developing malignant melanoma. These people should be seen regularly by a dermatologist to check for any changes that might indicate skin cancer. They should also learn to do regular self-examination, looking for changes in the color, size, or shape of their moles or the appearance of new moles. They should also shield their moles from sun exposure using sunscreen and/or clothing.

Recognizing the early warning signs of malignant melanoma is important. Remember the ABCDs of melanoma when examining your moles.

A stands for asymmetry, when one half of the mole doesn’t match the other half.
B stands for border when the border or edges of the mole are ragged, blurred, or irregular.
C stands for color, when the color of a mole is not the same throughout or if it has shades of tan, brown, black, red, white, or blue.
D stands for diameter, when the diameter of a mole is larger than 6mm, about the size of a pencil eraser.
If a mole displays any of these signs, it should be checked promptly by a dermatologist. Many people have flat moles. It is important to remember that not all moles look alike. They may be skin colored or pink, light tan to brown, and even blue-black. They may be round or oval, or their shape may be slightly irregular. They may be flat or raised, large or small, with or without hairs, mottled or evenly colored. If the appearance of a mole worries you or if it changes suddenly in any way, you should consult a dermatologist.

**Other Pigmented Patches on the Skin**

If you look closely at your skin, you may notice darkened spots that are not moles. Freckles are the most common of these spots. Unlike moles, they are rarely larger than the size of a pea, although sometimes they may seem to be because they blend into one another. Sun exposure may make freckles darker or freckles may fade completely in the winter. While moles may appear anywhere on the skin, freckles ordinarily are limited to sun exposed areas such as the face, neck, and upper back. Blondes and redheads freckle most easily.

After middle age, a person may acquire other dark areas that are not moles. Brown, wart-like growths that appear on the face or trunk and look as if they have been stuck to the skin may be harmless growths called seborrheic keratoses.

Multiple small gray-brown spots that may appear on wrists, backs of the hands, forearms, and face could be actinic lentigines. These are also called “liver spots” or “age spots,” though they have nothing to do with liver or age. They are sunspots. Both actinic lentigines and seborrheic keratoses are easily diagnosed by your dermatologist and are not cancers.

**Treatment of Moles**

The majority of moles and other blemishes are benign (not cancer). They will never be a threat to the health of the person who has them. Spots or blemishes that warrant medical concern are those that do something out of the ordinary - those that act differently from other existing moles. This includes any spot that changes in size, shape, or color, or one that bleeds, itches, becomes painful, or first appears when a person is past twenty.

Occasionally, a mole may become a cancerous growth. Therefore, it is best to get medical advice if you notice a mole that does not follow the normal pattern. A dermatologist may be able to assure you that the mole is harmless. To accomplish this, he or she may study a sample of it under a microscope for an accurate diagnosis.

The dermatologist will remove the mole, or part of it, so that thin sections from the mole can be cut and examined under a microscope. This is a simple and harmless procedure. If the growth was only partially removed and it is found to be cancerous, then the entire lesion and an extra margin of safety will need to be removed.

A person may wish to get rid of moles that are in areas of trauma, where clothing can irritate them, or simply because they are unattractive. The most common methods of removal include numbing the spot and then shaving the mole off, or for some moles, cutting out the entire lesion and stitching the area closed.

Most procedures used to remove moles take only a short time and can be performed in a dermatologist’s office. Sometimes a mole will recur after it is removed. If a removed mole does begin to reappear, the patient should return to see the doctor.

**More About Moles**

Many people wonder if it is safe to shave over a mole. Medical studies show that irritation such as shaving will not cause a mole to become cancerous. A person might want to have moles in a frequently shaved area removed because they are irritating.

Some moles contain hairs, which a person may consider unattractive. The hairs can be clipped close to the skin’s surface, or removed permanently with electrolysis. Removal of the mole also removes the hair. Another way to make a mole less conspicuous is to disguise it with makeup. Cosmetics specifically designed to cover blemishes provide more complete coverage than do ordinary cosmetics.

Most moles cause no problems, but occasionally a mole may be unattractive, irritating, or changing. If you see any signs of change or want a mole removed for cosmetic reasons, consult your dermatologist.