SKIN CANCER

Skin cancer is the most prevalent of all cancers. It is estimated that more than one million Americans develop skin cancer every year.

Sun avoidance is the best defense against skin cancer.
Over exposure to sunlight (including tanning) is the main cause of skin cancer, especially when it results in sunburn and blistering. Other less important factors include: repeated medical and industrial x-ray exposure, scarring from diseases or burns, occupational exposure to such compounds as coal tar and arsenic, and family history. Fair-skinned people who sunburn easily are at particularly high risk for skin cancer.

Prevention means guarding the skin against the known causes of skin cancer. Since the sun’s ultraviolet rays are the main culprit, the most effective preventive method is sun avoidance.

- Seek shade between 10:00 a.m. and 4:00 p.m. when the ultraviolet rays are the most intense
- Wear light-colored, tightly-woven protective clothing, and wide-brimmed hats
- Apply sunscreens with SPF (Sun Protection Factor) of at least 15.

With a SPF 15 sunscreen applied properly, a fair-skin person who sunburns in 20 minuts can tolerate 15 times 20 minutes (300 minutes) without burning. However, the use of sunscreens should not be an excuse to spend extra time in the sun because other sunrays still go through the sunscreen, such as UVA or infrared, which can age the skin and damage the skin’s immune system. Begin early use of sun protection in childhood because it is estimated that 80 percent of lifetime sun exposure occurs before age 18. Children under 6 months of age should not have prolonged sun exposure, but if this occurs then a sunscreen should be used.

Precancerous Skin Conditions:
Actinic keratoses are small scaly spots most commonly found on the face, lower arms, and back of the hands in fair-skinned individuals who have had significant sun exposure. If not treated, some actinic keratoses may become skin cancers, requiring more extensive treatment. If diagnosed in the early stages, actinic keratoses can be removed by cryotherapy (freezing), by applying a cream or lotion form of chemotherapy, photodynamic therapy, chemical peeling, dermabrasion, laser surgery, or other dermatologic surgical procedures. Sunscreens help prevent actinic keratoses.

Cancerous Skin Conditions:

Basal Cell Carcinoma: This cancer usually appears as a small, fleshy bump or nodule - most often on the head, neck, and hands. Occasionally these cancers may appear on the trunk as red patches. Basal cell carcinomas seldom occur in African Americans, but they are the most common skin cancers found in fair-skinned persons. People who have this cancer often have light-colored eyes, hair and complexions, and do not tan easily. These tumors do not spread or grow quickly. It can take many months or years for one to grow to a diameter of one-half inch. Untreated, the cancer will begin to bleed, crust over, heal, and then the cycle repeats.

Although this type of cancer rarely metastasizes (spreads to other parts of the body), it can extend below and beyond the skin, even into the bone and cause considerable local damage.

Squamous Cell Carcinoma: This skin cancer may appear as a bump, or as a red, scaly patch. Squamous cell carcinoma is the second most common skin cancer found in fair-skinned persons. Typically it is found on the rim of the ear, the face, the lips, and mouth. It is rarely found in dark-skinned persons. This cancer can develop into large masses. Unlike basal cell carcinoma, it can metastasize. When found early, and treated properly, the cure rate by dermatologic surgery for both basal cell and squamous cell carcinoma is 95 percent.
Malignant Melanoma: It is projected that this most deadly of all skin cancers will develop on the skin of 44,000 Americans annually. Every year, an estimated 7,300 Americans will die from melanoma. It is important to note that the death rate is at last declining because patients are seeking help earlier. Like the less aggressive skin cancers, basal cell and squamous cell carcinomas, melanoma is almost always curable when detected in its early stages.

Melanoma has its beginnings in melanocytes, the skin cells that produce the dark, protective pigment called melanin. It is melanin that makes the skin tan, acting as partial protection against sun. Melanoma cells usually continue to produce melanin, which accounts for the cancers appearing in mixed shades of tan, brown, and black. Melanoma can also be red or white. Melanoma tends to spread, making treatment essential and urgent.

Melanoma may suddenly appear without warning, but it may also begin in, or near a mole, or another dark spot in the skin. It is important to know the location and appearance of the moles on our bodies so any change will be noticed. The most important step you can take is to have a changing mole examined by a dermatologist so that any early melanoma can be removed while still in the curable stage.

Excessive sun exposure, particularly sunburn, is the most important preventable cause of melanoma, especially among light-skinned individuals. Heredity also plays a part since a person has an increased chance of developing melanoma if a family member has had melanoma. Atypical moles (dysplastic nevi), which may run in families, and a high number of moles, can serve as markers for people at higher risk for developing melanoma.

Dark brown or black skin is not a guarantee against melanoma. Dark-skinned people can develop melanoma, especially on the palms of the hands, soles of the feet, under nails, or in the mouth. Warning signs of melanoma include: changes in the surface of a mole; scaliness, oozing, bleeding, or the appearance of a new bump; spread of pigment from the border into surrounding skin; and change in sensation including itchiness, tenderness, or pain.

How Skin Cancer is Treated
If a skin biopsy reveals that an area of the skin is cancerous, the dermatologist has an array of surgical procedures to treat the cancer depending on the needs of the individual patient. Early detection and removal offer the best chance for a cure.

Dermatologists recommend that one helpful way to discover early skin cancers is to do periodic self-examination. Get familiar with your skin and your own pattern of moles, freckles, and “beauty marks.” Watch for changes in the number, size, shape, and color of pigmented areas. Call your dermatologist if any changes are noted.

Recognizing the Early Warning Signs of Malignant Melanoma
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.