### Dying to know: What you need to know about Skin Cancer

By Dr. Benjamin Barankin and Dr. Anatoli Freiman

kin cancer is the most prevalent of all types of human cancers. Early detection is the surest way to a cure. Check out the following information to learn about the different skin cancers, what you can do to avoid them, and what treatments are available.

### Actinic keratosis (AK): A "pre-cancer"

AK is considered the earliest stage in the development of skin cancer. Keratoses are small



red or skin-coloured rough spots most commonly found on the face,

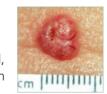
## Did you know?

Other notable risk factors for skin cancers are repeated X-ray exposure (whether medical or industrial), scarring from diseases or burns, occupational exposure to arsenic and high amounts of coal tar. ears, neck, lower arms, and back of the hands in fair-skinned individuals. AK can be treated by liquid nitrogen cryotherapy (freezing), topical chemotherapy (a cream), chemical peeling, laser surgery, curettage or excision, and photodynamic therapy (a chemical and a light source). AK can be prevented even after extensive sun damage. Therefore, it's never too late to be sun safe.

### Basal cell carcinoma (BCC)

BCC, the most common type of skin cancer, appears frequently on the head or neck as a small, fleshy bump. Other parts of the body may be affected as well. These carcinomas are frequently found in fair-skinned

people and rarely occur in dark skin. They are fairly slow growing. Untreated, the cancerous lesion often will begin to



bleed, crust over and heal, in a repeating cycle. This type of cancer very rarely metastasizes (spreads), but should be treated since it can destroy the skin around it, and can extend below the skin to the bone and nerves. When found early and treated properly, the cure rate for BCC is over 95 per cent.

### Squamous cell carcinoma (SCC)

SCC is the second most common skin cancer; it is primarily found in fair-skinned people and rarely in dark-skinned individ-



uals. Typically located on the rim of the ear, and on the face, lips and mouth, this cancer may appear as a bump or as a red, scaly patch. In many cases, the precursor lesion to an SCC is believed to be an actinic keratosis. SCC can develop into large masses and become invasive. Unlike BCC, this form of cancer can metastasize; therefore, it is important to get early treatment. If found early and treated properly, the cure rate for SCC is over 95 per cent.

### Malignant melanoma (MM): The deadliest skin cancer

Although a serious skin disease, melanoma can be curable if detected

in its early stages. MM begins in melanocytes, skin cells that produce the dark protective pigment called melanin (which



makes the skin tan). Since MM cells usually continue to produce melanin, the cancer appears in mixed shades of

# **Geproactive** and develop a regular routine to **inspect your body** for any **skin changes.**

tan, brown and black, although it can also be red or white. MM can metastasize (spread), making early treatment critical. MM may appear suddenly, or begin in or near a mole or other dark spot. Keep track of moles on the body in order to notice any changes early. A dermatologist must examine any changing mole, and can remove early melanomas while they are still in the curable stage.

Excessive sun exposure or tanning salon use are the most important preventable cause of MM. Light-skinned, light-eyed, fair-haired, freckled individuals are at particular risk. Heredity also plays a part. Atypical/irregularlyshaped moles (which may run in families) or the presence of a large number of moles can serve as markers for people who are at increased risk for developing MM. People with skin of colour can also develop MM, especially on the palms, soles, under the nails, in the mouth or on the genitalia.

### **Treatment of skin cancer**

If a patient's skin biopsy reveals cancer, generally the dermatologist will remove the cancerous cells, choosing from an array of medical and surgical procedures depending on the type of cancer, its location, and the needs of the individual. Therapies may include specialized surgeries, topical treatments, radiation therapies and, for life-threatening melanomas, referral to oncologists who work with traditional and newer targeted treatments to address the often aggressive progression of the disease. For patients diagnosed with later stages of malignant melanoma, new drugs are available that may prolong life, and clinical research trials should also be considered.

### **Early detection**

Be proactive and develop a regular routine to inspect your body for any skin changes. If a growth, mole or skin discoloration appears suddenly, or begins to change, see a dermatologist. It is also wise to have an annual skin examination by a dermatologist, especially for adults who have a number of moles, significant past sun exposure or tanning salons use, or a family history of skin cancer.

### The best defence: Sun avoidance

Overexposure to ultraviolet light is the main cause of skin cancer. Seek shade between 11 a.m. and 4 p.m. Wear protective clothing, a wide-brimmed hat and sunglasses. Use a sunscreen with both UVA and UVB protection, and SPF of 30 or more. Finally, remember that prevention and early detection are key!

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### Warning signs of melanoma

- Changes in the surface of a mole
- Scaling, oozing, bleeding or the appearance of a new bump
- Spread of pigment from the border of a mole into surrounding skin
- Change in sensation including itchiness, tenderness or pain
- Stripes or spots on nails that come on without explanation

The ABCDEs of melanoma

When to worry about moles

### Asymmetry:



One half doesn't match the other half in size, shape, colour or thickness.

### **B**order irregularity:



The edges are ragged, scalloped or poorly defined.

### Colour:



The pigmentation is not uniform. Shades of tan, brown and especially black are present. Dashes of red, white and blue can add to a mottled appearance.

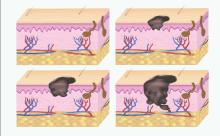
### Diameter: While



melanomas are usually greater than six millimeters (the size of a pencil eraser), they can be smaller. See your dermatologist if a mole is different from others, itches or bleeds.

Above images are courtesy of the Canadian Dermatology Association.

**Evolution:** The most important warning sign is an evolution or change in a mole.



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