

# Skin Cancer

An educational service of CME Resource

## Ask Your Patients ...

"Do you know how to check for skin cancer?"

## If Your Patient Asks ...

"How can I avoid skin cancer?"

## UNDERSTAND the problem

Skin cancer is the **most common** form of cancer in the United States<sup>1</sup>. Of the three most common forms of skin cancer, basal cell and squamous cell carcinoma are **highly curable**. More than one million of these nonmelanoma cancers occur each year<sup>2</sup>. However, the third most common form of skin cancer, **melanoma**, carries a high risk for **morbidity and mortality**, particularly among younger patients<sup>1</sup>. In the United States, an estimated **11,200 deaths** in 2008 were the result of melanoma and other nonepithelial skin cancers<sup>2</sup>.

Because **lifestyle behaviors** contribute significantly to the development of skin cancers, better patient education can help **prevent** these lesions. Early treatment is integral to cure, making it essential for patients to understand the importance of **self-examination** and routine follow-up. Primary care providers also should enhance their abilities to **detect skin cancer**.<sup>3; 4</sup>

## WHO is at risk

Risk factors for the development of nonmelanoma and melanoma skin cancers differ. The most significant factor associated with the development of basal cell carcinoma and squamous cell carcinoma is exposure to the sun, most specifically UV-A and UV-B rays. Unlike nonmelanomas, the influence of the sun in the development of melanoma has been debated.

### Nonmelanoma

Several factors have been associated with an increased risk for basal cell carcinoma and squamous cell carcinoma, including:<sup>5; 6</sup>

- Fair complexion
- Light-colored eyes (blue, green, or gray)
- Blond or red hair
- Tendency to burn or freckle with exposure to the sun
- Family history of skin cancer
- Weakened immune system
- Exposure to arsenic, coal tar, paraffin, or ionizing radiation
- Human papillomavirus (types 16 and 18)

## Skin Cancer

### WHO is at risk (*Continued*)

#### Melanoma

The factors associated with an increased risk of melanoma include:<sup>7</sup>

- A persistently changed or changing mole
- Adulthood
- Irregular varieties of pigmented lesions or congenital mole
- White race
- A personal or family history of melanoma
- Immunosuppression
- Sun sensitivity
- Excessive sun exposure

### WHAT to look for

The early detection and diagnosis of skin cancers, especially melanomas, is critical for selecting the appropriate treatment approach and an optimum outcome.

The classic appearance of basal cell carcinoma is a pearly, waxy, or translucent papule or nodule with small telangiectatic vessels on its surface; this is the nodular type. Superficial basal cell carcinomas are thinner than nodular lesions and often appear as scaly, shiny gray-to-erythematous patches or plaques that may slowly enlarge.

Squamous cell carcinoma usually presents as an ulcerated erythematous nodule, scaling patch, or superficial erosion on the skin or lower lip. However, the clinical features of this nonmelanoma vary widely.

The ABCDE rule was developed to help distinguish melanomas from benign lesions.<sup>8</sup> According to this system, each letter represents a quality to assess in a suspected lesion (Asymmetry, Border irregularity, Color, Diameter, Evolving size, shape, surface, shades of color, or symptoms). This system has a sensitivity of about 65% to 80%.

Melanomas usually develop in areas of the body that are most exposed to the sun. However, in dark-skinned individuals, melanoma most often develops on non-sun-exposed areas, such as the foot and the mucous membranes.

### HOW to prevent skin cancer

Because of the strong relationship between chronic sun exposure and skin cancers, protection from UV rays can substantially decrease the prevalence of skin cancers. Education is key to helping patients understand the risks of sun exposure and the ways to reduce these risks. Efforts to educate patients regarding protection from UV rays should include the following recommendations:

- Choose a sunscreen that has a sun protection factor (SPF) of at least 15
- Select a sunscreen that protects against both UV-A and UV-B rays
- Expand the use of sunscreen beyond the summer
- Wear protective clothing
- Wear sunglasses that protect against UV rays
- Avoid the sun during its highest intensity (10 AM to 4 PM)
- Avoid tanning beds and tanning salons

Clinicians should also emphasize the importance of self-examinations and examinations of family members and the need to monitor existing moles for changes.

### WHERE to find resources

**National Cancer Institute**

<http://cancer.net.nci.nih.gov/cancertopics/types/skin>

**The Melanoma Foundation**

<http://www.melanomafoundation.com.au>

**The Skin Cancer Foundation**

<http://www.skincancer.org>

(212) 725-5176

**American Cancer Society**

<http://www.cancer.org>

**American Academy of Dermatology**

<http://www.aad.org>

- 1 Centers for Disease Control and Prevention. Skin Cancer: Basic Information. Available at [http://www.cdc.gov/cancer/skin/basic\\_info](http://www.cdc.gov/cancer/skin/basic_info). Last accessed June 12, 2009.
- 2 American Cancer Society. *Cancer Facts and Figures 2008*. Atlanta, GA: American Cancer Society; 2008.
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- 7 Rhodes AR, et al. Risk factors for cutaneous melanoma: a practical method of recognizing predisposed individuals. *JAMA*. 1987;258(21): 3146-3154.
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