

Skin Cancer

Skin cancer is the most common form of cancer in the United States. More than 550,000 new cases are reported each year and the incidence is rising faster than any other type of cancer. While skin cancers can be found on any part of the body, about 80 percent appear on the face, head, neck or back where they can be disfiguring as well as dangerous.

The primary cause of skin cancer is ultraviolet radiation most often from the sun, but also from artificial sources like tanning booths. In fact, researchers believe that our quest for the perfect tan, an increase in outdoor activities, and the thinning of the earth's protective ozone layer are behind the alarming rise we're now seeing in skin cancers.

Anyone can get skin cancer-no matter what your skin type, race or age, no matter where you live or what you do. But your risk is greater if...

- Your skin is fair and freckles easily.
- You have light-colored hair and eyes.
- You have a large number of moles, or moles of unusual size or shape.
- You have a family history of skin cancer or a personal history of blistering sunburn.
- You spend a lot of time working or playing outdoors directly in the sun without protection.
- You live closer to the equator, at a higher altitude, or in any place that gets intense, year-round sunshine.
- You received therapeutic radiation treatments for adolescent acne.

By far the most common type of skin cancer is basal cell carcinoma. Fortunately, it's also the least dangerous kind. It tends to grow slowly, and rarely spreads beyond its original site. Though basal cell carcinoma is seldom life-threatening, if left untreated it can grow deep beneath the skin and into the underlying tissue and bone, causing serious damage and disfigurement. Squamous cell carcinoma is the next most common kind of skin cancer, frequently appearing on the lips, face, or ears. It sometimes spreads to distant sites, including lymph nodes and internal organs. Squamous cell carcinoma can become life threatening if it's not treated and should not be ignored. A third form of skin cancer, malignant melanoma, is the least common, but its incidence is increasing rapidly, especially in the Sunbelt states. Malignant melanoma is the most dangerous type of skin cancer. Also, it is one of the most dangerous cancers known to the human race. If discovered early enough, it can be completely cured. If it's not treated quickly, however, malignant melanoma may spread throughout the body and is often deadly. Make sure you seek evaluation for these conditions by someone who treats skin cancers on a regular basis like your plastic surgeon. Skin cancer surgery represents the most common reconstructive surgical procedures performed by plastic surgeons.

Malignant melanoma is usually signaled by a change in the size, shape, contouring or color of an existing mole, or as a new growth on normal skin. Watch for the "ABCDE" warning signs of melanoma:

-Asymmetry - a growth with unmatched halves

-Border irregularity - ragged or blurred edges

-Color - a mottled appearance, with shades of tan, brown, and black, sometimes mixed with red, white, or blue

-Diameter — a growth more than 6 millimeters across (about the size of a pencil eraser), or any unusual increase in size.

E- seek evaluation by a specialist that deals with skin cancer on a regular basis and is familiar with current techniques of treatment of these cancers.

If all these variables sound confusing, the most important thing to remember is this:

Get to know your skin and examine it regularly, from the top of your head to the soles of your feet. (Don't forget your back.) If you notice any unusual changes on any part of your body, have a plastic surgeon check it out.

Two other common types of skin growths are moles and keratoses. Moles are clusters of heavily pigmented skin cells, either flat or raised above the skin surface. While most pose no danger, some-particularly large moles present at birth, or those with mottled colors and poorly defined borders-may develop into malignant melanoma and should be removed. Moles are frequently removed for cosmetic reasons. Solar or actinic keratoses are rough, red or brown, scaly patches on the skin. They are usually found on areas exposed to the sun, and sometimes develop into skin cancer. Often they are ablated by cryotherapy or topical agents like 5-FU.

Skin cancer is diagnosed by removing all or part of the growth and examining its cells under a microscope often called a biopsy. It can be treated by a number of methods, depending on the type of cancer, its stage of growth, and its location on your body. Most skin cancers are removed surgically, by a plastic surgeon or a dermatologist. If the cancer is small, the procedure can be done quickly and easily, in an outpatient facility or the physician's office, using local anesthesia. If the cancer is larger or in a critical area then surgery may be required were the margins of resection are determined at the time of the surgery. Other possible treatments for skin cancer include cryosurgery (freezing the cancer cells), radiation therapy (using x-rays), topical chemotherapy (anti-cancer drugs applied to the skin), and Mohs surgery, a special procedure in which the cancer is shaved off one layer at a time. Mohs surgery is performed only by specially trained physicians and often requires a reconstructive procedure as follow-up. By far the most common method of removing skin cancers involves removal with checking the margin of resection and closure with a skin graft or flap. Typically, this procedure is done under local anesthesia with some IV sedation.

All of the treatments mentioned above, when chosen carefully and appropriately, have good cure rates for most basal cell and squamous cell cancers You should discuss these choices with your plastic surgeon before beginning treatment. The different

techniques used in treating skin cancers can be life saving, but they may leave a patient with less than pleasing cosmetic or functional results. Depending on the location and severity of the cancer, the consequences may range from a small but unsightly scar to permanent changes in facial structures such as your nose, ear, or lip. In such cases, no matter who performs the initial treatment, the plastic surgeon can be an essential part of the treatment team to prevent permanent disfigurement.

After you've been treated for skin cancer, your plastic surgeon will often schedule regular follow-up visits to make sure the cancer hasn't recurred and you are not developing new lesions. Your physician, however, can't prevent a recurrence. It's up to you to reduce your risks by changing old habits and developing new ones.

- Avoid prolonged exposure to the sun, especially between 10 a.m. and 2 p.m. and during the summer months. Remember, ultraviolet rays pass right through water and clouds, and reflect off sand and snow.
- When you do go out for an extended period of time, wear protective clothing such as wide brimmed hats and long sleeves.
- On any exposed skin, use a sunscreen with an SPF (sun protection factor) of at least 15. Reapply it frequently, especially after you've been swimming or sweating.
- Finally, examine your skin regularly. If you find anything suspicious, consult a plastic surgeon or a dermatologist as soon as possible.