

May is Melanoma/Skin Cancer Detection and Prevention Month

It will not be too long before we begin to make plans for the summer. Many of these plans involve lengthy exposure to the sunlight at the beach, gardening, picnicking, or hiking. It is important to examine and protect your skin from prolonged exposure to the ultraviolet rays of the sun. The following is information on one type of skin cancer, signs and symptoms to look for as well as skin care.

Remember that the immunosuppressant drugs (the Prograf, Prednisone, Cellcept, Cyclosporine) places you at greater risk for developing cancers. It is very important that you use a sunscreen with a SPF of at least 15 during prolonged exposure to the sun. The higher the SPF the better.

What is melanoma?

Melanoma is the most serious form of skin cancer. It is the uncontrolled growth of pigment-producing tanning cells. Melanomas may appear suddenly without warning, or can develop from or near a mole. They are most often found on the upper backs of men and women or on the legs of women, but can occur anywhere on the body.

About 75 percent of all skin cancer deaths are from melanoma. If not detected early, melanoma spreads to internal organs and may result in death. If detected in the early stages, melanoma usually can be treated successfully.

What causes melanoma?

Prolonged exposure to the ultraviolet radiation of the **sun** is the most important **preventable** cause of melanoma. People living in the south are more likely to develop melanoma than those living in the north. Melanoma has also been linked to excessive sun exposure in the first 10 to 18 years of life. **Not all** melanomas are sun related – other possible causes include genetic factors and immune system deficiencies.

Who gets melanoma?

Anyone can develop melanoma, but Caucasians are ten times more likely to be diagnosed with melanoma than other races. Even so, certain individuals are more at risk than others. For example:

- Your chances increase significantly if you've already had one melanoma.
- You have a substantially increased risk of developing melanoma if you have many moles, large moles or atypical (unusual) moles.
- Your risk is increased if a blood relative, e.g., your parents, children, siblings, cousins, aunts, uncles, have had melanoma.

- If you are a Caucasian with fair skin, your risk is four times as great as a Caucasian with olive skin.
- Redheads and blondes have a two-fold to four-fold increased risk of developing melanoma. Blue or green eyes also increase your risk of developing melanoma.
- Five or more sunburns double your risk of developing skin cancer.

What are atypical moles?

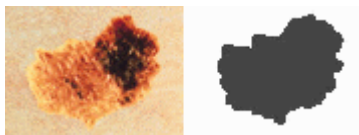
Most people have moles (also known as nevi). Atypical moles are unusual and are generally larger than normal moles, variable in color, often have irregular borders and may be more numerous than regular moles. They occur most often on the back but can occur on the chest, abdomen and legs in women. They may occur anywhere. Multiple atypical moles may indicate a greater risk of melanoma developing either in a mole or on apparently normal skin.

What does melanoma look like?

Observing the skin is the best way to detect early melanoma. Melanoma generally begins as a mottled, light brown to black flat blemish with irregular borders. The blemish is usually at least one-quarter inch in size. It may turn shades of red, blue or white, crust on the surface and bleed. A changing mole, a new mole, or a mole that is different or "ugly" or begins to grow requires prompt medical attention.

If you notice a mole on your skin, you should follow the simple ABCD rule which outlines the warning signs of melanoma:

- **A**symmetry – One half does not match the other half.



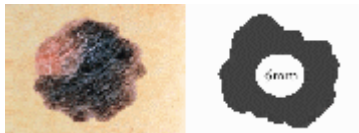
- **B**order irregularity – The edges are ragged, notched or blurred.



- **Color** – The pigmentation is not uniform. Shades of tan, brown or black are present. Dashes of red, white, and blue add to the mottled appearance.



- **Diameter** – While melanomas are usually greater than 6mm in diameter when diagnosed, they can be smaller. If you notice a mole different from others, or which **changes**, itches or bleeds even if it is smaller than 6mm, you should see a dermatologist



- The American Academy of Dermatology urges everyone to examine the entire skin on your body regularly. This includes your back, your scalp, the soles of your feet, between your toes and the palms of your hands. **If there are any changes in the size, color, shape or texture of a mole, the development of a new mole, or any other unusual changes in the skin, see your dermatologist immediately.**

Can melanoma be cured?

When detected early, melanoma is highly curable. The average five-year survival rate for individuals with melanoma is 91 percent. For localized melanoma, melanoma that has not spread beyond the outer layers of the skin at the time of detection, the average five-year survival rate is 98 percent. Approximately 83 percent of melanomas are diagnosed at a localized stage.*

With early detection, surgical removal of thin melanomas can cure the condition in most cases. Early detection is **essential**; there is a direct correlation between the thickness of the melanoma and survival rate. Patients with risk factors should have a complete skin examination by a dermatologist annually. Anyone with a changing, suspicious or unusual mole or blemish should be examined immediately.

Can melanoma be prevented?

Overexposure to ultraviolet light is thought to be a primary cause of many melanomas. Dermatologists recommend the following precautions:

- Avoid "peak" sunlight hours -- 10 a.m. until 4 p.m. -- when the sun's rays are the strongest.
- Seek shade whenever possible. Remember "**No shadow...seek the shade!**" If your shadow is shorter than you are, the damaging rays of the sun are at their strongest and you're likely to sunburn.
- Wear protective clothing, including a wide-brimmed hat, sunglasses and long-sleeved shirt and pants during prolonged periods of sun exposure.
- Apply a broad spectrum sunscreen with a Sun Protection Factor (SPF) of 15 or higher, 15 - 30 minutes before going outdoors and reapply every two hours, especially when playing, gardening, swimming or doing any other outdoor activities. Sunscreens should not be used to increase the time spent in intense sunlight or instead of protective clothing.

*Source: American Cancer Society's 2005 Facts & Figures