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May is “Skin Cancer Detection and Prevention Month”

Pocatello, ID (May 13, 2009) Before you bare your unprotected skin to those warm spring rays, consider this... **skin cancer is the most common form of cancer in the United States.** According to the American Cancer Society, more than 1 million skin cancers are diagnosed annually. The most deadly type of skin cancer is melanoma. Between 2002 and 2006, there were 218 deaths in Idaho from melanoma and 1,588 cases of invasive melanoma.

The American Cancer Society recommends skin examinations by your dermatologist or primary care physician every three years for those aged 20 to 39 and annually after age 40 as part of a periodic check-up.

Portneuf Cancer Center believes that early detection and prevention are keys to reducing the rate of skin cancer. Portneuf Cancer Center’s Nurse Practitioner, Carol Milder is also a Certified Oncology Nurse. Carol wrote the attached article as a public service to better inform our community about the dangers of skin cancer. A Nurse Practitioner and educator for over ten years, she enjoys her varied work environment, serving as a researcher, consultant, and advocate in addressing the needs of cancer patients, along with those of their families.

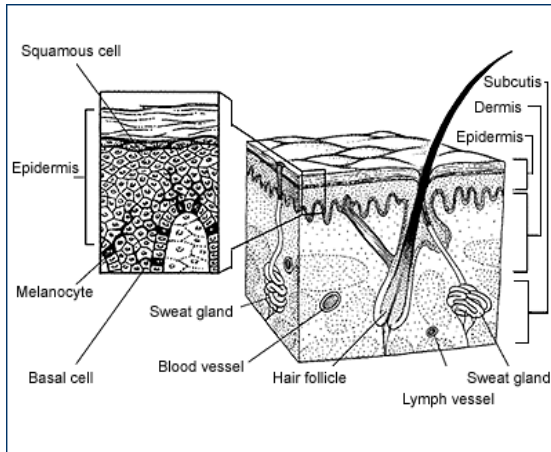
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“Protect the Skin You’re in” from Melanoma

By Carol Milder NP, MSN, OCN

What is Melanoma:

Melanoma is the most serious form of skin cancer. It begins when color-producing skin cells called melanocytes become abnormal, grow uncontrollably, and eventually form a tumor. It can develop from or near a mole, in the eye, under nail beds, or it can appear in an area similar to surrounding skin. Frequently found on the backs of men and women and on women’s lower legs, melanoma can also develop in skin that has never been exposed to sunlight. (American Society of Clinical Oncology-ASCO- 2009).



Picture courtesy of American Cancer Society

Incidence/Risk Factors:

The incidence of melanoma has more than tripled in the US over the past 20 years. In 2008 there were over 60,000 invasive melanomas diagnosed in this country and 8400 lives were taken from the (potentially) deadly disease. It is the sixth most common cancer in Americans and the most common fatal malignancy among young adults. (Investigative Dermatology Symposium 1999; 4:97; MMWR Morbidity and Mortality Weekly Publication 1992: 41:20). Individuals who have had five or more severe (blistering) sunburns in childhood or adolescence have approximately twice the risk of developing melanoma. Other risk factors include: light skinned/light haired persons who suntan poorly or burn easily, those with a family history of melanoma, large numbers of nevi (moles), unusual nevi, and excessive UV-A and UV-B radiation exposure. (Environmental Health Perspective, 1993:101; 252; JAMA 1987; 258:3146).

American Cancer Society Recommendations:

Because of the recent increase in incidence of melanoma and benefits of its early detection, the ACS promotes increased screening and education targeted to patients and the public most at risk of the disease. The American Cancer Society recommends that all adults receive at least a baseline total body skin cancer screening examination from a clinician, with subsequent skin examinations at the clinician’s discretion as determined by risk status (ACS 2009).

Screening:

The screening examination (a visual inspection by a qualified practitioner) for melanoma takes only a few minutes. It is safe, acceptable to the public, regarded by many as reliable in diagnostic situations, and can uncover melanomas in areas not easily viewed by the patient himself. A focus on skin lesions that are irregular in shape and reported by the patient to have recently changed is important (Arch Dermatology 2005; 141:434).

What's a "Normal Mole"?

It's important to know the difference between melanoma and a harmless mole. A normal mole is most often an evenly colored brown, tan, or black spot on the skin. It can be either flat or raised. It can be round or oval. Moles are usually less than 1/4 inch across, or about the width of a pencil eraser. Moles can be present at birth or they can appear later. Several moles can appear at the same time.

What to Look For:

Most people have moles, and almost all moles are harmless. But it is important to recognize changes in a mole -- such as its size, shape, or color -- that suggest a melanoma may be developing. The "ABCD rule" is an easy guide to the usual signs of melanoma. Be on the lookout and tell your clinician about any spots that match the following description:

A is for ASYMMETRY: One half of a mole or birthmark does not match the other.

B is for BORDER: The edges are irregular, ragged, notched, or blurred.

C is for COLOR: The color is not the same all over and may include shades of brown or black, or sometimes with patches of pink, red, white, or blue.

D is for DIAMETER: The spot is larger than 6 millimeters across (about ¼ inch -- the size of a pencil eraser), although melanomas can sometimes be smaller than this.

Another very important sign of possible melanoma is a change in the size, shape, or color of a mole or the appearance of a new spot. Some melanomas do not fit the ABCD rule described above, so it is very important to tell your clinician about any changes in skin markings or new spots on your skin.

Other warning signs are:

- a sore that does not heal
- spread of pigment from the border of a spot to surrounding skin
- redness or a new swelling beyond the border
- change in sensation -- itchiness, tenderness, or pain
- change in the surface of a mole -- scalliness, oozing, bleeding, or the appearance of a bump or nodule
- a mole that looks very different from your other moles

Prevention:

Not all melanomas can be prevented, but there are ways to reduce your risk.

Limit Ultraviolet Exposure:

The most important way to lower your risk of melanoma is to protect yourself from exposure to ultraviolet radiation (direct/indirect sun light and or tanning beds/sun lamps). "**Slip! Slop! Slap! and Wrap**" is a catch phrase that reminds people of the 4 key methods they can use to protect themselves from UV radiation. **Slip on a shirt, slop on sunscreen, slap on a hat, and wrap on sunglasses** to protect the eyes and sensitive skin around them from ultraviolet light.

Avoid Other Sources of UV Light

Using tanning beds and sun lamps is hazardous because the UV radiation they deliver can be damaging to the skin. This is an area of active research.

Researchers are finding that the rate of skin cancer in young people is increasing. One factor may be the use of indoor tanning facilities. Most skin doctors highly recommend not using tanning beds and sun lamps.

Use Sun Screen:

The American Cancer Society recommends using sunscreen as part of an overall sun protection program. (ACS, 2008).

Use sunscreens and lip balms with an SPF factor of 15 or more on areas of skin exposed to the sun, especially when the sunlight is strong (for example, in hot or high-altitude locations or between the hours of 10 am and 4 pm). Use sunscreen even on hazy days or days with light or broken cloud cover because the UV light still comes through.

Always follow directions when applying sunscreen. For it to work best, sunscreen should be applied about 20 to 30 minutes before you go outside. A 1-ounce application (a palmful of sunscreen) is recommended to cover the arms, legs, neck and face of the average adult. Protection is greatest when sunscreen is used thickly on all sun-exposed skin. To ensure continued protection, many sunscreens should be reapplied at least every 2 hours. Sunscreens can wash off when you sweat or swim and must be reapplied for maximum effectiveness. And don't forget your lips; lip balm with sunscreen is also available.

Wear a Hat

A hat with at least a 2- to 3-inch brim all around is ideal because it protects areas often exposed to the sun, such as the neck, ears, eyes, forehead, nose, and scalp. A shade cap (which looks like a baseball cap with about 7 inches of fabric draping down the sides and back) is also good. These are often sold in sports and outdoor supply stores.

In addition to the American Cancer Society, other sources of information and support on melanoma include:

American Academy of Dermatology
Toll-free number: 1-888-462-3376 (1-888-462-DERM)
Web site: www.aad.org

National Cancer Institute
Toll-free number: 1-800-422-6237 (1-800-4-cancer); TTY: 1-800-332-8615
Web site: www.cancer.gov

Skin Cancer Foundation
Toll-free number: 1-800-754-6490 (1-800-SKIN-490)
Web site: www.skincancer.org

