

Skin Cancer

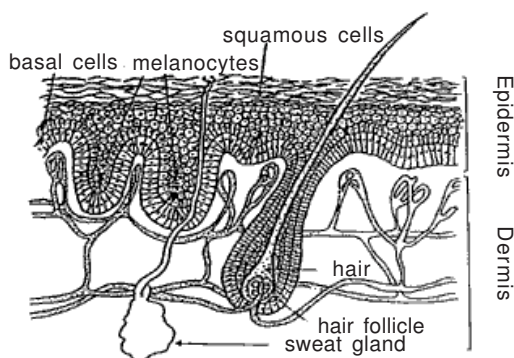
Skin cancer is the most common form of cancer in Australia affecting all age groups from adolescents upwards. Each year over 430,000 Australians are diagnosed with skin cancer and over 1,700 Australians die from the disease each year. One out of two Australians will develop a skin cancer in their lifetime usually a basal cell carcinoma.

The Skin

The skin is the largest organ of the body. It has several important functions. It acts as a protective layer against injury and disease and also regulates our body temperature and maintains its hydration.

The skin consists of three layers:

- the epidermis, or the outer layer
- the dermis, or the inner layer
- the subcutaneous fat layer.



What is cancer?

Cancer is a disease of the body's cells. Normally the body's cells grow and divide in an orderly manner so that growth and healing of injured tissue occurs. Occasionally some cells behave in an abnormal way and may grow into a lump which is called a tumour. Tumours can be **benign** (non-cancerous) or **malignant** (cancerous).

Benign tumours do not spread to other parts of the body. Malignant tumour cells are able to break away and move around the body causing secondary growths.

Skin Cancer

There are three main types of skin cancer: basal cell carcinoma, squamous cell carcinoma and melanoma. Melanomas start in the pigment cells (melanocytes) while basal and squamous cell carcinomas develop from the epidermal cells. (Carcinomas are cancers that begin in the tissue that lines the skin and internal organs).

Basal cell carcinoma (BCC)

Basal cell carcinomas are the most common but least dangerous type of skin cancer. They grow slowly over

months to years but if left untreated a deep ulcer may form. Fortunately they very rarely spread to other parts of the body. If a person has one basal cell carcinoma they may have others, either at the same time or in later years.

Basal cell carcinomas are most commonly found on the face, neck and upper trunk. They appear as a lump or scaly area and are pale, pearly or red in colour. They may have blood vessels on the surface.

Squamous cell carcinoma (SCC)

Squamous cell carcinomas are less common but more dangerous than basal cell carcinomas. They usually grow over a period of weeks to months. These cancers may spread to other parts of the body (metastasise) if not treated promptly.

Squamous cell carcinomas appear on areas of the skin most often exposed to the sun. They have scaling, red areas which may bleed easily and ulcerate, looking like an unhealed sore. The major cause of these skin cancers is sun exposure over many years.

Melanoma

Melanoma is the rarest but most dangerous skin cancer. If left untreated melanoma can spread to distant parts of the body to form secondary cancers or metastases.

Melanomas can appear anywhere on the body not only in areas that get a lot of sun. The first sign of a melanoma is usually a change in a freckle or mole, or the appearance of a new spot on normal skin. Changes are normally seen over a period of several weeks to months, not over several days. The changes are in size, shape or colour. Melanoma can occur from adolescence onwards and is the most common cancer in the 15-44 year age group. In rare instances it may develop in children.

Nodular Melanoma

Nodular melanoma is a highly dangerous but rare form of melanoma. It can appear as a small, round lump on the skin, which may be black or brown, pink or red in colour (resembling a blood blister). However, most small red lumps are pimples, insect bites etc

Nodular melanomas are more firm to touch, enlarge progressively over more than a month and, if neglected, will begin to bleed and crust. They grow quickly and can be life threatening if not detected and removed promptly. The lesion may be deeper, and so more dangerous, than appears on the surface.

Solar Keratoses (Sunspots)

Solar Keratoses aren't skin cancer but they are warning signs that the skin has received too much sun and a person may

be more prone to melanoma or other skin cancers. They are usually flattish, scaly patches which may be pale or red, and may sting if scratched. They occur in people aged over 40 and some may develop into squamous cell cancers.

Skin cancer is almost totally preventable.

Symptoms

As skin cancers are visible, they can be seen and checked as soon as they develop. Early symptoms of skin cancer may seem quite minor but any suspicious spot should be seen by a doctor immediately.

The signs to look for are:

- A crusty, non-healing sore.
- A small lump which is red, pale or pearly in colour.
- A new spot, freckle or mole changing in colour, thickness or shape over a period of several weeks to months. Particular attention should be paid to spots that are dark brown to black, red or blue-black.

Diagnosis

The doctor will first examine the suspicious spot and check other parts of the skin. If a doctor suspects a skin cancer, a biopsy may be performed, which is the removal of all or part of the affected skin generally under local anaesthetic. The piece of skin that has been removed is then examined under a microscope.

Treatment

Common skin cancers

A variety of methods are available to treat the common skin cancers.

Surgery

Surgery can be used to remove the skin cancer and a small area of normal skin. This is quite simple and can usually be done under local anaesthetic.

Cryotherapy

Cryotherapy is a freezing technique used for BCCs and sunspots where the growths are briefly frozen with liquid nitrogen.

Curettage and cautery

Small BCCs can be scraped off using a curette (curettage). Electric current is then applied (cautery) to stop bleeding in the area and to destroy any remaining tumour.

Chemotherapy cream

A chemotherapy cream containing drugs that kill cancer cells that is applied directly to the skin.

Immunotherapy

A cream is applied to the cancer and stimulates the body's immune system to fight the skin cancer in the area where it is applied.

Radiotherapy

Radiation therapy is less commonly used now and is not often used to treat early skin cancers, but it may be useful where surgery could be difficult or disfiguring.

Melanoma

Surgery is the preferred method of treatment for melanoma. Very thin melanomas are usually removed along with a small area of normal skin, under local anaesthetic. For deeper melanomas a wide area of skin may need to be removed to make sure that all the cancer cells have been taken out. The local lymph glands may also be removed at this time.

Chemotherapy and radiotherapy may also be used to treat advanced melanoma.

Outlook

Virtually all basal and squamous cell carcinomas that are found and treated early are cured. The majority of people with early melanoma which is appropriately treated do not have any further trouble with their disease. However because there is a chance that the melanoma will reappear, they will need regular check ups with their doctor.

Causes of skin cancer

The major cause of skin cancer is unprotected exposure to ultraviolet radiation, from the sun or other sources such as solariums or UV lamps, over many years. Workers in some industries have to take precautions against other known causes of common skin cancers, such as arsenic, polycyclic hydrocarbons and a number of other chemical compounds.

Who is at risk?

Anyone can develop skin cancer but the risk is increased if a person: does not protect their skin from the sun; works or spends a lot of time in the sun; has infrequent but intense exposure to the sun, such as people who work indoors; was born or spent their childhood in Australia; has been sunburnt, especially in childhood; has skin that is fair, burns easily, freckles and doesn't easily tan; has red or fair hair and blue or green eyes; has a lot of moles; has sunspots (solar keratoses); has a compromised immune system. This could be due to taking certain drugs after an organ transplant or being HIV positive.

People with dark or olive skin have more protection against skin cancer because they produce more melanin than fair-skinned people. However, because UV radiation is so strong in Australia, dark and olive-skinned people still need to protect their skin.

How can you reduce your risk?

- Slip on sun protective clothing
- Slop on SPF30+ broad spectrum sunscreen
- Slap on a Hat (not a cap)
- Seek Shade
- Slide on some Sunnies (that meet Australian Standard 1067)
- And take extra care between 10am-3pm.