

Dermatology Associates of Plymouth Meeting

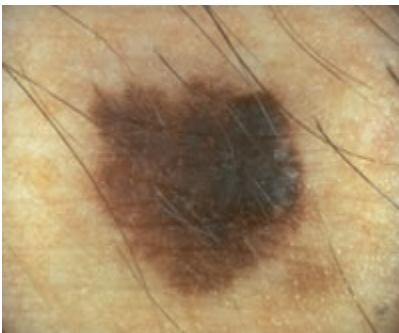
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SKIN CANCER

According to the American Academy of Dermatology, more than a million new cases of skin cancer will be diagnosed this year. Skin Cancer is a disease in which cancer (malignant) cells are found in the outer layers of your skin. The most common types are Basal Cell Carcinoma and Squamous Cell Carcinoma. These types of skin cancer are called non-melanoma skin cancer.



Melanoma

Melanoma, another type of skin cancer, starts in the melanocytes. It is not as common as basal cell or squamous cell skin cancer, but it is much more serious.

Skin cancer is more common in people with light colored skin who have spent a lot of time in the sunlight. Skin cancer can occur anywhere on your body, but it is most common in places that have been exposed to more sunlight, such as your face, neck, hands, and arms.

Skin cancer can look many different ways. The most common sign of skin cancer is a change on the skin, such as a growth or a sore that won't heal. Sometimes there may be a small lump. This lump can be smooth, shiny and waxy looking, or it can be red or reddish brown. Skin cancer may also appear as a flat red spot that is rough or scaly. Not all changes in the skin are cancer, but you should see your doctor if you notice changes.

Like most cancers, skin cancer is best treated when it is diagnosed early. If you have a spot or lump on your skin, your doctor may remove the growth and look at the tissue under a microscope. This is called a biopsy. Before the biopsy, you will be given a local anesthetic to numb the area for a short period of time.

Most non-melanoma skin cancers can be cured. Chance of recovery (prognosis) and choice of treatment depend on the type of skin cancer and how far it has spread.

Other kinds of cancer that may affect the skin include cutaneous T-cell lymphoma, a cancer of the lymph system, and Kaposi's sarcoma. Cancers that start in other parts of the body may also spread (metastasize) to the skin.

Skin Cancer Treatments

There are treatments for all patients with skin cancer. Three kinds of treatments are used:

- surgery (taking out the cancer)
- chemotherapy (using drugs to kill cancer cells)
- radiation therapy (using x-rays to kill cancer cells)

Surgery is the most common treatment for skin cancer. Your doctor may remove the cancer using one of the following:

- Electrodesiccation and curettage burns the lesion and removes it with a sharp instrument
- Cryosurgery freezes the tumor and kills it
Simple excision cuts the cancer from your skin along with some of the healthy tissue around it
- [Mohs Micrographic Surgery](#) removes the cancer and as little normal tissue as possible. During this surgery, the doctor removes the cancer and then uses a microscope to look at the cancerous area to make sure no cancer cells remain.

Surgery may leave a scar on your skin. Depending on the size of the cancer, skin may be taken from another part of your body and put on the area where the cancer was removed. This is called a skin graft. New ways of doing surgery and grafting may reduce scarring.

Radiation therapy uses x-rays to kill cancer cells and shrink tumors. Radiation therapy for skin cancer comes from a machine used outside the body.

Chemotherapy uses drugs to kill cancer cells. In treating skin cancer, topical chemotherapy is often given as a cream or lotion placed on the skin to kill cancer cells (topical chemotherapy). Chemotherapy may also be taken by pill, or it may be put into the body by a needle in a vein or muscle. Chemotherapy given in this way is called a systemic treatment because the drug enters the bloodstream, travels through the body, and can kill cancer cells outside the skin. Systemic chemotherapy is being tested in clinical trials.



Squamous Cell Cancer

Squamous Cell Cancer

Squamous cell tumors also occur on areas of your skin that have been in the sun, often on the top of the nose, forehead, lower lip, and hands. They may also appear on areas of your skin that have been burned, exposed to chemicals, or had x-ray therapy. Often this cancer appears as a firm red bump.

Sometimes the tumor may feel scaly or bleed or develop a crust. Squamous cell tumors may spread to the lymph nodes in the area (lymph nodes are small bean-shaped structures that are found throughout the body; they produce and store infection-fighting cells).

Risk factors in Squamous Cell Carcinoma

The incidence of squamous cell carcinoma is on the rise in the general population, but few prospective studies have addressed possible risk factors. To fill the gap, researchers at Harvard University followed subjects in the Nurses' Health Study, whose cohort of 107,900 female, predominantly Caucasian nurses had been 30 to 55 years old in 1976. The eight-year project included 197 women with histologically confirmed squamous cell carcinoma diagnosed between 1982 and 1990; it analyzed possible risk factors, including hair color, number and severity of sunburns, and U.S. state in which the subjects had been born and lived at ages 15 and 30.

The results confirmed many of the risk factors suspected by most dermatologists. These included:

- red or light brown hair color
- living in California or Florida at birth and age 15
- number of severe sunburns
- childhood tendency to burn after two or more hours of sun exposure

Current — but not past — cigarette smokers also had increased risk of developing squamous cell carcinoma. There was no correlation between risk and number of cigarettes smoked.



Basal Cell Cancer

Basal Cell Carcinoma

Basal cell cancer is the most common type of nonmelanoma skin cancer. It usually occurs on areas of your skin that have been exposed to the sun. Often this cancer appears as a small raised bump that has a smooth, pearly appearance. Another type looks like a scar, and it is firm to the touch. Basal cell cancers may spread to tissues around the cancer, but it usually does not spread to other parts of the body.