

# The Dreaded “C” Word

Preventing skin cancer is more than half the battle.

By Sarah Gleim

These days you can't be too careful when it comes to protecting your skin from the sun's damaging rays. That's because, according to the American Cancer Society, skin cancer is the most common form of cancer in the United States, and it accounts for nearly half of all cancers in the country. But the one statistic that surprised us was that men—yes, MEN—outnumber women in the new cases of skin cancer diagnosed each year. The good news is there are simple ways to protect yourself, and it doesn't take much effort at all. So arm yourself with the knowledge—and products—you need this summer to defend your skin from the harmful UV rays of the sun.

# Grooming



Both Alba Botanica Hawaiian aloe vera SPF 30 and very emollient sport SPF 45 feature organic ingredients like aloe vera, sunflower seed oil, lavender and ginkgo biloba. \$9.95 for 4 ounces. Whole Foods.

Aveeno Sunblock Lotion is formulated especially for the face: it's hypoallergenic, oil-free, non-greasy, non-comedogenic, waterproof and lightweight. \$10.99-\$12.99 for 3 ounces.

This lightweight moisturizer by PCA Skin is formulated for all skin types for complete UV protection and hydration. It also soothes minor skin irritations after shaving. \$36 for 4 ounces. Available at Face Value Esthetics, 404.313.9484.

SkinMedica's sunscreen is oil-, PABA- and fragrance-free, and provides long-lasting UV protection, as well as protection against free radical damage. Visit [skinmedica.com](http://skinmedica.com) to find an authorized SkinMedica medical practice or medical spa in your area.

Murad's Face Defense is a lightweight formula that infuses skin with moisture, plus broad-spectrum sunscreens that protect against UVA/UVB damage. \$33 for 2 ounces. Murad.com, Sephora and Ulta.

## Common Forms of Skin Cancer

Skin cancers behave differently, so they are divided into two major groups, malignant melanomas and non-melanomas, explains Dr. William Jonas, an oncologist with Atlanta Hematology and Oncology Associates of Atlanta. "Cancers that start from the pigment-making cells of the skin are called melanomas," he says. "The second main group of skin cancers is basal cell and squamous cell carcinomas that develop from the epidermis."

### Basal Cell Carcinoma

Basal cell carcinoma is the most common form of skin cancer (as well as the most common form of any cancer), and it affects nearly 1 million Americans every year. And according to The Skin Cancer Foundation, men with the disease outnumber women.

Basal cell carcinoma form in the basal cells, which line the deepest layer of the epidermis, or top skin layer. "Basal cell carcinoma occurs on areas of the skin exposed to the sun, especially the face, ears, neck, scalp, shoulders and back," says Dr. Christine Law, a dermatologist with Peachtree Dermatology in Buckhead. "Although we do see it in people of color, it occurs mostly in fair-skinned individuals, especially those that freckle easily and have blond or red hair and blue eyes." And those that work outdoors or spend hours of leisure time on the golf course and on the lake are particularly susceptible.

Basal cell carcinoma tends to affect older people most often, but over the last few decades, the average age of patients has decreased.

### Squamous Cell Carcinoma

Squamous cell carcinoma is the second most common form of skin

cancer, and the American Cancer Society estimates more than 250,000 new cases are diagnosed each year. It occurs at least twice as frequently in men as in women, although rarely before the age of 50. "Squamous cell carcinoma is very similar to basal cell carcinoma in that sun exposure is the main risk," says Dr. Carl Washington, associate professor of dermatology at Emory School of Medicine. It forms in the squamous cells that make up most of the epidermis and can occur on all areas of the body, but is most common in areas frequently exposed to the sun, such as the ears, lower lip, face, scalp, neck, hands, arms and legs.

Just as with basal cell carcinoma, people with fair skin, light hair, and blue, green or gray eyes are at highest risk of developing the squamous cell carcinoma. But anyone with a history of extreme sun exposure is at risk, particularly frequent users of tanning beds (their chances increase by two-and-a-half times), as well as those previously diagnosed with basal cell carcinoma.

The good news about both basal and squamous cell carcinomas, a cure is highly likely if they are detected and treated early. "If we catch them early, they're going to be small so the surgery will be small," Law explains. "But if you wait and put it off, as with any cancer, it is going to grow deeper and wider, which will lead to extensive surgery and possible disfigurement, especially on the head and neck. If any of the cancers grow deep enough, they can invade nerves and blood vessels in the eyes and brain that can lead to permanent damage and even death."

### Malignant Melanoma

Melanoma is a malignant tumor with a different cell of origin than basal or squamous cell carcinoma. "Melanoma arises from the pig-

ment cells of the skin, and it behaves much more aggressively [than nonmelanomas],” Washington says. “A smaller melanoma tumor is going to metastasize more easily than a squamous cell.” While the sun does have a link to melanoma, genetics play a direct role, because melanoma shows up in areas that are not directly exposed to the sun, Law explains.

“Everyone is at some risk for melanoma,” says Jonas, but anyone with fair skin, freckles, and red or blond hair has a higher risk, and redheads in particular have the highest risk. “Melanoma has a strong genetic history,” Law says. “Having a first-degree relative [a mother or father] with melanoma increases your risk pretty significantly.”

Law says the most important things to look for when it comes to melanoma are the ABCDEs. **Asymmetry:** If you draw a line through your mole, the two halves should match. **Borders:** The borders of an early melanoma tend to be uneven, and the edges may be scalloped or notched. **Colors:** Having a variety of colors—brown, tan, black, red, blue or some other color—is another warning signal. **Diameter:** Melanomas usually are larger in diameter than the size of the eraser on your pencil, but they may sometimes be smaller when first detected. **Evolving:** Any change in size, shape, color, elevation or another trait, or any new symptom such as bleeding, itching or crusting points to danger.

Fortunately, melanoma is not very common (it accounts for just 3 percent of skin cancer cases), but it does cause more skin cancer-related deaths (more than 75 percent). In 2008, the American Cancer Society estimates there were more than 8,400 fatalities in the United States from melanoma, and nearly two-thirds—or 5,400—of those were men.

However, despite its severity, if melanoma is caught and treated early enough (before the tumor penetrates the epidermis), it is almost 100-percent curable. “The earlier you detect it, the less likely it has spread,” Washington says. “And if you get it while it’s at its primary site, the likelihood is excellent that you’re going to cure it.” But if left untreated, melanoma can spread to other parts of the body, and the survival rate falls to just 15 percent for those with advanced disease.

### Preventing Skin Cancer

While skin cancer is generally curable when detected and treated early, the best line of defense is prevention. And the best way to lower your risk of any skin cancer is to limit exposure to strong sunlight and UV light, especially between 10 a.m. and 4 p.m. Of course, this is probably when you’re out hitting the golf course, beach or lake, so just be sure to protect your skin while outdoors.

“I encourage my patients to protect themselves with clothing and a hat, because no matter how much you sweat, a hat and clothes stay on and protect you,” Law says. Today there are clothing lines on the market with built-in UV protection, and The Skin Cancer Foundation recommends several brands, including Coolibar, Columbia, BTC Innovations and O’Neill.

Law and Washington also recommend their patients always use sunscreen daily. “Just be aware that it’s not a coat of armor and needs to be re-applied every hour,” Law says. She suggests using a broad-spectrum sunscreen and lip balm with an SPF of 30 or higher

## Fast Facts

The majority of people diagnosed with melanoma are white men age 50 and older.

Five percent of all cancers in men are melanomas.

The incidences of many common cancers is falling, but the incidences of melanoma continue to rise significantly.

One person dies of melanoma every 62 minutes.

About 65 percent of melanoma cases can be attributed to UV radiation from the sun.

Adults age 40 and older, especially men, have the highest annual exposure to UV rays.

Starting at age 40, melanoma incidences in men exceeds incidences in women, and this trend becomes more pronounced each decade.

Melanoma is one of only three cancers with an increasing mortality rate for men.

In 2004, the total direct cost associated with the treatment for non-melanoma skin cancers was more than \$1 billion.

*Source: The Skin Cancer Foundation*

every day as part of your daily grooming routine. Washington agrees. “SPF is not a one-size-fits-all,” he says. “For daily use—if you’re not going to be outside for more than a few hours—15 is adequate. But it never hurts to go to a higher SPF number.”

If you are not sure how strong the sun is, use the shadow test: If your shadow is shorter than you are, the sun’s rays are at its strongest. And whatever you do, avoid tanning booths. The U.S. Department of Health & Human Services says frequent tanners using the new high-pressure sunlamps may receive as much as 12 times the annual UVA dose compared to the dose they receive from sun exposure.

You also should make a point to visit a dermatologist annually. “Doctors should perform a thorough examination, looking you over head to toe, especially those areas you can’t see, like your scalp and back,” Law says. “Those are areas that are difficult for you to examine yourself. And they should educate you about what to look for when you’re performing your own exam.”

In addition, do your own skin exams every few months. You know it better than anyone else so you’ll notice if a new lesion pops up. The bottom line is be aware of your own skin. It’s worth it. ►