

MELANOMA/nfo Sheet

Some common medications increase skin's susceptibility



When melanoma is found and treated early,

the cure rate is almost





More than

new melanoma cases are expected this year.

Indoor tanning raises the risk of melanoma more than





WHAT YOU SHOULD KNOW

Melanoma is a potentially deadly type of skin cancer. Less common than either basal cell or squamous cell skin cancers, melanoma is more dangerous because it's more likely to spread, making treatment challenging.

WHAT MELANOMA LOOKS LIKE

Only 20 to 30% of melanomas are found in existing moles while 70 to 80% arise on apparently normal skin. Look for one or more of the following ABCDE characteristics:



Asymmetry. One half does not match the other half.



Border is irregular. The mole's edges are ragged, notched or blurred.



Color is uneven. Mole may appear shades of black, brown, tan, red, gray, white, pink or blue.



Diameter is larger than 6 millimeters (mm) or ¼ inch, about the size of a pencil eraser. Any sudden or continued increase in size is of special concern.



Evolving. The mole or lesion is changing in size, shape or color.

RISK FACTORS

- Fair complexion, including skin that freckles and burns easily; blue, green or light-colored eyes; and red or blond hair
- **History of significant sun exposure** from spending a lot of time in the sun, working outdoors, sunbathing, or living (or once lived) in an area with intense sunlight.
- History of severe, blistering sunburns, especially as a child or teen.
- History of indoor tanning, even if only a few times.
- Personal or family history of melanoma
- Moles that are numerous, large, or unusual looking
- Weakened immune system

WHY ROSWELL PARK?

- Multidisciplinary care by a team of melanoma specialists dermatologists and surgical, medical and radiation oncologists who work together – all under one roof.
- Mohs surgery by experienced surgeons to delicately remove melanoma cells while preserving healthy tissue.
- Latest treatment options immunotherapies, targeted drugs and clinical trials – unavailable from other providers.
- Plastic & reconstructive surgeons onsite to restore appearance and function of important skin structures.

The American Academy of Dermatology recommends choosing a sunscreen that states the following on the label:



BROAD SPECTRUM

This means a sunscreen protects the skin from ultraviolet A (UVA) and ultraviolet B (UVB) rays, both of which can cause skin cancer.

SPF 30 OR HIGHER

This indicates how well a sunscreen protects you from sunburn.

WATER RESISTANT

While sunscreens can be "water resistant" (for 40 minutes) or "very water resistant" (for 80 minutes), sunscreens are not waterproof or sweatproof and need to be reapplied.



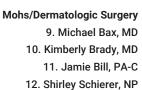
PRACTICE SUN SAFETY

A healthy tan is a myth. Any tan is a sign that skin cells are damaged and this damage is what leads to skin cancers, eyelid cancers and premature skin aging and wrinkling.

- Avoid tanning, outdoors as well as tanning beds, booths and sunlamps.
- Apply sunscreen daily at least 30 minutes before sun exposure and on cloudy days, too.
- Seek shade during the sun's most intense hours between 11 am and 3 pm.
- Use a broad spectrum (UVA/UVB) sunscreen with SPF of at least 30. Choose a water-resistant formula and reapply every two hours, and more frequently after swimming or sweating.
- Cover up with protective clothing including a broad-brimmed hat.
- Shade your eyes with sunglasses that filter UV rays.

MEET OUR DOCTORS

Dermatology
1. Gyorgy Paragh, MD, PhD, Chair
2. Bethany Lema, MD
3. Drew Kuraitis, MD, PhD
4. Susan Pei, MD
5. Shana Bradigan, NP
6. Kelly Joyce, PA-C
7. Ruth Rohl, NP
8. Megan Veneziano, PA-C





































Dermatopathology 13. Paul Bogner, MD 14. Alicia Goldenberg, MD 4. Susan Pei, MD

Surgical Oncology
15. John Kane III, MD, FACS
16. Joseph Skitzki, MD

Medical Oncology
17. Igor Puzanov, MD, MSCI, FACP





will develop melanoma at some time during their life.