



# TIP SHEET

# Skin Cancer

## What You Need to Know

A healthy tan is a myth. Ultraviolet (UV) radiation from the sun is what tans, burns and damages your skin. Damaged skin cells lead to skin cancer, the most common of all cancers. Skin cancer affects more than 2 million people each year and includes:

- **Basal cell carcinoma**
- **Squamous cell carcinoma**
- **Melanoma**

Melanoma is less common than either basal cell or squamous cell cancers, but far more dangerous. Melanoma, responsible for more than 9,000 deaths each year, is more likely to spread to other body areas, making treatment challenging.

## PRACTICE SUN SAFETY

UV rays are a major cause of skin cancers, cataracts, eyelid cancers and premature skin aging and wrinkling.

- ✓ **Avoid tanning**, including tanning beds, booths and sun lamps.
- ✓ **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 10 am and 4 pm.
- ✓ **Use a broad spectrum (UVA/UVB) sunscreen** with SPF 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.



## What Skin Cancer Looks Like

### Signs of Basal Cell or Squamous Cell Carcinoma

Have a physician check out any skin spots, sores or bumps that look like these:



A lump that's smooth, shiny, pale or waxy



A red or brown patch that's rough and scaly



A lump that's firm and red



A flat red spot that's rough, dry, or scaly and may be itchy or tender



A lump or sore that bleeds or develops a crust or scab, but does not heal

### Signs of Melanoma

Melanoma may begin in a mole or on previously clear skin. Have a physician assess any mole that shows one or more of the following ABCDE characteristics:



**ASYMMETRY** - One half does not match the other half.



**BORDER IRREGULARITY** - The mole's edges are ragged, notched or blurred.



**COLOR** is not uniform. Mole may appear shades of black, brown, tan, red, gray, white, pink or blue.



**DIAMETER** is larger than 6 millimeters (mm) or 1/4 inch, about the size of a pencil eraser. Any sudden or continued increase in size is of special concern.



**EVOLVING** - The mole or lesion looks different from the rest, or is changing in size, shape or color.

# Why Roswell Park Cancer Institute?

**Nationally recognized.** RPCI is a National Cancer Institute (NCI) designated Comprehensive Cancer Center, the only one in New York State outside of New York City.

**Convenient satellite locations.** Skin cancer patients may receive some of their care at our center in Niagara Falls, N.Y.

**A multidisciplinary care approach** by a team of dermatologists and surgical, medical and radiation oncologists who work together all under one roof.

## Treatment the RPCI Way

- **Surgery** is the most common treatment for skin cancer. The cancerous tissue is removed while under local anesthesia.
- **Imiquimod cream**, a type of biologic therapy that uses a patient's immune system, is used to treat some superficial minor skin cancers.
- **Photodynamic therapy (PDT)** is an innovative cancer therapy pioneered at RPCI that helps skin cancer patients avoid surgery and major scarring.
- **Specialized skin cancer surgery.** Mohs micrographic surgery, an advanced surgical technique, removes cancer cells while preserving healthy tissue, particularly on the eyelids, nose, ears, lips and fingers.
- **Plastic and reconstructive surgeons** to restore or improve appearance and function of important skin structures.

Up to  
**40%**  
of the sun's UV  
radiation reaches  
earth on a  
completely  
cloudy day.

Unprotected  
skin can become  
damaged by the sun  
in as little as  
**15**  
minutes

Some medications, such as antibiotics and hormones, increase skin's susceptibility to UV damage.



## Meet the Doctors

(above from left to right)

### Dermatology

- 1) Ilene L. Rothman, MD
- 2) Bethany Lema, MD
- 3) Gyorgy Paragh, MD, PhD

### Pathology

- 4) Paul Bogner, MD
- 5) Richard Cheney, MD

### Surgical Oncology

- 6) Valerie Francescutti, MD, FRCSC
- 7) John Kane III, MD, FACS
- 8) Joseph Skitzki, MD

### Head and Neck Surgery

- 9) David Cohan, MD
- 10) Wesley Hicks, Jr., MD, FACS

### Medical Oncology

- 11) Nikhil I. Khushalani, MD

### Radiation Oncology

- 12) Kilian Salerno, MD

### Plastic and Reconstructive Surgery

- 13) Hassan Arshad, MD
- 14) Cemile Nurdan Ozturk, MD
- 15) Paul Tomljanovich, MD

Anyone  
can get  
skin cancer,  
regardless  
of skin  
color.

