

showed that the outer edges are free of cancer cells, no further treatment is needed. If the outer edges do contain cancer cells, additional treatment is planned. Most commonly, a wider area is excised and sent to be re-examined under a microscope. For squamous cell cancers, which are more likely to spread, surgery may be followed by radiation. Surgery is the only way melanoma can be cured. Melanomas are usually larger and deeper than other forms of skin cancer and a larger safety margin is removed. If the disease has spread to lymph nodes, these too will be removed. If melanoma has spread to lymph nodes, underlying tissue, and/or more distant parts of the body, it may also be removed from those sites. Although this may not usually cure the cancer, in some cases, it could help relieve the pain and lead to longer survival.

## HOPE FOR THE FUTURE

The real hope for the future lies in prevention and early detection of skin cancers. Most skin cancers can be prevented by by avoiding unprotected exposure to the sun. A good quality sun block should be used on all exposed skin areas even in winter. Any unusual spots on the skin, especially any that change in size or color, should be checked by a doctor.

# SKIN CANCER

For more information call toll free  
1-800-ACS-2345  
or on the internet  
[www.cancer.org](http://www.cancer.org)

1997 American Cancer Society, Inc.

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## TYPES OF SKIN CANCER

### FACTS ON SKIN CANCER

Cancer of the skin is the most common of all cancers. Almost one million cases of skin cancer occur in this country each year. Skin cancer most often occurs among older, fair-skinned people and is rare among African Americans.

Most skin cancers are either the basal cell or squamous cell type. These types of cancer tend to grow slowly and spread little, and nearly 95% can be cured.

Malignant melanoma is a much more serious form of skin cancer. It was once rare in this country but its rate is now increasing faster than any other type of cancer- 4% every year. Melanoma will be diagnosed in about 40,000 Americans in 1998. The life-time risk of developing melanoma is now about one in 100, and this is expected to rise to one in 90 by the year 2000.

The overall 5-year survival rate, for melanoma is 87%. The 5-year survival rate for localized disease is 95%. About 82% of melanomas are diagnosed in a local stage.

The message is obvious: have your skin checked by a health care professional. It is especially important if you have fair skin, lots of moles or a family history of skin cancer.

There are more than three types of skin cancer, but the three listed here account for the majority of malignant skin tumors.

**Basal Cell Cancer.** About 75% of all skin cancers are the basal cell type. They usually develop on the face and ears. Basal cell cancer is slow growing and does not usually spread to distant parts of the body. If left untreated, however, basal cell cancer can spread to nearby areas and invade the bone and other tissues beneath the skin. Yearly follow-up is necessary because one third of these patients will develop a new tumor in three to five years.

**Squamous Cell Cancer.** Accounting for about 20% of all skin cancers, squamous cell cancers most commonly appear on sun exposed areas of the body. They can also develop within other skin lesions like scars or ulcers.

Squamous cell cancers tend to be more aggressive than basal cell cancers and are more likely to invade structures beneath the skin. They are also more likely to spread to distant parts of the body.

**Melanoma.** Less common, but more dangerous than either basal cell or squamous cell cancers, melanoma begins in cells that produce the coloring or pigment known as melanin. When exposed to sunlight, the melanin turns darker and normal melanocytes make more of it to produce a tan. Because malignant melanoma cells still produce the pigment, these tumors often include shades of brown or black.

If melanoma is detected in its early stages, before it has spread, it is almost 100% curable. However, melanoma is much more likely than other skin cancers to spread to other parts of the body. Melanoma that spreads to **nearby** area can be cured in many cases. Although some cases of melanoma that have spread to **distant** parts of the body can be cured, most cannot. That is why melanoma accounts for only 5% of the skin cancer cases, but about 75% of the deaths.

### HOW THE DIAGNOSIS IS MADE

The diagnosis of skin cancer begins with a complete medical history. The doctor will then examine the suspected area, noting the size, shape, color, and if there is any bleeding or scaling.

If indicated, a biopsy will be taken. Anesthesia is injected under the skin to numb the area before the sample is taken. Most biopsies can be done in the doctor's office

### TREATMENT

There are five main ways of treating skin cancer:

- ◆ excisional surgery (cutting the cancer out)
- ◆ electrodesiccation (destroying the cells with heat)
- ◆ cryosurgery (freezing the cells until they die)
- ◆ laser therapy
- ◆ radiation therapy.

The type of treatment chosen for **basal cell** or **squamous cell** cancer depends on how large the cancer is and where it is. If the biopsy