

KEEPING SKIN CANCER AWAY

SKIN CANCERS THAT ORIGINATE PRIMARILY FROM the skin (as opposed to cancers that spread and involve the skin secondarily) can be divided simply into two categories: non-melanoma skin cancers and melanomas.

The non-melanoma skin cancers (e.g. Basal Cell Carcinoma, Squamous Cell Carcinoma) tend to be slow growing and if detected early, can be "cured" completely with surgery. Complete excision of the tumour with adequate margins that are clear of the cancer cells are usually sufficient to ensure the cancer doesn't recur in most cases. Adjuvant or extra therapy such as chemo or radiotherapy is usually not required. These types of cancers are also rarely lethal due to its slow growing nature.

Melanomas, on the other hand, can be life-threatening. In melanomas, early detection is key to survival as the prognosis and life expectancy of an individual drops drastically once the melanoma invades deeper into the skin. The survival/life expectancy of a patient with melanoma varies drastically with a difference in invasion depths as little as one to two millimetres. In melanomas, more radical surgery with wider clearance margins is required. Occasionally, radiotherapy or

chemotherapy may also be required.

Risk factors for skin cancer includes excessive sunlight (or ultraviolet/UV light) exposure, a decrease in one's immune system or a strong family history of skin cancers.

The best way to minimise one's risk of getting skin cancer is to avoid excessive sun exposure, especially in the middle of the day. The risk of skin cancers increases with every episode of "blistering sunburn" - bad sunburns in which one blisters up - throughout one's lifetime. If you have to go into the sun, wear a broad-spectrum sunscreen with an SPF of at least 15 as well as protective clothing. In individuals with a strong family history of skin cancers, regular checks by their dermatologist are also recommended. Finally, having good general health to keep one's immune system up is also important.

I also educate patients on the ABCD's of early skin cancer detection: A stands for asymmetry of a mole or spot; B is for borders, e.g. irregular or indistinct borders of a mole is a cause for concern; C is for colours - a mole or spot that has more than two colours or which has recently changed colour is a cause for concern; and D is for discomfort where the spot feels a little sore and remains as such. D also stands for diameter, where a mole or spot that has rapidly increased in size or diameter is another cause for concern. ■

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