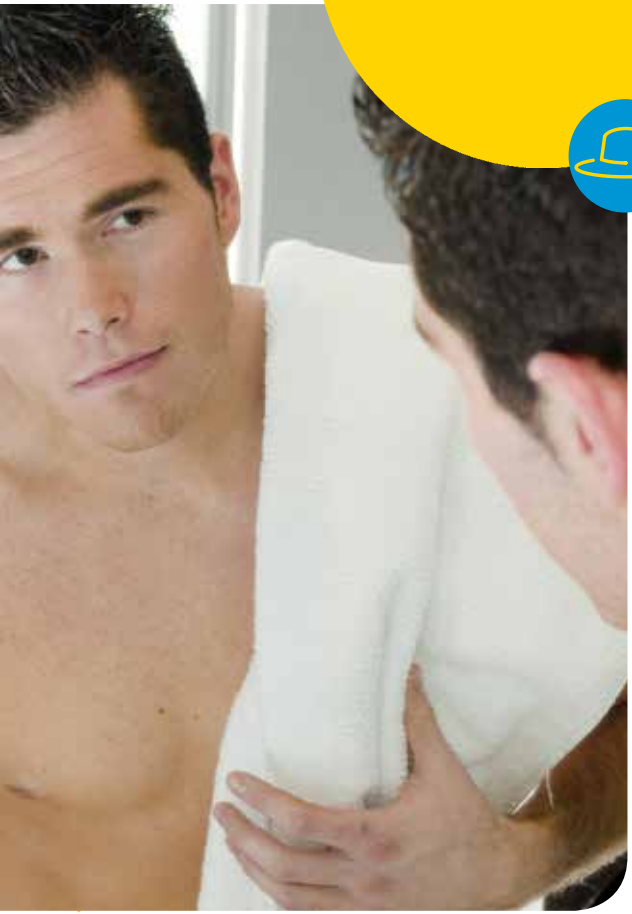
Cancer Council
Western Australia

Skin cancer
Take a good look



SunSmart®

Skin cancer is an uncontrolled growth of damaged skin cells mostly due to overexposure to ultraviolet (UV) radiation from the sun.

Australia has one of the highest rates of skin cancer in the world. Each year there are close to 1 million treatments for skin cancer and more than 2,000 deaths.

Western Australia has one of the highest rates of skin cancer in the country.

Did you know?

- Most people living in Australia are at risk of developing skin cancer as Australia has high UV radiation levels throughout most of the year.
- Skin cancer is largely preventable by minimising overexposure to UV radiation.
- Finding skin cancer at an early stage significantly increases the chance of successful treatment.

What happens to skin in the sun?

Ultraviolet (UV) radiation from the sun can damage skin cells and stop the immune system from working properly. Overexposure to UV radiation can result in:

- sunburn
- premature ageing and wrinkling
- eye damage such as cataracts and cancers of the eye, and/or
- skin cancer.

Skin cancer

There are three main types of skin cancer named after the skin cells they start developing in: basal cell carcinoma (BCC), squamous cell carcinoma (SCC) and melanoma.

Please note that the images shown are only a guide. Spots on your skin may look different.

Basal cell carcinoma

- Accounts for approximately 66 per cent of skin cancers.
- Can be small, round or flattened spots that are red, pale or pearly in colour. Some are scaly like a patch of eczema.
- May become ulcerated, bleed and fail to heal.
- Grows slowly over months or years.
- Usually found on the upper body, head or neck.

Squamous cell carcinoma

- Accounts for approximately 33 per cent of skin cancers.
- Grows over months and may spread if not treated.
- Can be scaly red areas that may bleed easily, ulcers or non-healing sores that are often painful, especially when touched.
- Often found on lips, ears and scalp.

Melanoma

- Accounts for 1-2 per cent of skin cancers.
- Is the most dangerous and aggressive type of skin cancer. If left untreated can spread to other parts of the body and can be fatal.
- Grows quickly over weeks to months.
- Can appear as a new or existing spot, freckle or mole that has changed colour, size or shape.
- Can grow anywhere on the body – not just areas exposed to the sun.
- Occurs most frequently on the upper back in males and on the lower leg in females.

The ABCDE of melanoma detection

Check your whole body for the following:

Asymmetry – If the spot or lesion is divided in half, any two halves are not a mirror image.

Border – A spot or lesion with a spreading or irregular edge.

Colour – A spot or lesion with a number of different colours through it.

Diameter – A spot or lesion that is greater than 6 mm across.

Evolving – A spot or lesion that has changed over time.

Warning signs

The following spots are not skin cancer but they do have an increased risk of becoming cancerous – show your GP.

Dysplastic naevi

- Are odd-shaped (also called atypical) moles that may indicate a greater risk of developing melanoma.
- Usually 5-10mm wide, with uneven colouring.

If you have lots of odd-shaped moles, have your skin checked regularly by your doctor.

Solar keratoses (‘sun spots’)

- Generally hard, red, scaly spots on sun-exposed areas of the skin.
- Occur commonly on the head and neck area and also on the backs of the hands.
- Are a warning sign that the skin has been damaged by the sun and that skin cancers may develop.

If you have solar keratoses you should protect yourself from further sun damage and get your skin checked regularly by a doctor.

Eye damage

UV radiation can also damage your eyes.
It is important to protect your eyes by wearing sunglasses and a hat.

In the short-term, sun exposure can cause burns to the eye similar to sunburn of the skin. Longer-term exposure can lead to cataracts (clouding of the lens), pterygium (tissue covering the cornea) and cancer of the conjunctiva or cornea.

Cataracts

Pterygium

Checking your skin

Over 95 per cent of skin cancers can be treated successfully if detected early.

A significant number of skin cancers are detected by people themselves or a family member.

We should all check our skin regularly – at the start of every new season is an easy way to remember. If you have been diagnosed with a skin cancer in the past, you may need to check more often. Ask your GP or dermatologist what is right for you.

How to check your skin

With a bit of practice most people can complete a skin check in around 15 minutes.

Whether you're doing it solo or with a partner, you will need to undress completely and make sure you have good light. If you're checking your own skin, use a full length and a hand-held mirror. If there are areas you can't see properly, don't ignore them, ask a friend to help.

Make sure you check your entire body as skin cancers can sometimes occur in parts of the body not exposed to the sun, for example the soles of the feet.

Go through the same checking sequence each time to get into a routine.

Check your:

- **Head, scalp, neck and ears**
  Take an extra close look around the nose, lips, ears and scalp.
- **Torso - front, back and sides**
- **Arms, hands, fingers and nails**
  Remember to look at the spaces between the fingers and the beds of your fingernails.
- **Buttocks, legs and feet**
  Remember to check between toes, under toenails and on the soles of feet.

If you see anything on the skin that has changed in size, shape or colour or a non-healing sore see your GP straight away.

Skin clinics

Some people may decide to attend a skin clinic to have their skin checked.

There are many skin clinics available, offering a variety of services and fee arrangements.

Clinics that promote skin cancer checks are often private businesses run by GPs rather than dermatologists (doctors who have completed additional training to specialise in diagnosing and treating skin cancers and other skin conditions).

In deciding whether to go to a skin clinic, it is important that you find out about the services offered, expertise of the staff and the costs involved. Cancer Council does not operate or endorse any particular skin clinics.

Skin cancer diagnosis and treatment

Diagnosis

Skin cancer is usually diagnosed by a GP or dermatologist (skin specialist) who examines the skin, often using a hand-held magnifier (dermatoscope).

They may take a biopsy under a local anaesthetic to make a definite diagnosis. A biopsy involves removing a sample of cells and examining them under a microscope.

If a melanoma is diagnosed, further investigation may be undertaken to check for any signs that the cancer has spread.

Treatment

Your GP or specialist will advise you on the best treatment by taking into account the type and size of the cancer, its location and stage of development, your age, general health and your treatment preference.

Malignant melanomas need to be surgically removed (excised). In more advanced skin cancers, some of the surrounding tissue may also be removed to make sure that all of the cancer cells have been taken out. If you have melanoma, your case will be reviewed by a melanoma specialist to discuss whether you require more tests and/or treatment.

The more common skin cancers (BCCs and SCCs) can be treated in a number of ways.

Options may include:

- Surgical excision.
- Ointments such as Imiquimod cream.
- Cryotherapy - using liquid nitrogen to rapidly freeze the cancer off.
- Curettage and cautery - the cancer is scraped out and electric current is applied to stop bleeding and destroy any remaining tumour tissue.
- Photodynamic therapy - a special photosensitising cream is applied to the skin cancer and then exposed to a specific wavelength of light. The light interacts with the cream to destroy the cancer cells, and/or
- Radiation therapy.

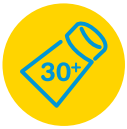
After treatment

Regular check-ups are needed for early detection of any new skin cancers. If you notice any new spots or are worried between follow-up appointments it is important to speak with your GP or specialist as soon as possible.

Be SunSmart. Protect yourself from skin cancer in five simple ways.

Slip on sun protective clothing

Cover up as much of the skin as possible.



Slop on SPF 30 sunscreen or higher

Make sure it is broad spectrum and water-resistant.

Slap on a hat

Wear a brimmed hat that covers your face, head, neck and ears.

Seek shade

Make use of natural or built shade or bring your own.

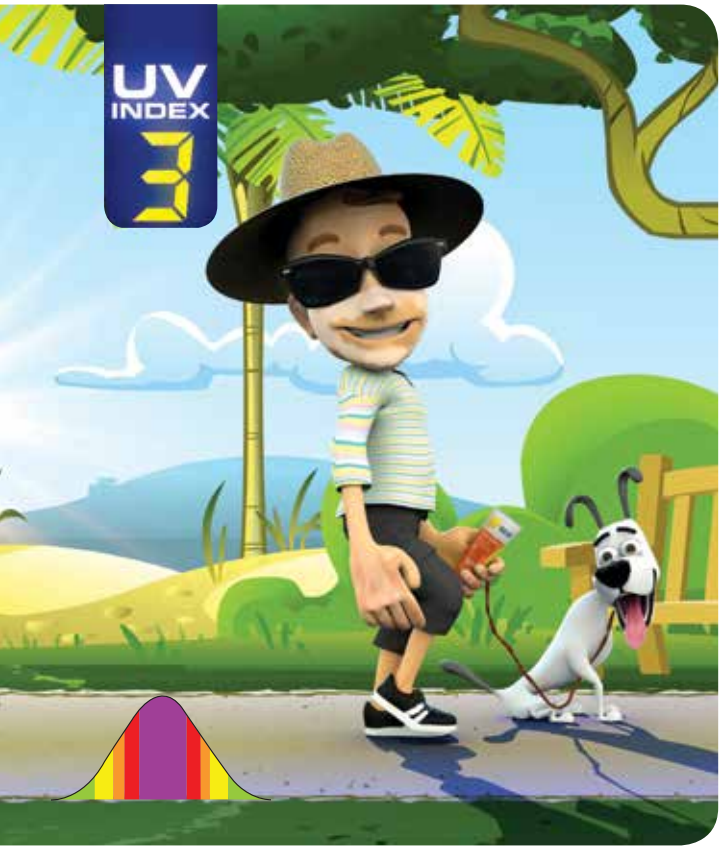
Slide on some sunglasses

Close fitting wrap-around styles offer the best protection.

Sun protection is required when the UV Index in your area reaches 3 or higher.
Remember it is never too late to start protecting and checking your skin.

When UV is 3 or above
Be SunSmart.

Visit myUV.com.au for your UV forecast.



The higher the UV, the greater your chances of getting sunburnt and skin cancer.

Make the most of your day by using the UV Index.

Further information and resources

For more information visit **www.cancerwa.asn.au** or call Cancer Council on **13 11 20**.

UV protective clothing and accessories are available at Cancer Council WA's shop at 334 Rokeby Road, Subiaco or through our online shop: **www.cancerwa.asn.au/shopping**

Visit **myUV.com.au/skincancer** for your online skin check guide.

Photos courtesy of Dr Peter Randell, Dr Judy Cole, Dr Chris Quirk, Dr Jamie Von Nida, Dr Eleni Yiasemides and Skin & Cancer Foundation Victoria.

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To access any of our services, programs or information about cancer, call one of our Cancer Nurses on **13 11 20**. This is a confidential service, available Statewide Monday to Friday during business hours.

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