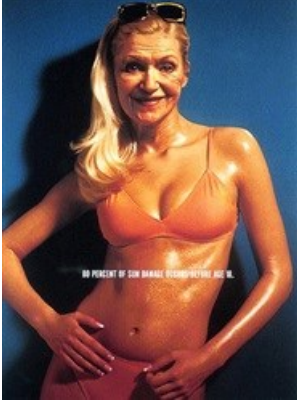


Regular skin check-ups essential in African climate

Protecting one's skin against the harmful rays of the sun only goes halfway against preventing cancer. The other half is doing regular skin checks to ensure one nips any worrying skin issues in the bud early.



Peter Jordan, principal officer of Fedhealth, says one should examine one's skin, head to toe, once a month, looking for any suspicious lesions. "Self-exams can help one detect potential skin cancers early enough to be completely cured. If melanoma, the deadliest form of skin cancer, is recognised and treated early, it is almost always curable, but if it is not, the cancer can advance and spread to other parts of the body where it becomes hard to treat and can be fatal."

Often resembling moles, the majority of melanomas are black or brown, but they can also be skin-coloured, pink, red, purple, blue or white. "Finding an atypical mole will often give one the first clue that something's amiss. That's why it's important to know one's skin very well and to recognise any changes in the moles on one's body. However for a successful self-exam, one need to know what one is looking for and, to aid this, physicians have developed specific strategies for early recognition of the disease."

ABCDE signs of melanoma

One strategy is to look for the ABCDE signs of melanoma. If one sees one or more of these signs, make an appointment with a physician immediately.

- A is for asymmetry - if one draws a line through the mole, the two halves should match. If not, check it out.
- B is for borders - since the borders of an early melanoma tend to be uneven.
- C is for colour - since having a variety of colours is another warning signal. A number of different shades of brown, tan or black could appear in one or also become red, blue or some other colour.
- D is for diameter - melanomas are usually larger in diameter than the size of a pencil's eraser (6 mm), but they may sometimes be smaller when first detected
- E is for evolving - as any change in size, shape, colour, elevation or another trait, or any new symptom such as bleeding, itching or crusting, points to danger.

"As a general rule, to spot either melanomas or non-melanoma skin cancers, take note of any new moles or growths and any existing growths that begin to grow or change significantly in anyway. Lesions that change, itch, bleed or don't heal are also alarm signals."

Another strategy physicians developed is the Ugly Duckling sign, based on the concept that these melanomas look different compared to surrounding moles. The idea is that the patient's 'normal' moles resemble each other, while the potential melanoma is an 'outlier,' a lesion that looks or feels different to the patient's other moles, or changes differently to the patient's other moles.

"While everyone is at risk for melanoma, increased risk depends on several factors, including sun exposure, number of moles on the skin, skin type and family history. Heredity plays a major role in melanoma as about one in every 10 patients diagnosed with the disease has a family member with a history of melanoma. Each person with a first-degree relative diagnosed with melanoma has a 50% greater chance of developing the disease than people who do not have a family history of the disease."

Treatment

Once a melanoma is diagnosed, the first step in treatment is the removal of the melanoma - the standard method being by cutting it out. Surgery has made great advances in the past decade and much less tissue is removed than in the past. Patients do just as well after the lesser surgery, which is easier to tolerate and produces a smaller scar. "In most cases, the surgery for thin melanomas can easily be done in the doctor's office or as an outpatient procedure under local anaesthesia. Stitches remain in place for one to two weeks and scars are usually small and improve over time."

Yet even if one checks one's skin regularly, sun protection remains essential to skin cancer prevention - as about 90% of non-melanoma skin cancers and 65% of melanomas are associated with exposure to UV radiation from the sun. "Always protect oneself and stay safe," concludes Jordan.

Caucasians are the primary victims of skin cancer. However, everyone, regardless of skin colour, can fall prey to it. Unfortunately, many patients and even some physicians are under the impression that non-Caucasian people are immune to this disease. That is one reason people of colour are diagnosed with skin cancer at later stages. These delays mean that skin cancers are often advanced and potentially fatal, whereas most skin cancers are curable if caught and treated in a timely manner.