

Visual Mole Guide for Skin Cancer Prevention

Presented by Dr. Henry Garazo, Board Certified Plastic Surgeon

As the most common form of cancer in the US, skin cancer affects over two million men and women every year. Luckily, skin cancer can be treatable, but early detection is critical. **Did you know...**there is a 99% survival rate if skin cancer is found in its earliest stages? The most important factor in early detection is self-examination, which should be performed on a monthly basis.

Self-Examination: Understanding Potential Signs of Skin Cancer

While an examination by an experienced plastic surgeon or dermatologist is the best way to determine if a mole or blemish is at risk, there are a few specific things you can look out for.

Melanoma

Melanoma is the most dangerous form of skin cancer, often caused by UV exposure. If you follow the ABCDE warning signs, you can catch melanoma early. *During your self-examination, look out for:*



A: Asymmetry

Draw an invisible line (or use a sheet of paper) down the center of your mole. Do both sides match? Or do they differ in appearance? Asymmetry could be a warning sign, and you should get your mole looked at.



B: Border

Benign moles typically have smooth borders, while melanomas tend to have uneven, distorted, or notched edges. Pay attention to the appearance, but also run your fingers over the edges to see if they are raised or scalloped.



C: Color

What color is your mole? Is the color consistent? Benign moles are typically a consistent shade of various browns. If you see a variety of colors or a change in color (such as turning red, blue, white, or black), it's time to get it checked.



D: Diameter

Grab a pencil for this next test. Benign moles are typically smaller in diameter than cancerous or precancerous moles. If your mole is larger than the diameter of a pencil eraser, it could be melanoma. Keep in mind, however, that melanomas can also be smaller when first detected.

E: Evolution

Tracking the evolution of your mole through self-examination is imperative, as any changes could indicate skin cancer. This could be size, elevation, color, or new symptoms such as bleeding. Most benign moles appear the same over time, but malignant moles often evolve.

Basal Cell Carcinoma

Basal cell carcinoma arises in basal cells, which occur in the deepest layers of the epidermis. The abnormal growths or lesions that emerge usually resemble shiny bumps, red patches, or inflamed sores. Basal cell carcinoma is the most common form of skin cancer and typically does not spread beyond the tumor site.



Open sores that remain open for multiple weeks and bleed, ooze, or crust before healing and then re-opening.



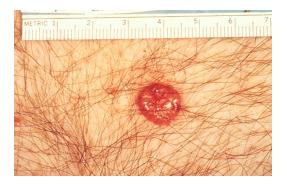
A shiny bump that is white, pink, or red with the appearance of a pearly or clear upper layer.



Patches of irritated skin, usually on the face and chest, that may appear crusty or scaly and feel itchy or painful.



Scar-like patches that look tight and shiny and are often yellow, white, or waxy. These basal cell carcinomas often have ill-defined borders.



An elevated, pink growth that may have a crusty crater in the center. This may present with the appearance of small blood vessels at the surface.

Squamous Cell Carcinoma

Squamous cell carcinoma is a growth that forms in the squamous cells, which make up most of the epidermis. Caused by continual sun exposure during a lifetime, squamous cell carcinoma often shows up as sores, scabby patches of skin, warts, or elevated areas that bleed when bumped.

During your self-examination, look out for:



Crusty or scaly patches that may bleed or peel and persist over time.



Open sores that persist for multiple weeks and may bleed or crust over.



Crater-like growths that are elevated at the perimeter, depressed in the center, and may bleed.



Scaly growths that often appear like a wart, but will bleed and crust-over

How to Examine Yourself for Signs of Skin Cancer

One of the easiest ways to keep up with your monthly head-to-toe self-examination is to incorporate it into your routine, such as before or after a shower. Areas that are most-often exposed to the sun—such as the face, hands, neck, chest, and scalp—have a greater risk of skin cancer, so be sure to pay particular attention to these places.

You'll want to self-examine in a well-lit room with access to both a full-length mirror and hand mirror. While not required, you may find that a partner or friend helps to examine the harder-to-see areas.

Begin by taking off your clothing, facing the mirror, and following this checklist:

- 1. Examine the face, neck, and chest, paying particular attention to the areas around the nose, mouth, and ears.
- 2. Move down each arm and hand, making sure to bend your arms so you can see elbows and forearms. Don't forget to look in the armpits and between the fingers.
- 3. Look at your torso, upper thighs, and legs. Women should also make sure to look under the breast fold.
- 4. Don't forget areas that may not ever see the sun, such as your genitalia. Be sure to check within natural skin folds.
- 5. Check the tops and bottoms of your feet (don't forget between your toes!) and around your ankles. This may be more comfortable from a seated position.
- 6. Using your handheld mirror, work your way back up the backside of your body, starting with the backs of your calves, behind your knees, and around the underside of your buttocks.
- 7. Pay attention to the expanse of your back and the back of your neck, as these areas, even when covered, are often exposed to harmful UV rays.
- 8. Be sure to check behind your ears, including the tips and areas along your hairline.
- 9. Using a blow dryer or a partner, thoroughly examine your scalp. Both sight and touch are beneficial for locating any growths.
- 10. Record or take a picture of any new growths or changes in existing moles.

What to Do When You Suspect Skin Cancer

If you suspect you have a malignant lesion, it is important to contact your dermatologist or plastic surgeon promptly. As a board-certified plastic surgeon, Dr. Garazo can remove your skin cancer and reconstruct the area with the skills and advanced training of an expert cosmetic surgeon.

<u>Dr. Garazo</u> performs modified Mohs surgery and subsequent plastic surgery reconstruction at his <u>AAAASF</u> <u>accredited surgical facility</u>, meaning that you will not have to worry about coordinating reconstruction with an outside surgeon.