Nearly 5 million people are treated for skin cancer each year in the U.S. Everyone — no matter their age, whatever their skin color — is at risk for skin cancer. Whether we’re having fun or putting in a hard day’s work, spending time outdoors can expose us to the dark side of the sun. The bright side is, while skin cancer is the most common, it’s also one the most treatable. The key is knowing it when you see it to help with early diagnosis and treatment. Or, better yet, preventing it in the first place.

What is skin cancer?
Skin cancers are named for the type of cells that become malignant (cancer). The three most common types are:

- **Basal Cell Carcinoma:**
  - Most common form
  - Begins on the outer layer of the skin
- **Squamous Cell Carcinoma:**
  - Begins in squamous cells, found on skin surface, lining or hollow organs and reparaory and digestive tracts
- **Malignant Melanoma:**
  - More serious and aggressive
  - Begins in melanocytes (cells that make pigment melanin)

What does skin cancer look like?
Each type of skin cancer looks different. Also, skin cancer in people with dark skin often looks different from skin cancer in people with fair skin. In general, though, a change on the skin is the most common sign of skin cancer. This may include:

- A sore that does not heal
- A change in a mole
- Areas of the skin that are:
  - Raised, smooth, shiny, and look pearly
  - Firm and look like a scar, and may be white, yellow, or waxy
  - Raised, and red or reddish-brown. Scaly, bleeding or crusty
  - A mark that looks like a thick and jagged scar
  - A dark (or black) bump that may seem waxy or shiny
  - A dark patch or a dark band under a nail

A simple way to remember the signs of melanoma is to remember the A-B-C-D-Es of melanoma—

- “A” stands for asymmetrical. Does the mole or spot have an irregular shape with two parts that look very different?
- “B” stands for border. Is the border irregular or jagged?
- “C” is for color. Is the color uneven?
- “D” is for diameter. Is the mole or spot larger than the size of a pea?
- “E” is for evolving. Has the mole or spot changed during the past few weeks or months?

Any unexplained changes in your skin’s appearance should be evaluated by a doctor.
Check your skin from head to toe
The first step in identifying changes in your skin is identifying your skin’s beginning point. Learn where your birthmarks, moles and other marks are and note their usual look and feel.

› Look at your face, neck, ears, and scalp. You may want to use a comb or a blow dryer to move your hair so that you can see better. You also may want to have a relative or friend check through your hair. It may be hard to check your scalp by yourself.

› Look at the front and back of your body in the mirror. Raise your arms and look at your left and right sides.

› Bend your elbows. Look carefully at your fingernails, palms, forearms (including the undersides), and upper arms.

› Examine the back, front, and sides of your legs. Also look around your genital area and between your buttocks.

› Sit and closely examine your feet, including your toenails, your soles, and the spaces between your toes.

If you notice a change, see your physician without delay. The key to successful cancer treatment is early detection.

Diagnosing and treating melanoma
The following tests and procedures can help find and diagnose melanoma:

Skin exam: Doctor or nurse checks the skin for moles, birthmarks, or other pigmented areas that look abnormal in color, size, shape, or texture.

Biopsy: Procedure to remove the abnormal tissue and a small amount of normal tissue around it to detect cancer cells.

Staging: Process used to find out whether or not cancer, if present, has spread.

If melanoma is detected...
There are five types of standard treatment are used:

Surgery to remove the tumor is the primary treatment

Chemotherapy may be used to stop the growth of cancer cells

Radiation therapy may be used to stop or keep cancer cells from growing

Biologic therapy is a treatment that uses the patient’s immune system to fight cancer

Photodynamic therapy is a treatment using a drug and a certain type of laser light to kill cancer cells.

Risks for skin cancer

Sunlight: Sunlight is a source of ultraviolet radiation either from the sun or from artificial tanning sources like tanning beds. It’s the most important risk factor for any type of skin cancer.

Severe, blistering sunburns: People who have had at least one severe, blistering sunburn are at an increased risk of skin cancer.

Lifetime sun exposure: The total amount of sun exposure over a lifetime is a risk factor for skin cancer.

Tanning: Although a tan slightly lowers the risk of sunburn, even people who tan well without burning have a higher risk of skin cancer.

There is no such thing as a “safe tan”

Additional risk factors :
- Family history of skin cancer
- Lighter natural skin color
- Blond or red hair
- Skin that burns, freckles, reddens easily, or becomes painful in the sun
Protecting your skin

Since ultraviolet light, found in sunlight and tanning bed bulbs, is the main culprit behind skin cancer, there are two rather obvious solutions to protecting yourself from skin cancer.

What to do and what not to do

› Stay out of the sun as much as you can, especially between 9 a.m. and 3 p.m. Daylight savings time. (9-3 standard time).
› Don’t use tanning beds, booths or lamps

What to wear

Wearing certain clothing can also help protect from the sun:

Clothes

› Long-sleeved shirts, pants and skirts
› Darker colored clothes
› Dry clothes

Hats

› Wear a hat with a wide brim to shade face, head, ears and neck
› “Shade cap”: a baseball cap with fabric draping down the sides and back
› Regular baseball caps do not protect the necks and ears
› Straw hats are not recommended unless they are tightly woven

ANSI UV Sunglasses

› Wear sunglasses that block both UVA and UVB rays.
› If they aren’t labeled, they aren’t UV protective

What to know

› You can get burned on a cloudy day
› The sun’s rays can reach down into three feet of water
› Sunlight can be reflected by sand, water, snow, ice, and pavement. The sun’s rays can get through clouds, windshields, windows, and light clothing
› Some medications may increase your skin’s sensitivity to the sun – ask your doctor or pharmacist

What to use and when

› Use sunscreen lotions with a sun protection factor (SPF) of at least 15. (Some doctors will suggest using a lotion with an SPF of at least 30. Make sure the sunscreen provides protection from both UVA and UVB rays.)
› Apply the recommended amount to uncovered skin 30 minutes before going outside
› Apply again every two hours or after swimming or sweating


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