

FACTSHEET - SKIN CANCER

ISSUED 18 NOVEMBER 2008

Skin cancer is the most common form of cancer in Australia. Skin cancer is normally divided into two categories: non-melanoma skin cancers and melanoma. Non-melanoma skin cancers include basal cell carcinoma and squamous cell carcinoma. It is a good idea to talk to your doctor about your level of risk and for advice on early detection.

What is skin cancer?

- Skin cancer is a disease of the body's skin cells caused mainly by ultraviolet radiation from the sun.
- Skin cancer is the most common form of cancer in Australia.

What is basal cell carcinoma?

- Basal cell carcinoma (BCC) is the most common form of skin cancer.
- It usually develops as a small, round, raised, red, pale or pearly-coloured spot, and it may become ulcerated like a sore that will not heal.
- BCCs do not normally spread to other parts of the body.

What is squamous cell carcinoma?

- Squamous cell carcinoma (SCC) is the second most common form of skin cancer.
- It normally appears as a thickened red, scaly spot that may later bleed easily or ulcerate.
- SCCs mainly develop on areas of the body that are exposed to ultraviolet radiation.
- SCCs can spread to other parts of the body if not treated.

What is a melanoma?

- Melanoma is a less common form of skin cancer, but the most dangerous.
- Melanoma can spread to other parts of the body unless treated early.
- Melanoma appears as a new or existing spot, freckle or mole that changes in colour, size or shape.
- A melanoma usually has an irregular or smudgy outline and can be more than one colour.
- A melanoma can grow over weeks to months, and can appear anywhere on the body, including areas of the body that aren't exposed to ultraviolet radiation from the sun.

How are skin cancers treated?

- Skin cancers are usually curable if detected early.
- Your doctor will decide on a treatment based on a number of factors, including the location of the cancer, how big the cancer is and whether it has spread to other parts of your body.
- Treatment will involve removing the cancer, by carefully cutting

out the affected area. This is called a local excision. Other removal methods include cryotherapy (freezing with liquid nitrogen), radiation or anticancer drugs applied to the skin.

What are the main risk factors for skin cancer?

Anyone can develop skin cancer but risk is increased for people who:

- were exposed to high levels of ultraviolet radiation during childhood and adolescence
- had repeated exposure to ultraviolet radiation over their lifetime
- had episodes of severe sunburn
- have a light complexion (red or fair hair, blue or green eyes, skin that burns readily, freckles and doesn't tan easily)
- are older (as the risk increases with age)
- have had a previous non-melanoma skin cancer
- have a personal or family history of melanoma
- have a large number of moles, especially unusual types of moles (e.g., dysplastic naevus)
- have a suppressed immune system.

How can I best look after my skin?

- To prevent skin cancer you should try to avoid the sun, but when outside you should:
 - wear protective clothing that covers your body
 - wear a broad-brimmed hat to shade your face and neck
 - wear wrap around sunglasses
 - apply SPF+30 broad-spectrum water-resistant sunscreen every two hours.
- Check your skin regularly to pick up any changes that might suggest a skin cancer. The sooner a skin cancer is identified and treated, the better. Look for:
 - crusty, non-healing sores
 - small lumps that are red, pale or pearly in appearance
 - new spots, freckles or any moles changing in colour, thickness or shape over a period of weeks to months (especially those that are dark brown to black, red or blue-black in colour).
- If you notice any changes consult your doctor immediately.
- If you have previously had any form of skin cancer or there is a history in the family then you should have regular skin checks. Please discuss this with your GP.

For more detailed information about skin cancer, visit the Cancer Council website at www.cancer.org.au, call the Cancer Council Helpline on 13 11 20, or talk to your GP.

NSW  HEALTH

'SKIN CANCER CENTRE SYDNEY' INVESTIGATION: QUESTIONS & ANSWERS

ISSUED 18 NOVEMBER 2008

Some patients treated at the 'Skin Cancer Centre Sydney', 403 George Street Sydney, between 1998 and 2007 may not have received adequate treatment and follow-up. NSW Health has written to those patients at risk, advising them of future management options.

Why is the investigation being conducted?

- NSW Health is conducting an investigation of patients of the private practice, 'Skin Cancer Centre Sydney', following advice received from the Australian Government's Professional Services Review that some patients may not have received adequate treatment and follow-up of skin cancer.
- NSW Health has undertaken to review the pathology records of patients treated at the clinic between December 1998 and December 2007, to identify those who may need further follow-up.
- The Skin Cancer Centre Sydney was located at HCF House, 403 George Street, Sydney

What actions has NSW Health taken?

- NSW Health has brought together an Expert Panel made up of dermatologists, pathologists, a general practitioner and public health specialists to provide advice on the investigation.
- Specialists have reviewed pathology records of people who had visited the clinic to identify which patients may need further follow-up.
- All patients identified as having skin lesions of concern will be contacted by letter. The letter explains the situation and provides advice on future management options.

What if I was a patient at the clinic but I have not been contacted?

- The specialist review of pathology records has found that many patients are not at increased risk because their lesions were not cancerous. These patients do not require any additional follow-up and were not sent a letter.
- It is possible that the addresses supplied to NSW Health may not have been accurate in every case e.g., if a patient had not updated their address with Medicare Australia. If you have not received a letter and are concerned because you had a skin cancer removed at the Skin Cancer Centre Sydney, you should request a routine skin check at your next visit to your GP.

- Another reason is that we know you are (or have been) a patient of either of two large skin cancer clinics in Sydney - the Sydney Melanoma Unit or the Skin and Cancer Foundation of Australia.

How soon should I see a doctor?

- People have been divided into two groups according to their priority for follow-up.
- People who need to see a doctor will be sent a letter that will provide advice about how and when to see a doctor.

What if I have already seen another doctor since?

- If you have seen another doctor who has completed a full skin check since you last attended the clinic, then no further action is required. However, you should advise your GP of this information at your next appointment, and continue to have regular skin checks (at least once per year).
- If you have not had a full skin check since attending the clinic, have one next time you visit your doctor.

What should I tell my doctor?

- If you have received a letter from NSW Health, you should take it with you when you visit your GP, along with the attachments included with the letter. If you have not received a letter but are still concerned, take this factsheet with you and talk to your GP next time you visit. Ask for a full skin check.

How do I find a GP if I don't have one?

- The Divisions of General Practice can give you information about GPs working in your local area. Information about Divisions can be found at <http://www.gp.org.au/nsw.html> or by phoning General Practice NSW on 02 9239 2900.

Do I have to pay to be seen by a GP or specialist?

- Many GPs and specialists do not bulk bill so it is possible that you will have to pay for the cost of your visit.

For more detailed information about skin cancer,
visit the Cancer Council website at www.cancer.org.au,
call the Cancer Council Helpline on 13 11 20, or talk to your GP.

NSW  HEALTH