Connecting the Dots on those Spots

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Sources

All of the photos were taken with permission from the Dermnet NZ website - Dermnet New Zealand after communicating with Dr. Amanda Oakley.

I thank Dr. Oakley for giving me access to photos so that they may be used for educational purposes.
Important Spots / Diagnoses

- Melanoma
- Basal cell carcinoma
- Squamous cell carcinoma
- Actinic Keratoses
- Dysplastic nevi
Take Home points

- PAY Attention to your own body
- TAKE Responsibility for your health
- Focus on the BAD stuff and know when to worry
- EDUCATE yourself
- Get CHECKED regularly at HOME & at the DERMATOLOGIST
PAY Attention to your own body

- Know your spots
- Recognize NEW spots
- Not all spots that are BAD hurt or bleed or cause symptoms
- A lot of MELANOMAs do not cause any symptoms - they just LOOK FUNNY
TAKE Responsibility for your health

- Monthly self-checks
- Avoid tanning booths
- Avoid sunburns
- Use sun protection measures
Focus on the BAD stuff

- Melanoma
- Squamous cell carcinoma
- Unusual growths (Merkel Cell, Lymphoma, Metastases)
EDUCATE yourself

- Knowledge is power

- You have to learn to take more self responsibility for knowing what to look for and when to seek medical attention

- Once you start checking yourself regularly, you will have a sense of what is new or changing

- PREVENTION & EARLY DETECTION is the Key

- Awareness of serious problems from spots that may not change quickly or seem dangerous
Get CHECKED regularly at HOME & at the DERMATOLOGIST
MALIGNANCIES are increasing

Melanoma cases since 1975

SEER 9 Incidence & US Mortality 1975 - 2010
Benign nevus (Mole) – If new or pearly – consider early skin cancer (Basal cell)
Benign nevus – No ABCDEs (Asymmetry / Border / Color / Diameter / Evolution)
Blue Nevus – Consider Melanoma / Tattoo / Combined nevus / Spitz nevus
Halo nevus - Can be benign - However, marker for increased risk for Melanoma - should cause some WORRY in adults
Spitz nevus - Looks like Basal cell / Amelanotic melanoma (melanoma WITHOUT color) / Benign nevus
Basal cell carcinoma – Pearly / Not healing / Ulcer / Raised growing bump
Basal cell – Looks like Fungus / Psoriasis / Squamous cell / Eczema - Rash
Squamous cell carcinoma - Can also be Basal cell / Unusual Merkel cell / Draining cyst
Squamous cell lip - slight surface change - KEY to catch early - HIGHER risk of metastases (spread inside body)
Early Squamous cell – Looks like Eczema / Psoriasis / Fungus – can be there for a long time – May NOT hurt or itch
Seborrheic keratoses – Look ugly but not bad – sometimes MELANOMA can look like these – have to know if spot is NEW or CHANGING QUICKLY
Keratoacanthoma version of Squamous cell carcinoma - can LOOK like a cyst / big whitehead / bite – but comes QUICKLY and GROWS on sun exposed area
Actinic keratoses – Pre cancers – Treated with freezing or creams – if changing, need to BIOPSY to make sure not skin cancer
Actinic Keratoses – Biopsy larger lesions to R/O Squamous cell – like one in the middle
Actinic cheilitis – Watch closely for Squamous cell development – high risk of SPREAD / Metastases
Melanoma with regression – again need to LOOK – these are often flat and do not hurt or bleed – just changing in APPEARANCE / EVOLVING
Nodular Melanoma in a Minimally pigmented Lentigo Maligna Melanoma – Look at the BLUISH DOT – that is the KEY – otherwise not much brown – LOOK at the BIG PICTURE
Amelatonic Melanoma - NO COLOR
MELANOMA - this looks pink - almost HIDDEN - see a tiny bit of color in the middle - grey blue area
Nail Melanoma – VERY DANGEROUS – Often detected late – can SPREAD – Need to LOOK regularly at NAILS under Nail polish regularly
Lentigo Maligna Melanoma – This can sometimes be there for 15 to 20 years – just grows slowly – Will need large surgery if detected late
Amelanotic Melanoma – NO COLOR
MELANOMA – Red or Pink – KEY is EVOLUTION or CHANGE in shape, size, overall appearance
Lentigo Maligna Melanoma mimicking a Seborrheic Keratosis – BAD looking like it is OK – Have to be SUSPICIOUS to come in
Actinic Keratosis - Pre cancer
Actinic Cheilitis – Lip precancer – Need to watch very closely
Dysplastic Nevi – Higher risk for Melanoma or turning into Melanoma
Dysplastic Nevi – Need to biopsy weird ones to make sure it is not Melanoma
Melanoma - ABCDEs fit
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MALIGNANCIES are increasing

- Skin cancers account for about half of all cancer cases in US
- Melanoma cases increased to over 76,000 cases in 2013
- Melanoma risk in Caucasians is now about 2% lifetime risk
- Melanoma cases have risen about 2.8% a year annually
- Basal cell carcinoma cases increased to about 2.8 million cases in 2013
- Squamous cell carcinoma cases increased to about 700,000 cases in 2013
- Non-melanoma treatments have risen by 77% between 1992 to 2006
- Overall skin cancer risk is estimated at 20%
- Actinic keratosis affects about 58 million Americans
- Data from American Cancer Society, the Skin Cancer Foundation, and SEER database