

THE SPOT DETECTIVE

# Freckle, mole or skin cancer?



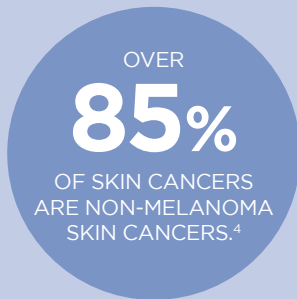
**Learn how skin cancer is detected.  
Find a treatment option that  
works for you.**

# What is skin cancer?<sup>1</sup>

Skin cancer is a common type of cancer that begins in one of the layers of the skin. It is usually, but not always found in areas of skin that have been exposed to the sun. People with fair skin are more prone to skin cancers compared to darker-skinned people. Your risk of skin cancer increases with age.

In Australia we have the highest rate of skin cancers in the world.<sup>2</sup> Around 80% of cancers diagnosed by doctors are skin cancers.<sup>3</sup>

**There are 2 types of skin cancer:  
melanoma and non-melanoma.**



**Risk factors for skin cancer include:<sup>1</sup>**



GETTING TANNED  
OR SUNBURNED



WORKING  
OUTDOORS



NOT WEARING  
SUNSCREEN AND  
SUN PROTECTIVE  
CLOTHING WHEN  
OUTSIDE.

## What skin cancer looks like<sup>5</sup>

Any new or unusual spot, lump or growth on your skin could be a skin cancer. A new mole, a mole that changes in size or shape and looks different to your other moles should be investigated. If a spot or mole is rough, lumpy, itchy, bleeding or weeping, it's important to get it checked.

### Melanoma or non-melanoma: What's the difference?<sup>6</sup>

**Melanoma** is an uncommon type of skin cancer, but it is also the most dangerous one. It can readily spread to other parts of the body. Melanomas begin to form in skin cells called 'melanocytes' and can be red, pink, brown or black. A melanoma requires urgent treatment.

**Non-melanoma skin cancers** are much more common. They don't spread as easily but if left untreated, they will keep growing, destroying more skin and affecting underlying tissues.



MELANOMA



BOWEN'S DISEASE

## Non-melanoma skin cancers

### **Most skin cancers are non-melanoma skin cancers.**

The two main types are basal cell and squamous cell carcinomas. They are named after the type of skin cells they are formed in.

**Basal cell carcinoma.** This type of skin cancer often starts as a growth or sore that won't heal. It may bleed or form a scab.<sup>7</sup>

**Squamous cell carcinoma.** This type of skin cancer may first appear as a firm, red lump or a scaly sore that doesn't heal.<sup>8</sup>



BASAL CELL  
CARCINOMA



SQUAMOUS CELL  
CARCINOMA

## How your doctor diagnoses skin cancer<sup>10</sup>

If you have discovered a suspicious spot, your GP is usually your first port of call. They have been trained to detect skin cancers. Your GP may refer you to a dermatologist or surgeon. You can also go directly to a skin cancer clinic.

Your treating doctor will look carefully at the spot and may check the rest of your body as well.

A biopsy (where a small part of the spot is removed and sent for testing) is often performed. Sometimes a biopsy will remove all of a skin cancer and no further treatment is needed.

# How to check your skin for cancers<sup>9</sup>



To do a thorough skin check, find a room with good light. Examine every inch of your body in the mirror, even the areas that aren't exposed to the sun. To check the areas you can't see, use a hand mirror or ask someone to help.

Not all skin cancers look the same, so look out for:<sup>9</sup>



A spot that looks or feels different from other spots on your skin



A spot that has changed size, shape, colour or texture



A sore that doesn't heal normally



A sore that is itchy or bleeds.

# How skin cancer is treated<sup>10,11</sup>

**Treatment depends on the type of skin cancer and how advanced it is.** If not treated early, skin cancer can spread which makes treatment more complicated. For melanomas and some non-melanoma skin cancers, the doctor will most likely recommend surgery and/or radiation therapy. Your doctor may also recommend targeted therapy and/or immunotherapy drugs.

## Non-melanoma skin cancer treatment options<sup>8</sup>

**Rhenium-188 therapy.** This is a type of localised radiation therapy that doesn't use X-rays. Instead it uses a rhenium-188 isotope which is applied as a paste for a single session\* lasting 45 to 180 minutes.<sup>16,17,18</sup> It is painless<sup>+</sup> and non-invasive.<sup>16,17</sup> A crust or scab forms that may become itchy. Rhenium-188 therapy leaves no scar but the skin may appear lighter.<sup>18</sup>

**Surgery** is also a common treatment option for non-melanoma skin cancer; in particular 'Mohs' surgery. This is an invasive procedure to remove the cancer in several steps. First, a thin layer of tissue is removed. Then, a second thin layer of tissue is removed and viewed under a microscope to check for cancer cells. Layers are removed one at a time until the tissue viewed under a microscope shows no remaining cancer.

**Electrodesiccation and curettage** is an option for some non-melanoma skin cancers. The doctor scoops out the cancer with a small, spoon-shaped instrument, then seals the wound and destroys any remaining cancer cells using heat.<sup>14</sup>

**External beam radiation** is sometimes used instead of surgery, especially for large non-melanoma skin cancers or for people who are not well enough to have surgery.<sup>15</sup> It uses a beam of electrons to kill the cancer cells.

## How skin cancer is treated<sup>10,11</sup> (continued)

**Light-based treatment** may be recommended for early non-melanoma skin cancers. For 2-3 weeks the skin is prepared by applying cream or ointment daily. Then the doctor places you under an LED phototherapy lamp. This provokes an immune reaction by your body which kills the skin cancer. The process may or may not be painful.<sup>11</sup>

**Cryotherapy (freezing).** This can be used for small, shallow skin cancers. After applying an anaesthetic, the doctor uses liquid nitrogen to freeze the cancer and destroy the cells. A blister or sore may form which heals, revealing healthy skin. Reduced skin pigmentation may occur.<sup>11</sup>

**Topical treatment.** For Bowen's disease (a mild, slow-growing type of skin cancer), a chemotherapy cream can be applied to the skin for a period of time. Burning, redness and sores may occur.

### Melanoma treatment options<sup>10,11</sup>

**Surgery** is the most common first line therapy. The doctor first applies an anaesthetic, then cuts out the cancerous tissue. They may close the wound with stitches. For larger cancers, a skin graft from another part of your body may be required. Surgery may leave a scar.

**Radiation therapy.** This type of treatment uses a controlled dose of strong x-rays to kill or damage the skin cancer cells.<sup>12,15</sup>

**Targeted therapy** is a drug treatment used to treat skin cancer that has already spread. It may be combined with lymph node surgery if your cancer has reached the lymph nodes.<sup>13</sup>

**Immunotherapy drugs** can also be used in advanced skin cancers to help your body fight the cancer.<sup>13</sup>

<sup>\*</sup>Complete tumour regression in 98.5% of lesions treated.<sup>1</sup>No reported pain. <sup>†</sup>A procedure is considered non-invasive when no break or cut in the skin is created.<sup>19</sup>

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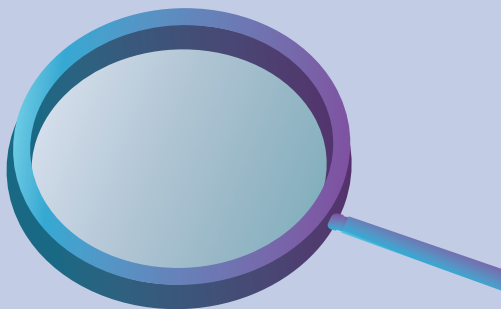
# Who are The Spot Detectives?

**The Spot Detectives** are those people who are qualified to assess, diagnose and recommend suitable treatments for skin cancers. They are dermatologists, GPs and skin health specialists. They will encourage you to perform regular skin health checks yourself, and if you find any suspicious spots, then seek their advice.

**Find out more about non-melanoma skin cancer and your treatment options:**







**References:** 1. What is skin cancer? Available at <https://www.cancer.org.au/cancer-information/types-of-cancer/skin-cancer> [Accessed October 2022]. 2. SunSmart national position statement. Available at: <https://www.cancer.org.au/about-us/policy-and-advocacy/position-statements/sunsmart> [Accessed October 2022]. 3. Skin cancer. Available at: <https://www.cancer.org.au/cancer-information/types-of-cancer/skin-cancer> [Accessed October 2022]. 4. Skin cancer by state and territory. Available at: <https://www.racgp.org.au/afp/2014/august/skin-cancer-by-state-and-territory> [Accessed October 2022]. 5. Check for signs of skin cancer. Available at <https://www.cancer.org.au/cancer-information/causes-and-prevention/sun-safety/check-for-signs-of-skin-cancer> [Accessed October 2022]. 6. Skin cancer and melanoma. Available at <https://www.healthdirect.gov.au/skin-cancer-and-melanomas> [Accessed October 2022]. 7. Basal cell carcinoma. Available at <https://www.mayoclinic.org/diseases-conditions/basal-cell-carcinoma/symptoms-causes/syc-20354187> [Accessed October 2022]. 8. Squamous cell carcinoma of the skin. Available at <https://www.mayoclinic.org/diseases-conditions/squamous-cell-carcinoma/symptoms-causes/syc-20352480> [Accessed October 2022]. 9. Checking for skin cancer. Available at: <https://www.cancercouncil.com.au/cancer-prevention/screening/checking-for-skin-cancer> [Accessed October 2022]. 10. Diagnosis and treatment of skin cancer. Available at <https://www.sunsmart.com.au/skin-cancer/diagnosis-treatment-of-skin-cancer> [Accessed October 2022]. 11. Skin cancer. Available at: <https://www.mayoclinic.org/diseases-conditions/skin-cancer/diagnosis-treatment/drc-20377608> [Accessed November 2022]. 12. Radiation therapy for skin cancer. Available at <https://www.cancercouncil.com.au/skin-cancer/treatment/radiotherapy/> [Accessed October 2022]. 13. Melanoma: types of treatment. Available at: <https://www.cancer.net/cancer-types/melanoma/types-treatment#advanced-melanoma> [Accessed November 2022]. 14. Curettage and electrodesiccation. Available at: <https://www.cancercouncil.com.au/skin-cancer/treatment/curettage-and-cautery> [Accessed November 2022]. 15. Radiation therapy for basal and squamous cell skin cancers. Available at <https://www.cancer.org/cancer/basal-and-squamous-cell-skin-cancer/treating/radiation-therapy.html> [Accessed October 2022]. 16. Castellucci P, *et al.* *Eur J Nucl Med Mol Imaging.* 2021;48(5):1511-1521. 17. Cipriani C, *et al.* *J Dermatol Treat.* 2020;DOI:10.1080/09546634.2020.1793890. 18. Data on file. OncoBeta, Garching, Germany. 19. Australian Therapeutic Goods Administration. ARTG Public summary 351390.