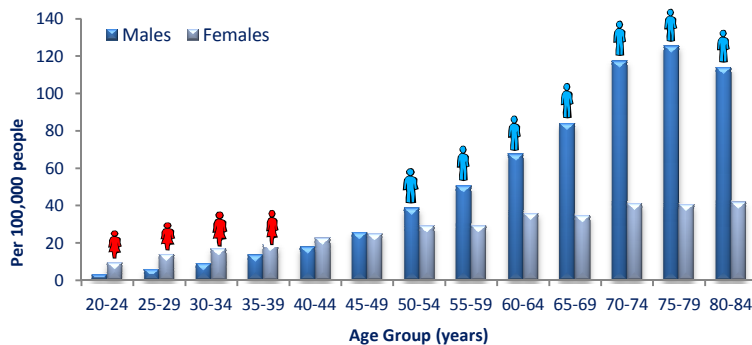




# MELANOMA/SKIN CANCER

**MELANOMA/SKIN CANCER** is an uncontrolled growth and spread of cells or lesions in the epidermis (the outer layer of skin). According to [The Surgeon General's Call to Action to Prevent Skin Cancer](#), skin cancer is the most commonly diagnosed cancer in the United States, with 5 million people treated each year. The two most common forms of non-melanoma skin cancers (NMSCs) are basal cell and squamous cell carcinoma. Melanoma accounts for 1 percent of skin cancer cases, but causes the most skin cancer deaths.<sup>1</sup> Overall, the lifetime risk of getting melanoma is about one in 50 for whites, one in 1,000 for African-Americans and one in 200 for Hispanics.<sup>2</sup>

**Figure 1. Incidence of Melanoma Skin Cancer by Age Group and Sex—Indiana, 2010-2014**



= Significantly elevated ( $P < .05$ ) among males compared to females  
 = Significantly elevated ( $P < .05$ ) among females compared to males

Source: Indiana State Cancer Registry

**MELANOMA/SKIN CANCER** is highly preventable. Risk increases with excessive exposure to ultraviolet (UV) radiation from the sun or other sources, such as tanning beds. UV exposure from indoor tanning is completely avoidable. Over 400,000 cases of skin cancer, about 6,000 of which are melanomas, are related to indoor tanning in the United States each year.

**Figure 2. Burden of Melanoma—Indiana, 2010-2014**

	Average number of cases per year 2010-2014	Rate per 100,000 people* 2010-2014	Number of cases 2014	Rate per 100,000 people* 2014
<b>Incidence</b>	1,259	17.9	1,358	18.9
<b>Mortality</b>	212	3.0	196	2.7

\*Age-adjusted  
 Source: Indiana State Cancer Registry, Internal Data

*Note: The number of NMSCs is difficult to estimate because these cases are not required to be reported to the Indiana State Cancer Registry. According to one report, in 2006, an estimated 3.5 million cases of NMSC occurred among U.S. residents. Because of the limitations of the NMSC data, most of the data reported in this fact sheet are only for melanoma.*

## Who Gets Melanoma/Skin Cancer Most Often?

People of all ages, races and ethnicities are subject to developing skin cancer. Some risk factors include:

- ❑ **Age.** During 2010-2014, over 67 percent of melanoma cases occurred among Indiana residents ages 50 and older. However, nationally, melanoma is on the rise among younger people.
- ❑ **Sex.** Overall, during 2010-2014, the incidence rate for melanoma among Indiana males was 27 percent higher than among females. However, before the age of 50, the incidence rate among females was 72 percent higher than among males. Then, among people ages 55 and older, males had more than twice the risk that females did.
- ❑ **Race.** During 2010-2014, the risk of melanoma was 21 times higher for Indiana whites than for African-Americans; however, anyone can develop the disease.
- ❑ **Fair to light skinned complexion.** Freckles are an indicator of sun sensitivity and sun damage.
- ❑ **Hair and eye color.** People with natural blonde or red hair or blue or green eyes are more susceptible to a higher risk of developing melanoma.
- ❑ **Multiple or atypical nevi (moles).** People who have a large number of moles (more than 50) often have a higher risk of developing melanoma.
- ❑ **Family history.** The risk for developing melanoma is greater for someone who has had one or more close relatives diagnosed with the disease.
- ❑ **Excessive exposure to UV radiation from the sun and tanning beds.** The U.S. Department of Health and Human Services and the International Agency of Research on Cancer Panel declared UV radiation from the sun and artificial sources, such as tanning beds and sun lamps, a human carcinogen, based on sufficient evidence of carcinogenicity from studies in humans.
- ❑ **History of sunburn.** Sunburn at an early age can increase a person's risk for developing melanoma and other skin cancers as they age.
- ❑ **Diseases that suppress the immune system.**
- ❑ **Past history of basal cell or squamous cell skin cancers.**
- ❑ **Occupational exposure to coal tar, pitch, creosote, arsenic compounds, radium or some pesticides.**



## Common Signs and Symptoms of Melanoma

A simple **ABCDE** rule outlines some warning signs of melanoma:

- ❑ **A = Asymmetry:** One half of the mole (or lesion) does not match the other half.
- ❑ **B = Border:** Border irregularity; the edges are ragged, notched or blurred.
- ❑ **C = Color:** The pigmentation is not uniform, with variable degrees of tan, brown or black.
- ❑ **D = Diameter:** The diameter of a mole or skin lesion is greater than 6 millimeters (or the size of a pencil eraser). Any sudden increase in size of an existing mole should be checked.
- ❑ **E = Evolution:** Existing moles changing shape, size or color over time.

Because skin cancer may appear differently on different people, it is important for Hoosiers to talk to their health care provider about any changes in moles or the skin.

## Early Detection

- ❑ The best way to detect skin cancer early is to recognize changes in skin growths or the appearance of new growths. Adults should thoroughly examine their skin regularly, preferably once a month. New or unusual lesions or a progressive change in a lesion's appearance (size, shape, color, etc.) should be evaluated promptly by a health care provider.
- ❑ Melanomas often start as small, mole-like growths that increase in size and might change color. Basal cell carcinomas might appear as growths that are flat, or as small, raised, pink or red, translucent, shiny areas that might bleed following minor injury. Squamous cell cancer might appear as growing lumps, often with a rough surface, or as flat, reddish patches that grow slowly.

## Community Resources

- ❑ For a melanoma/skin cancer toolkit with resources and information, visit [www.indianacancer.org/skin\\_cancer\\_toolkit/](http://www.indianacancer.org/skin_cancer_toolkit/).
- ❑ Read *The Surgeon General's Call to Action to Prevent Skin Cancer* at [www.surgeongeneral.gov/library/calls/prevent-skin-cancer/index.html](http://www.surgeongeneral.gov/library/calls/prevent-skin-cancer/index.html).
- ❑ To learn more about the melanoma/skin cancer burden in Indiana, refer to the *Indiana Cancer Facts and Figures 2015* report at [www.indianacancer.org](http://www.indianacancer.org).
- ❑ For more information on how to protect your skin and yourself, visit [Outrun the Sun, Inc.](http://www.outrunthesun.org), Indiana's only nonprofit organization dedicated to supporting skin cancer education and melanoma research, at [www.outrunthesun.org](http://www.outrunthesun.org).

## References

1. American Cancer Society. *Cancer Facts & Figures 2016*. Atlanta: American Cancer Society, 2016.
2. American Cancer Society. *Melanoma Skin Cancer Overview*. 2013. Accessed at [www.cancer.org/cancer/skincancer-melanoma/detailedguide/index](http://www.cancer.org/cancer/skincancer-melanoma/detailedguide/index) on May 20, 2016.

## TAKE ACTION: Steps you can take to help prevent skin cancer

- ❑ Limit or avoid exposure to the sun during peak hours (10 a.m. to 4 p.m., March through October, and 9 a.m. to 3 p.m., November through February).
- ❑ Wear sunscreen. The Surgeon General's call to action suggests Hoosiers wear sunscreen with a Sun Protection Factor (SPF) of 15 or more that protects you from all types of UV radiation (UVA and UVB). These are called "Broad Spectrum" sunscreens.
- ❑ Wear clothing that has built-in SPF in the fabric or wear protective clothing such as long sleeves and long pants (tightly woven dark fabrics protect your skin better than lightly colored, loosely woven fabrics).
- ❑ Wear a hat that protects your scalp and shades your face, neck and ears.
- ❑ Avoid use of tanning beds and sun lamps.
- ❑ Wear sunglasses to protect your eyes from ocular melanoma (melanoma of the eye).
- ❑ ALWAYS protect your skin—your skin is still exposed to UV rays even on cloudy days and during the winter months. Use extra caution around water, snow and sand, as they reflect the sun's UV rays.

## GET INVOLVED: Join the Indiana Cancer Consortium (ICC)

- ❑ The ICC is a statewide network of over 100 agencies including the Indiana State Department of Health.
- ❑ The ICC seeks to reduce the cancer burden in Indiana through the development, implementation and evaluation of a comprehensive plan that addresses cancer across the continuum from prevention through palliation.
- ❑ Become a member at [www.indianacancer.org](http://www.indianacancer.org).