Protect & Inspect *against* **Melanoma** Skin Cancer

How to be SunSmart and look out for warning signs

Skin Cancer

Skin cancer* is the most common cancer in Ireland and in pale/light skinned populations worldwide for whom sunburn is a risk factor.

In most cases, it is also one of the most preventable forms of cancer – the vast majority are associated with overexposure to ultraviolet radiation (UV), mainly from sunlight. However, UV from artificial sources e.g. sunbeds, also causes skin cancer.

Of the different types of skin cancer, melanoma is not the most common but raises the greatest concern as if not detected early, it can spread to other parts of the body where it becomes difficult to treat and can be fatal. Early identification and removal of a melanoma gives the best opportunity for cure.

What is a melanoma?

Melanoma is a type of cancer that arises in the pigment producing skin cells called melanocytes. Melanocytes produce a pigment called melanin that gives skin, eyes and hair their colour, but also help defend skin cells from UV. Melanomas can appear on apparently normal looking skin as a new growth that continues to change, or arise from a pre-existing mole** which grows or changes in appearance.

Risk factors for melanoma

While anyone can develop a melanoma, several factors can increase the risk.

- Occasional, intense sun exposure
- Sunburn, particularly during childhood
- Sunbed use
- A previous melanoma or other non-melanoma skin cancer
- Multiple large or unusual moles
- Immunosuppression
- Many moles (of different sizes, shapes and colours)
- A pale complexion: pale skin, blue eyes, red/blonde hair, freckles
- A family history of melanoma

Melanoma and skin of colour***

Although there is a lower incidence of melanoma in individuals with dark skin or skin which darkens easily when exposed to sunlight and rarely if ever burns, those that occur are often detected later at a more advanced/dangerous stage. There is insufficient evidence that UV is a risk factor for melanoma in skin of colour (typically Fitzpatrick skin types 4 to 6), which more commonly occurs on sun-protected sites such as the palms, soles, or under nails. **If you are concerned about a change or growth on your skin, you should always see your doctor.**

What is solar UV?

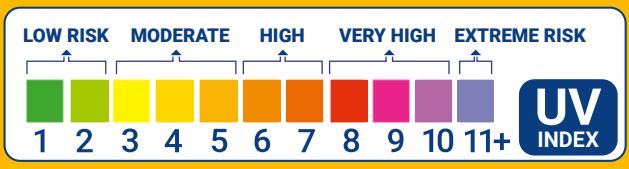
UV is one of the three major components of sunlight, which include visible light and infrared (heat). The two types of UV that are of most concern when it comes to skin health are UVA and UVB.

Overexposure to UV can cause sunburn, skin and eye damage, premature skin ageing and skin cancer.

UV rays are present all year round but levels vary, depending on things like: your location, time of year, time of day and weather conditions.

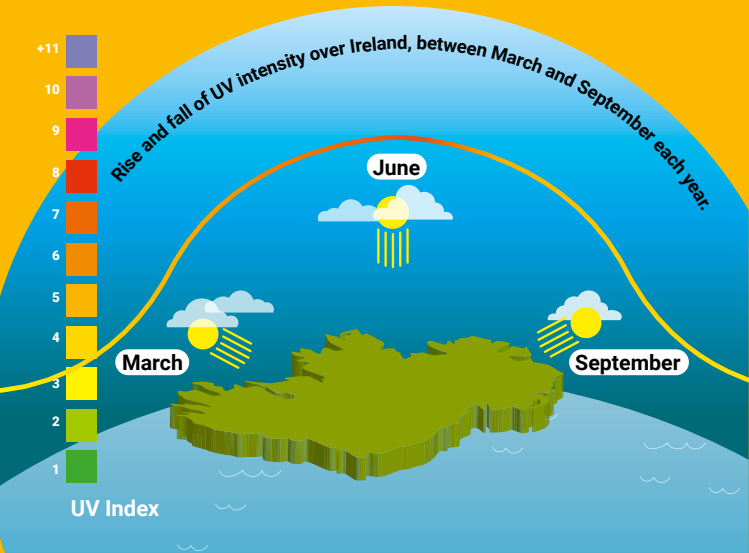
Confused about the UV index?

The UV index measures the UV level at the surface of the Earth. It ranges from 0 -11+; the higher the number, the greater the risk of sunburn, which is mainly caused by UVB.



UV cannot be seen or felt so we need to defend ourselves against overexposure. For example, getting 'wind burn' on a hazy day is really sunburn! UV damage adds up over a lifetime!

In Ireland, make sun protection part of your daily routine particularly from April - September, when the intensity of sunburn producing UV is greatest.



Protect your skin

Enjoy time outdoors. Be SunSmart:

Make sun protection part of your daily routine **especially** from **April - September**, even when it is cloudy! Stay safe by limiting time in the midday sun when UV is strongest, typically between the hours of **11am-3pm**.

Remember the five 'Ss' of sun safety:

Seek shade e.g. sit in cover of trees to avoid direct sunlight and use a sunshade on your buggy or pram.

Slip on clothing: Cover skin as much as possible e.g. wear long sleeves, collared t-shirts, clothes made from close-woven material that does not allow sunlight through.

Slap on a hat with a wide (7cm+) brim and a UPF† rating of 50: Protect your face, ears and neck.

Slop on broad-spectrum (UVA/UVB) sunscreen with a sun protection factor (SPF) of at least 30+ for adults and 50+ for children, with high UVA protection, and water resistant. Reapply regularly.

Slide on sunglasses with UV protection: Guard your eyes from harm.

Protect your family:
Babies and young children are particularly vulnerable to the harmful effects of overexposure to the Sun.

Remember:
Do not deliberately suntan.
Avoid sunbathing/sunburning.
Never ever use a sunbed!

There is **no safe limit** for exposure to UV from sunbeds.††

Most people don't apply sunscreen correctly. Here's how it's done:

Correct amount: You should apply at least one teaspoon to each body part.

- Head/face/neck
- Each arm
- Each leg
- Your front
- Your back

Correct locations: Don't forget your ears, your nose, your lips (choose a broad-spectrum lip balm), your neck, the tops of your feet and if your hair is thinning, your scalp!

Correct timing: Apply sunscreen at least 20-30 minutes before you go out in the sun.

Correct frequency: Reapply frequently, at least every two hours and after exercising, sweating, swimming, or towel drying.

Correct use: No sunscreen can provide 100% UV protection. Broad-spectrum sunscreen should be used alongside other protective measures such as clothing and shade.

Know your medications: Some medicines can increase sensitivity to sunlight.

Home or abroad: Whether working, relaxing or playing outside, on holiday either at home or abroad, remember to enjoy the sun safely. Be SunSmart!

Avoid Sunburn!

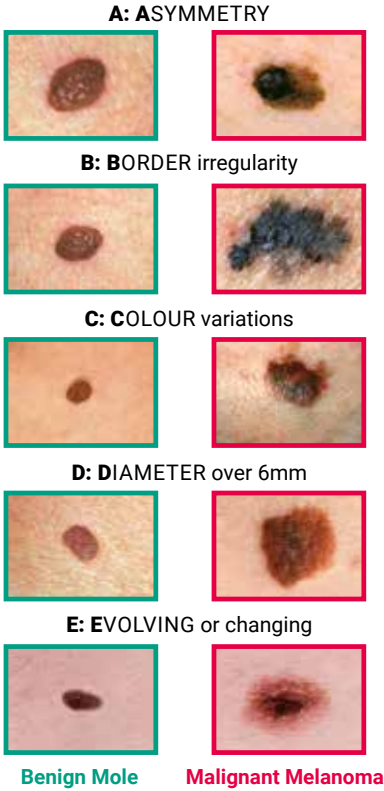
What warning signs should you look out for?

Anything **new, different** and **changing** on both **sun-exposed** and **sun-protected** parts of the body.

Be alert for a new and changing mole, or the change in appearance of an existing mole.

Things to watch out for include: changes in shape, colour, size or if you notice bleeding, itch, pain or ulceration. The **ABCDE** method indicates some changes to look for, to help detect a melanoma.

ABCDE Method



Not all melanomas follow the clues of ABCDE. You should check any skin growth that is changing.

The 'Ugly Duckling' method

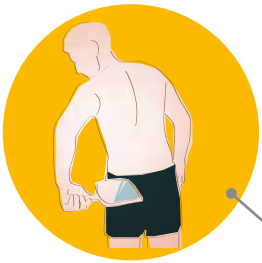
A person's 'normal' moles tend to look alike, resembling each other in shape, colour and size. Check for any mole that is different from the others, the so called 'ugly duckling', especially if that mole is new or has recently changed.

Inspect your skin

Melanomas can occur anywhere on the body, including areas that are protected from the sun. It is important to be familiar with your own skin so that you will notice any changes. Often melanomas are detected by the person affected themselves, or their partners. Ideally you should inspect your skin once a month. Check the whole of your body from head to toe. Undress completely.

Use a well-lit room for self-skin examination

Check your head, face and neck. Use a mirror to examine behind your ears. A hairdryer can be useful when checking your scalp.



Check your front, from your chest right down to your hips. Use a mirror to inspect your back, or ask your partner, a family member or friend.

Check arms, underarms and both sides of hands, including nails.

Examine lower body, checking buttocks, genitalia, front and back of legs, both feet including the soles, in between the toes and toenails (look out for a dark spot under the finger or toenail).

Don't ignore a new pink/red bump on your skin that doesn't go away.

If you are concerned about a change or growth on your skin, you should always see your GP or dermatologist.

Some important terms explained:

***Skin cancer** is the abnormal, uncontrolled growth of skin cells. Skin cancers are generally divided into two main types: melanoma and non-melanoma skin cancer (also known as keratinocyte cancer). Non-melanoma skin cancer includes basal cell carcinoma and squamous cell carcinoma.

****Moles** are normal non-cancerous clusters of pigment producing skin cells called melanocytes.

*****Skin of colour** describes a spectrum of darker pigmented skin, seen among people across the world. Skin varies in susceptibility to damage from UV, depending on factors like individual level of pigmentation (natural skin colour) and how the skin reacts to sunlight (whether it burns easily or tans). The variation in a person's response to UV can be broadly classified on a scale – the **Fitzpatrick Classification of Skin Types**, which ranges from 1 (high risk) to 6 (low risk). People with skin of colour tend to be comparatively less vulnerable to UV damage than people with lighter skin pigmentation.

THE FITZPATRICK SKIN TYPE CLASSIFICATION

†**Ultraviolet Protection Factor (UPF)** indicates how much of the Sun's UV rays (both UVA and UVB) the clothing allows to reach the skin; a higher rating indicates better protection e.g. UPF 50 blocks 98% of the Sun's UV rays, so significantly reducing UV exposure for the skin covered by that fabric.

††**Source:** SCHEER (Scientific Committee on Health, Environmental and Emerging Risks), Opinion on Biological effects of ultraviolet radiation relevant to health with particular reference to sunbeds for cosmetic purposes, © European Union 2017.

This leaflet has been prepared by the Irish Skin Foundation (ISF) in consultation with people affected by melanoma, dermatology nurses and consultant dermatologists.

The prevention of skin cancer caused by natural and artificial UV is the particular emphasis of the ISF's work in the area of skin cancer.

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First published April 2017, updated May 2019, April 2022 and January 2024.

ISBN 978-1-7385137-0-3