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Be wary of moles and bumps that change in size and color.

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X-rays to kill cancerous cells—is an option. For those with melanoma that has spread, chemotherapy (which uses injected drugs to destroy the cancer) is used. Doctors determine if this has occurred by feeling the lymph nodes (structures that produce and store infection-fighting cells) close to the tumor. If these are enlarged, they're biopsied to determine if cancerous cells are present. If they're found, other nodes are tested. One chemotherapy drug called thalidomide (Thalomid) has been shown to be effective when given to patients orally instead of through injections.

Sometimes people develop precancerous growths called actinic keratoses, which are important to have checked by a doctor. She will likely recommend that these scaly patches and roughed brown spots be removed with cryotherapy. If you have numerous lesions, she may prescribe chemotherapy creams such as 5-fluorouracil (Efudex and Carac), which destroy harmful cells without harming normal ones. Redness, crusting and peeling of the skin being treated is normal and a sign that the medicine is working. Sunscreen can also help prevent actinic keratoses from developing into non-melanoma skin cancer, as can lotions that contain the ingredient tretinoin (such as Retin-A and Renova).

Newest Anti-Cancer Creams and Drugs

An exciting development in the treatment of actinic keratoses is imiquimod (Aldara), a prescription cream already on the market for the treatment of warts. While imiquimod has not yet been approved for actinic keratoses, it has been through phase-three trials for this indication, and according to Dr. Naylor, it's only a matter of time before it is on the market as a skin cancer treatment. Imiquimod may also prove effective in treating basal-cell carcinoma, according to Hensin Tsao, M.D., Ph.D., assistant professor of dermatology at Harvard Medical School.

Another cream that is helpful for precancerous lesions is diclofenac (Solaraze). This prescription product is a topical nonsteroidal anti-inflammatory drug (NSAID) that causes actinic keratoses to gradually regress.

NSAIDs such as aspirin and its derivatives are also being studied for their usefulness in the prevention—and reversal—of skin cancer. "Aspirin has been shown to help prevent the development of colon cancer," says **Dr. Spencer**, "and research reveals that it may one day be reasonable for people at high risk for any type of skin cancer to take it as a preventative." NSAIDs, however, can be rough on the stomach and can cause side effects such as stomach ulcers when taken on a regular basis. So until more research is out there and dosages have been worked out, it's best not to take aspirin for skin cancer prevention unless under a doctor's supervision.

Along the same lines, researchers are currently studying a group of NSAIDs called COX-2 inhibitors (such as Celebrex, which is approved by the Food and Drug Administration for the treatment of arthritis) because they are easier on the stomach than aspirin. Again, more research will be necessary, but be on the lookout for this possible preventative treatment.

Scientists are also experimenting with botanicals for skin cancer prevention, says **Dr. Spencer**. They have isolated a compound from soybeans called genistein that has been used topically and orally in mice to prevent skin cancer after they were exposed to UV light. Similarly, polyphenolic antioxidants derived from green tea, milk thistle and grape seeds have been used topically and orally in mice to prevent skin cancer. The possible implications for humans are promising. Also being looked at in the labs now for skin cancer prevention is a substance called lycopene, which is found in tomatoes. Vitamin A derivatives work but have serious side effects and are used only on the most high-risk patients.

Skin cancer is one of the most preventable diseases.

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While Soper finally learned she needs to be serious about skin cancer prevention, sadly, many Americans haven't. According to the American Cancer Society, more than one million new cases of non-melanoma skin cancer will be diagnosed this year, as will 54,200 melanoma cases. One in five Americans will ultimately develop skin cancer, which is the most common cancer, accounting for more than 50 percent of malignancies. This means skin cancer is as prevalent as all other forms of cancer combined. The incidence of all types of skin cancer is on the rise.

The irony of these statistics is that skin cancer is preventable. Most cases are caused by exposure to UV light from sun and tanning beds, says **James Spencer, M.D.**, vice chairman of the department of dermatology at Mount Sinai School of Medicine in New York City. (In rare cases, it occurs on skin that hasn't been exposed to sun.)

What's more, skin cancer is visible, making it easier to detect than other

cancers such as colon or breast cancer. "If skin cancer is caught and treated early," says **Dr. Spencer**, "theoretically the survival rate could be 100 percent."



Micki Soper, pictured right, now wears sunscreen religiously and teaches her grandkids to do the same.