



Early detection of skin cancer

Most skin cancer can be successfully treated if it is found early. But without treatment, skin cancer can be deadly.

Get to know your skin and what looks normal for you to help you find changes earlier. Don't rely on an annual skin check to detect suspicious spots.

Check all of your skin – not just sun-exposed areas.

If you notice any new spots or changes in the colour, size or shape of existing spots, see your general practitioner (GP) as soon as possible.

What is skin cancer?

Skin cancer is the uncontrolled growth of abnormal cells in the skin. These abnormal cells usually form as a result of ultraviolet (UV) radiation damage.

There are three main types of skin cancer:

Basal cell carcinoma (BCC)

This is the most common, least dangerous form of skin cancer. BCCs grow slowly, usually on the head, neck and upper torso. A BCC may:

- appear as a lump or dry, scaly area
- be red, pale or pearly in colour
- ulcerate as it grows, or appear as a sore that fails to heal completely or heals but then breaks down again.

Squamous cell carcinoma (SCC)

These are less common than BCCs but may spread to other parts of the body if untreated. SCCs grow over some months and appear on skin most often exposed to the sun. An SCC may:

- be a thickened, red, scaly spot
- bleed easily, crust and ulcerate.

Melanoma

Melanoma may be life-threatening in as little as six weeks and, if left untreated, it can spread to other parts of the body. Melanoma can also appear on skin not typically exposed to the sun, such as the inner thigh or underarm.

Use the ABCD rule as a guide while examining your skin:

- A = Asymmetry, look for spots that are asymmetrical (one half of the spot doesn't match the other).
- B = Border irregularity, look for spots with uneven borders. Melanoma is often flat with an uneven, smudgy outline.
- C = Colour, look for spots with an unusual or uneven colour. May be blotchy and more than one colour – brown, black, blue, grey or red.
- D = Diameter, look for spots that are larger than 7mm.

Nodular melanoma is a fast growing and aggressive melanoma that does not follow the ABCD criteria above. It is often red, pink, brown or black and feels firm to touch. Nodular melanoma grows very quickly and needs to be treated as soon as possible.

Self-examination

Most skin cancers are found by people checking their own skin or are noticed by a loved one. Cancer Council recommends that all adults, particularly those aged 40 and over, should:

- get to know their skin

- check all areas of their skin regularly, including skin not normally exposed to the sun
- look for changes in the shape, colour or size of a spot, or a new spot – if you notice anything unusual, see your doctor straight away
- ask others to check difficult-to-see areas, such as the back.

Photographs of any suspicious spots can be useful to record any changes over time. If you are worried about any skin changes, talk to your GP.

Who can diagnose and treat skin cancer?

Cancer Council recommends that you first visit a GP to assess your skin. Although suspicious spots should be treated appropriately, harmless spots should not be removed unnecessarily.

GPs can examine your skin and advise you of appropriate care. GPs are trained in diagnosing and treating skin cancers, which may include minor procedures.

If you are at higher risk of skin cancer, speak with your GP about developing a surveillance program, which may include regular skin checks.

Your GP can also refer you to a dermatologist.

Dermatologists are doctors who have completed additional training to specialise in diagnosing and treating skin diseases, including skin cancer.

To see a dermatologist you should get a referral from a GP. You can see a dermatologist without a GP referral but your Medicare rebate may be smaller.

Book your appointment as soon as you can. It may be some weeks before you can get an appointment. If your case is urgent, your GP should be able to arrange an early appointment. If you live in regional Victoria, there may not be a dermatologist in the area; however, many regional areas have visiting dermatologists. Your GP should be able to advise you.

Skin cancer clinics

There are many skin cancer clinics offering a variety of services and fee arrangements. General practitioners – not dermatologists – are more likely to operate skin cancer clinics. If you wish to see a dermatologist or get a second opinion, you may ask for a referral.

Cancer Council Victoria does not operate or endorse any skin check service providers or skin cancer clinics.

Questions to ask

Whoever you decide to see, here are some questions you should ask.

- What are the qualifications, skills and experience of the person examining my skin?

If you are told you have skin cancer, ask:

- What type of skin cancer do I have (is it a common BCC or SCC or is it a potentially serious melanoma)?
- How advanced is the skin cancer?
- Do I need treatment immediately?
- What are the treatment options and the benefits and risks of the treatment options?
- What sun protection is required? Ask about skin cancer prevention.
- What follow-up is required?
- What costs are involved? Ask how much each procedure will cost and how much you will get back through Medicare. If you are in a private health fund, check first if any of these procedures are covered by your plan.

More information and resources

Consumer Guide to Skin Clinics and other information is available from sunsmart.com.au.

Melanoma and Common Skin Cancers patient booklets are available from the Cancer Council on 13 11 20 or cancervic.org.au.

UV-protective clothing and accessories can be purchased at Cancer Council Victoria's shop or online at www.cancerCouncilshop.org.au.

This information is based on available evidence at the time of review. It can be photocopied for distribution.

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