

Patient Diagnosis Resource for **MELANOMA**

Your Diagnosis

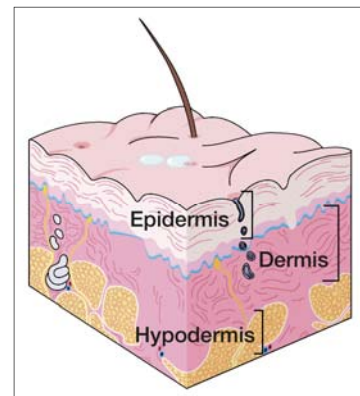
After completing a thorough lab analysis of your recent skin biopsy, a specialized doctor called a pathologist reported a diagnosis of melanoma, the least common but most aggressive form of skin cancer that accounts for just 4 percent of all skin cancer cases. Although it frequently affects younger people, the overall chance of having melanoma increases with age. Also, men develop the condition more often than women.

About the Condition

The skin is the largest organ of the body. Its top layer is the epidermis, which contains 3 types of cells that can become cancerous: melanocytes, basal cells and squamous cells. The main purpose of the epidermis is to provide protection against the environment. The second layer of the skin is the dermis, which supplies blood, oxygen, strength and support. Underneath the dermis is the hypodermis, or subcutaneous fat layer, which provides an ongoing blood supply to the dermis.

Melanoma occurs when the melanocytes — cells in the epidermis that give the skin its color — do not develop and die in their normal manner because of damage from long-term ultraviolet (UV) light exposure, usually from the sun. The extra cells that result form a cancerous (malignant) growth, or tumor, which may invade and damage surrounding areas or spread to other locations in the body (metastasize).

Tumors are often found on the torso, head, neck, arms and legs, but can affect other areas such as the palms of the hands, soles of the feet and under the nails. Their appearance may vary, but most are black or brown irregular patches or nodules. Occasionally, melanomas may stop producing pigment and appear flesh-toned, pink, purple or red.



People with fair skin, blonde or red hair and blue, green or gray eyes are at a higher risk for melanoma, as are those who have a family history of the condition. However, people with darker skin and eyes can also develop this form of skin cancer. Other risk factors include:

- ◆ Having many or large moles on the skin
- ◆ Working or spending much time outdoors
- ◆ Using tanning beds or other UV tanning devices
- ◆ Having a weakened immune system

Cancer that is confined to the epidermis, the uppermost layer of the skin, is the most manageable and curable. If malignant cells extend more deeply into the skin or into surrounding tissues, lymph nodes or other areas of the body, the treatment plan will be more complex and the cancer may not be curable. Many treatment options are available for patients with incurable melanoma to help minimize pain and improve quality of life. Talk with your doctor about your specific stage of cancer.

Treatment Options

Deciding on a treatment plan for your melanoma can depend upon a variety of factors such as your age, general health condition, stage of cancer and personal preferences. Sometimes more than one type of therapy may be used. The following treatment possibilities are available:

Surgery – The main form of treatment for melanoma is surgery, which removes the tumor along with surrounding tissue. In addition, nearby lymph nodes may be biopsied or removed. Stitches or a skin graft is usually required after surgery. In some cases, Moh's micrographic surgery is performed to treat melanoma. During this procedure, a tumor is removed in microscopic sections, one layer at a time. The surgeon examines each section under a microscope to determine if all of the cancer is gone, or if additional layers need to be removed.

Radiation Therapy – Another melanoma treatment method is radiation therapy, which uses a high energy X-ray machine to direct radiation at the tumor. Radiation therapy can be helpful in controlling metastatic melanoma and reducing symptoms.

Chemotherapy – The use of anti-cancer drugs, or chemotherapy, provides a way to slow tumor growth and reduce pain for patients whose cancer has spread. One particular method called isolated limb perfusion is sometimes used to treat melanoma that is located on an arm or leg.

Biologic Therapy – Newer treatment options such as interferon, interleukin and vaccine therapy are used to enhance the immune system's ability to destroy malignant cells and to reduce symptoms.

You may also consider participating in clinical trials. These investigative studies help doctors learn about new treatments and better ways to use established treatments. Talk with your doctor about the possibility of taking part in a clinical trial in your area.

What You Can Do

You can choose to take an active role in your health and well-being. Learn as much as you can about your condition and have a list of questions ready each time you meet with your doctor. Join a cancer support group, and talk with your family, friends, clergy person or counselor as you feel comfortable. Also, be sure to get enough sleep and eat healthy foods every day.

In addition, you should report any changes to your skin promptly to your doctor and take steps to prevent further skin damage and cancer. Avoid sun exposure, especially between 10 a.m. and 4 p.m. when UV rays are the strongest. You should also use SPF 15 or higher sunscreen that contains avobenzone (Parsol 1789), titanium dioxide and/or zinc oxide, applying it 20 minutes before going outdoors and again every 2 hours, or immediately after swimming or sweating.

Additional Resources

American Academy of Dermatology, 888.462.3376, www.aad.org
American Cancer Society, 800.227.2345, www.cancer.org
Skin Cancer Foundation, 800.754.6490, www.skincancer.org
The Melanoma Research Foundation, 800.673.1290, www.melanoma.org

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