

## Basal Cell Carcinoma

### ■ What is basal cell carcinoma?

Basal cell carcinoma is the most common type of skin cancer. It affects about 2.4 million people in the United States each year. It begins when healthy cells in the outer layer of skin change and grow out of control. Basal cell carcinoma most often develops on the head and neck, but it can be found anywhere on the skin. It is mainly caused by sun exposure or develops in people who received radiation therapy as children. It can also be caused by indoor tanning. This type of skin cancer usually grows slowly and rarely spreads to other parts of the body.



### ■ What is the function of the skin?

The skin is the body's largest organ. The skin protects the body from infection and injury and helps regulate body temperature. It also stores water and fat and produces vitamin D.

### ■ What are the signs of basal cell carcinoma?

Changes in the skin are the main warning sign for basal cell carcinoma. These changes include an open sore that bleeds, oozes, or crusts and remains open for several weeks; a reddish, raised patch or irritated area that may crust or itch, but rarely hurts; a shiny pink, red, pearly white, or translucent bump; a pink growth with an elevated border and crusted central indentation; or a scar-like, white, yellow, or waxy area, often with a poorly defined border. Talk with your doctor if you notice any skin changes or sores.

### ■ How is basal cell carcinoma treated?

The treatment of basal cell carcinoma depends on the depth and width of the cancer and where it is located. Many skin cancers can be removed quickly and easily using a simple surgical procedure, and often no additional treatment is needed. Radiation therapy may be used instead of surgery for skin cancer that is located in a hard-to-treat place, such as on the eyelid, tip of the nose, or ear. It is also used in some people who would like to avoid scarring from surgery. Sometimes radiation therapy may be recommended after surgery to help prevent the skin cancer from coming back. For skin conditions located only in the top layer of the skin, the doctor may prescribe chemotherapy as a cream or lotion or other topical treatments, such as photodynamic therapy, cryotherapy, or laser therapy. If locally advanced or metastatic basal cell carcinoma cannot be treated with surgery or radiation therapy, systemic treatment may be an option. Systemic therapy is medication given through the bloodstream to reach cancer cells throughout the body. When making treatment decisions, a clinical trial may also be considered. Clinical trials are an option to consider for treatment and care for all stages of cancer. Talk with your doctor about all treatment options.

### ■ What type of follow-up care do I need?

An important part of your follow-up care will be regular screening for new skin cancers, which should include whole-body skin examinations by a health care professional. This is because many people treated for 1 skin cancer may develop other skin cancers later. Also, people treated for skin cancer should protect their skin from the sun. Participate in outdoor activities before 10:00 AM or after 4:00 PM and wear long sleeves, pants, broad-spectrum sunscreen, sunglasses with UV protection, and a wide-brimmed hat to protect the skin against further damage.

# Questions to ask the health care team

Regular communication is important in making informed decisions about your health care. It can be helpful to bring someone along to your appointments to take notes. Consider asking your health care team the following questions:

- ▶ What type of skin cancer do I have?
- ▶ Can you explain my pathology report (laboratory test results) to me?
- ▶ Would you explain my treatment options?
- ▶ What clinical trials are available for me? Where are they located, and how do I find out more about them?
- ▶ Which treatment plan do you recommend? Why?
- ▶ What is the goal of each treatment? Is it to eliminate the cancer, help me feel better, or both?
- ▶ Who will be part of my treatment team, and what does each member do?
- ▶ How will this treatment affect my daily life? Will I be able to work, exercise, and perform my usual activities?
- ▶ Could this treatment cause changes to my appearance?
- ▶ If I'm worried about managing the costs of cancer care, who can help me?
- ▶ What long-term side effects may be associated with my cancer treatment?
- ▶ What is the chance that the cancer will come back or I will develop another skin cancer?
- ▶ How often should I have checkups to watch for other skin cancers?
- ▶ What steps should I take to prevent future skin cancers?
- ▶ If I have a question or problem, who should I call?

## Words to Know

**Basal cells:** Round cells found in the lower epidermis of the skin.

**Biopsy:** Removal of a tissue sample that is then examined under a microscope to check for cancer cells.

**Chemotherapy:** The use of drugs to destroy cancer cells.

**Cryosurgery:** A procedure that uses liquid nitrogen to freeze and destroy abnormal cells.

**Dermatologist:** A doctor who specializes in diseases and conditions of the skin.

**Dermis:** The inner layer of skin.

**Epidermis:** The outer layer of skin.

**Laser therapy:** A narrow beam of high-intensity light is used to destroy precancerous skin conditions.

**Metastasis:** The spread of cancer from where it began to another part of the body.

**Mohs surgery:** A surgical procedure to remove the visible tumor and small fragments around it. A microscope helps guide this procedure.

**Oncologist:** A doctor who specializes in treating cancer.

**Photodynamic therapy:** A topical medication is applied to precancerous skin conditions and then exposed to a special light-emitting device.

**Plastic surgeon:** A doctor who specializes in reconstructing skin to improve function or appearance.

**Radiation therapy:** The use of high-energy x-rays to destroy cancer cells.

**Tumor:** An abnormal growth of body tissue.

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