

Skin Cancer Myths and Facts

Myth: Skin cancer is not a deadly disease.

Fact: More than 11,500 people in the United States are expected to lose their lives from melanoma and other nonepithelial skin cancers this year. Most deaths are due to melanoma, the most dangerous form of skin cancer.

Myth: Skin cancer only affects Caucasians and those with lighter skin.

Fact: Everyone is at risk for skin cancer, though cases are most prevalent in those with lighter skin. People with fair skin are at a higher risk of developing skin cancer, especially fair-skinned individuals with freckles, blue or green eyes, and blond, red, or light brown hair. However, everyone is at risk of developing skin cancer and should take precautions, including seeking annual skin cancer screenings with a physician. In fact, though melanoma is less frequently diagnosed among African Americans, Latinos, and Asians than Caucasians, when found, it is frequently in late stages.

Myth: Tanning salons are a safe alternative to sun tanning without the risk of skin cancer.

Fact: A tanning bed produces UVA and UVB rays just like the sun. At times, the ultraviolet rays in a tanning bed may even be stronger than those emitted by the sun. UV radiation can cause skin damage and skin cancer.

Myth: Skin cancer is diagnosed only in people who have considerable exposure to the sun's rays.

Fact: Skin cancer can affect anyone, regardless of sun exposure, though it is more prevalent among those who have significant contact with UV rays, whether from the sun or man-made sources. Other risk factors include a personal or family history of skin cancer, as well as medical conditions and medications that suppress the immune system or increase your skin's sensitivity to the sun. It is important to apply sunscreen every day you may be outside, even on hazy days or days with light or broken cloud cover or shade, because UV light still permeates.

Myth: If the sun is not out or it is cold, there is no risk from the sun's damaging rays.

Fact: The sun constantly produces ultraviolet rays that can penetrate clouds and affect your skin even on overcast days or during cold weather. Snow, water, and sand reflect the sun's rays, making it important to wear sunscreen when you are around these elements. Remember that UV light is strongest between 10 a.m. and 4 p.m.

Myth: You only need to apply sunscreen once a day for proper protection.

Fact: Sunscreen only works for a limited time before reapplication is necessary. You should reapply sunscreen every two hours or according to the directions on the product label. Sunscreen should always be reapplied after swimming or participating in any activity that causes perspiration. Water-resistant sunscreens need to be reapplied every 40 or 80 minutes, according to the product label.

Myth: All sunscreens and tanning oils provide proper protection from the sun.

Fact: Experts recommend the use of a broad spectrum (protects against both UVA and UVB rays), water-resistant sunscreen with a sun protection factor (SPF) of at least 30. Reapply every two hours or according to the product label. Water-resistant sunscreens need to be reapplied every 40 or 80 minutes, according to the product label. FDA rules on product labeling prohibit sunscreen being labeled as

"waterproof," "sweatproof," or "sunblock." Wearing hats, sunglasses, and other tightly woven clothing to cover body areas exposed to the sun is encouraged.

About Texas Oncology

Texas Oncology is an independent private practice with more than 500 physicians and 210 locations across the state. Meeting the oncology needs of Texans for more than 35 years, the practice includes Texas Center for Proton Therapy, Texas Breast Specialists, Texas Oncology Surgical Specialists, Texas Urology Specialists, and Texas Center for Interventional Surgery. As a lead participant in US Oncology Research, Texas Oncology played a role in the development of more than 100 FDA-approved therapies. For more information, visit www.TexasOncology.com.

Sources: American Academy of Dermatology, American Cancer Society, Centers for Disease Control and Prevention, Skin Cancer Foundation, and U.S. Food and Drug Administration



