

SQUAMOUS CELL CARCINOMA

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PATIENT INFORMATION

SQUAMOUS CELL CARCINOMA is a major type of cancer that arises from the outer epidermal layer of the skin and mucous membranes and occurs most commonly on areas exposed to the sun. If untreated, squamous cell carcinoma may penetrate and destroy underlying tissue. In a small percentage of cases, this tumor can spread (metastasize) to distant organs and may be fatal.

Chronic sun exposure is the leading cause of squamous cell carcinoma, especially in people with fair skin, light hair and blue, green or grey eyes. Other factors that may contribute to the development of this cancer include burns, scars, exposure to radiation or chemicals, chronic inflammatory conditions and immunosuppression. Although more likely to develop in fair-skinned individuals, squamous cell carcinoma may occur in dark-skinned people, especially at sites of preexisting inflammatory conditions or burns.

Signs that may indicate the presence of squamous cell carcinoma include scaly red patches, elevated growth with a central depression, wart-like growths, nodules and open sores. All of these types of lesions may develop a crusted surface or bleed.

▶ HOW CAN YOU PROTECT YOURSELF?

Because chronic overexposure to sunlight is the leading cause of squamous cell carcinoma, sun avoidance, especially during peak sunlight hours of 10 a.m. to 3 p.m., is an important preventive measure to help reduce the risk of developing this skin cancer.

Limit skin exposure to the sun's harmful ultraviolet rays by wearing sunglasses, broad-brimmed hats and protective, tightly woven clothing. Furthermore, use a broad-spectrum sunscreen, rated SPF-15 or higher, on all exposed skin, including the lips, even on cloudy days. Reapply sunscreen frequently. Additionally, avoid tanning parlors and artificial tanning devices.

Inspect your entire body regularly for any skin changes, especially those already mentioned, and **routinely visit your physician for a skin examination.**

▶ TREATMENT OPTIONS

After sections of tissue from a biopsy of your skin are assessed under a microscope by a dermatopathologist and determined to be squamous cell carcinoma, your physician will recommend several treatment options. Your physician's recommendation for therapy depends on the size, location and subtype of squamous cell carcinoma. Your age and general health are also taken into consideration. The more common treatment options include excisional surgery, electrosurgery, radiation therapy and Mohs Micrographic Surgery. Your physician will discuss these treatment options with you.



DON'T BECOME A STATISTIC

Squamous cell carcinoma is the second most common skin cancer (basal cell carcinoma being the most frequent), affecting more than 250,000 Americans each year. When completely treated, the cure rate for squamous cell carcinoma is greater than 95 percent. The incidence of developing squamous cell carcinoma increases with age, and these lesions tend to occur more often in males than females. A person who has had one squamous cell carcinoma has an increased chance of developing another. Additionally, an individual who has previously had basal cell carcinoma has an increased chance of developing squamous cell carcinoma.

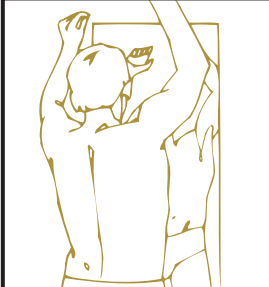
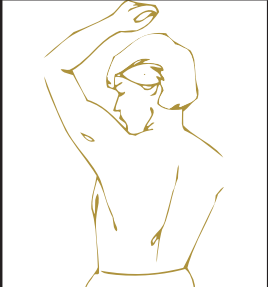


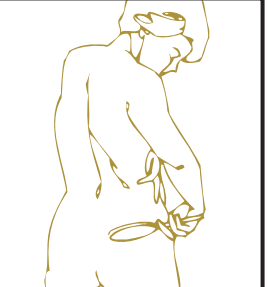
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PERIODIC SELF-EXAMINATION

Aids in the recognition of any new or evolving lesions. Consult your physician if changes are noticed.

				
STEP 1	STEP 2	STEP 3	STEP 4	STEP 5
Examine your body front and back in the mirror, then right and left sides, arms raised.	Bend elbows and look carefully at forearms and upper arms and palms.	Look at the backs of legs and feet, spaces between toes and soles.	Examine back of neck and scalp with a hand mirror. Part hair for a closer look at scalp.	Finally, check back and buttocks with a hand mirror.

Images and content provided by the American Academy of Dermatology

DO YOU WANT ADDITIONAL INFORMATION ON SQUAMOUS CELL CARCINOMA?

American Academy of Dermatology
888.462.DERM
www.aad.org

The Skin Cancer Foundation
800.SKIN.490
www.skincancer.org

National Cancer Institute
800.4.CANCER
www.cancer.gov

REFERENCES: **Berwick, M.** Worldwide incidence and mortality – rising or falling? *The Skin Cancer Foundation Journal* 16:40-41, 96, 1998.

Ng, P. and A.B. Ackerman. The major types of squamous-cell carcinoma. *Dermatopathology: Practical and Conceptual* 5(3): 250-52.



Passion for Patients is the expression of who we are and delivering patient care at the highest possible level is what we do. Our goal is to have every Dermpath Diagnostics associate exclusively focused on giving their best, realizing that there is a concerned patient, a life, behind every specimen and diagnosis. This patient centric goal is what drives the continual development of our Passion for Patients company culture.

To obtain more information about skin cancer and to learn more about the services Dermpath Diagnostics provides, please visit our website.

PASSION FOR PATIENTS

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