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100% Effective Natural Hormone Treatment
Menopause, Andropause And Other Hormone Imbalances
Impair Healthy Healing In People Over The Age Of 30!

Learning to Spot Suspicious Skin Conditions in the Prevention of Cancer

By Valerie Harker

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Skin cancer is the most common cancer that we deal with today and has increased 2000% since 1930. There are a lot of questions related to its causes and this frightening increase. The eroding ozone layer and our love of the outdoors for work and play, are certainly contributing to the condition. However, the fact remains that this killer disease is taking more victims all the time. It is essential for all of us to begin to think clearly about the possible reasons for the disease and to become familiar with the ways to prevent it.

What is skin cancer?

There are basically 3 types of skin cancer; basal cell cancer or carcinoma, squamous cell carcinoma and malignant melanoma. Basal cell carcinoma and squamous cell carcinoma are the most common forms of skin cancer the least dangerous, the least likely to spread and the most highly treatable in the case of early detection. Malignant melanoma is the more serious skin cancer but is also highly treatable in the early phases.

Basal cell carcinoma

This disease is most prevalent in blond, fair-skinned people. It can be identified as an ulcerlike growth that spreads very slowly and destroys tissue as it moves. A large pearly looking lump, is normally the first sign of this cancer. It can be found most often on the face by the nose, neck or the ears. Six weeks after it's initial presentation the lump will become ulcerated. The lump will display a raw, moist center with a hard border that may bleed. Eventually a scab will form over the ulcer and then come off. But the ulcer never fully heals and scab formation continues. Some basal cell carcinomas can be found on the back or on the chest. These are flat in appearance. Basal cell carcinoma is generally curable, it's slow development facilitating treatment. If they do go untreated however, they can significantly damage the layers of skin and bone beneath them.

Squamous cell carcinoma

This form of skin cancer is characterized by the development of lumps or tumors under the skin. These lumps start out as a thickened area that later breaks down and forms an ulcer with a crust that does not heal. They appear most often on the ears, hands, face, or the lower lip. Once again fair-skinned

people are at risk but most often they are over fifty years of age and have spent a lot of time outdoors. Squamous cell cancer is very treatable in the early stages.

Malignant Melanoma

Malignant melanoma is a skin cancer in which a tumor arises from the skin's pigment-producing cells. The most common forms of malignant melanoma originate in moles. Here are some of the characteristics of cancerous moles: Moles that are asymmetrical or have an irregular color or that are growing in size can be precancerous moles. Cancerous moles are generally larger than 5 millimeters in diameter (about the size of a pencil eraser) but a new mole, even if it is small should be checked. A lot of cancerous moles are very dark or have irregular pigmentation but some cancerous moles have no pigment at all due to cells that are so abnormal that they are not producing pigment.

Thickness is another aspect of mole anatomy that is important to consider. Cancerous moles that are

less than 1 millimeter thick and are removed have a very high cure rate. If a mole that is 4 millimeters or more has to be removed there is a strong possibility that it has already invaded the dermis and has access to the blood vessels. There is a very high possibility that the melanoma has spread or will spread to other areas of the body.

If you are blond, red haired, fair-skinned and have a tendency to sunburn you have a higher risk of developing skin cancer. Freckles, a family history of skin cancer, a blistering sunburn as a child or more than 100 moles on your body, are other factors that can put you at risk. If you are one of these people you should be thoroughly checked by a dermatologist from the top of your scalp to bottom of your feet. Even if you have none of these conditions, you should become familiar with the look of your skin. Be vigilant in spotting abnormalities or changes and then reporting them to a doctor. A regular full skin examination is painless and straightforward and it might just save your life.

Valerie Harker graduated from the University of Alberta with a BEd. Melanoma is a skin disease that has run in Valerie's family and has opened her eyes to the need for education and preventive treatment in skin care. For more information you can visit her site at:
<http://www.dna-repair-solutions.com>

Common Skin Conditions: Dermatitis and Moles

By Claire Bowes

Two of the most common skin conditions are the presence of moles and dermatitis. Moles can have more serious consequences than the irritation of dermatitis.

Moles occur when the cells in the skin that give it its pigment, called melanocytes, grow in clusters. These cells normally grow throughout the skin, but when too many grow in the same place a mole occurs. Most moles appear before the age of 25, but some may appear much later. Moles can remain static or change over time. Although most are not dangerous, some can be malignant and lead to melanoma. Any mole that oozes or becomes painful or sensitive should be checked out by a

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dermatologist. Moles that suddenly appear after the age of 25 or begin to change or grow should also be evaluated.

When evaluating your moles, keep the following in mind. Moles should be round. If your moles are asymmetrical, or irregular in shape, have it evaluated. If you find a mole that is larger than ¼", mention it to your doctor or dermatologist. If you find that your mole has an irregular or jagged edge, or is not all one color, have your doctor look at it. Finally, any mole that is red or blue may be cause for concern.

Treating moles is not difficult. If a mole is embarrassing, or becomes irritated under your clothing, you may ask your doctor to remove it. Moles can be frozen with a chemical, after which they dry up and fall off. Other moles can be simply cut off of the skin. Often, doctors will remove entire moles that seem suspicious and test the tissue for cancer. If any malignancy is found, they may cut out a slightly larger area of skin and then suture the site closed.

Check your skin regularly for changes in your moles. If any seem suspicious, or any changes have occurred, let your doctor know. Preventing a problem is as easy as going on "mole patrol."

Claire Bowes is a successful Webmaster and publisher of

. Claire provides

more information on her site about

that you can research at home.



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